The Synergy of Academic Engagement, Social Support, and Mental Health among Internally Displaced University Students from North and South Waziristan (Pakistan)

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KEYWORDS	ABSTRACT
	The present article aimed to investigate the relationship between academic engagement, social support and mental health outcomes of internally displaced persons. In this study, 100 university students with IDP cards from North and South Waziristan (76 boys and 24 girls) with ages ranging from 18 to 30 years old (M = 22.33, SD = 2.73), were included. Through the use of a purposive sample technique, the participants were selected from a variety of Lahore's private and public universities. Regression analysis and Pearson Product Moment Correlation were used to examine the data. The results showed that Academic engagement has significant positive relationship with social support i.e. support from significant others, family and friends. Dedication and the two subscales of social support—significant others and family—have a strong positive correlation. Absorption is also found to have significant positive relationship with social support i.e. support from friends, family and significant others. There is a strong correlation between social support and vigor. Mental health is found to have significant positive relationship with Academic engagement i.e. dedication, absorption and vigor. Mental health is also found to have significant positive relationship with social support i.e. Significant others, friends and family. Friendship support and vigor (academic engagement) are important indicators of mental wellness.
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1.0 Introduction

In the last few decades, academic engagement has gained more popularity in the eyes of researchers and educators as it is involved in increasing student's motivation towards academic activities and enhancing their academic skills. Academic engagement is a protagonist in the development of interest of academic activities (Appleton, Christenson, & Furlong, 2008; Carter, Reschly, Lovelace, Appleton, & Thompson, 2012). As education is a basic human right but few people face conflicts and hindrances in gaining educations. These difficulties are specifically faced by internally displaced students. Thus, displacement affects their academic engagement. They are usually deprived of equal educational opportunities and platforms to represent themselves as equal entities like other students. These complications not only affect their academic achievement but also affect the mental health of the internally displaced students and make them more vulnerable for many psychological problems. Under such circumstances, social support provided by the people around them is very important for increasing academic achievement and reducing stress (Ahmad, Hussain & Shaheen, 2020).

1.1 Internally displace persons (IDPs)

Human beings are required to leave their places involuntarily due to tragedies whether accident or earthquake or manmade to better and safe place. The main reason of this internal displacement is struggles and battles. An individual who are required to leave their homes and country but as a dissimilar immigrant, they continue within their nation's boundaries are known as Internally displaced persons (IDP). Main reasons of their migration to safer place are disasters either natural or manmade, conflicts with army and human rights, and circumstances of global cruelty. As research suggests that presently approximately 20 million IDPs universal, roughly double the entire figure of immigrants. Women and children reported more as IDPs around 70 and 80%. Most of them belong to low socioeconomic background and country that suffering from territory and conflicts, their basic and psychological needs are not fulfilled (Thapa &, Hauff, 2005).

In the north west of Pakistan, IDPs with large numbers are migrating. According to the report of International Displacement Monitoring Center (2014), in the North West part of Pakistan about five million individuals are internally displaced. As the history of Pakistan, this is largest internal displacement ever reported. 175 primary schools were demolished and devasted in Swat Valley as reported by Government of Pakistan, primary and high school education Khyber Pakhtunkhwa (2012). Devastation has been worsening the circumstances for students of school and in a result thousands of students and children have experienced and left underprivileged from their education right. Pakistani study in three districts of Khyber Pakhtunkhwa showed that due to conflicts

600,000 children were facing problem of one or more years of schooling. Nowadays, studies are focused on mental and psychological health issues around the world and in Pakistan. However, the relationship between mental health and internally displaced with academic outcomes of children during their displacement are highly ignored. This study was intended to find the association of internal displacement of students with mental health problems and education (Ferris &Winthrop, 2011).

1.2 Aims and Objectives

The present study had the following aims:

1. To determine the relationship between Academic engagement, social support and mental health of internally displaced persons studying in Lahore.
2. To inspect the effect of Academic engagement and social support on mental health of internally displaced persons studying in Lahore.
3. There is likely to be a positive relationship among Academic engagement, social support and mental health of internally displaced persons studying in Lahore.
4. Academic engagement and social support are likely to be the predictors of mental health of internally displaced persons studying in Lahore.

2.0 Literature Review

2.1 Academic engagement

Academic engagement can be defined as the active participation of students in the activities related to academics such as learning, acquiring skills, getting knowledge and conducting researches to open new gateways of knowledge (Harrison, 2013). It is being proposed that the academic engagement is related to the better learning results such as improvement in the grades (Carini et al., 2006), perseverance (Hughes & Pace, 2003), and decrease in psychosomatic stress (Schaufeli et al., 2002). It is also found that academic engagement helps students to evolve and grow in their respective field (Ruohoniemi et al., 2010) and achievement of other accolades (Diseth, 2007; Heikkilä&Lonka, 2006). According to literature the academic engagement not only improves the academic skills but also have positive effect on the study experience. Thus, it can be assumed that academic engagement is gives rise to better learning atmosphere (McCormick et al., 2013).

2.1.1 Dimensions of academic engagement

The academic engagement is a construct having multiple dimensions and is based on various components. It includes cognitive engagement, behavioral engagement and emotional engagement. The behavioral engagement involves the evident and recognizable involvement of students in the achievement of academic skills such as group activities and active participation in acquiring knowledge. The cognitive engagement involves covert level of engagement specifically at psychological level in

67

understanding and acquiring knowledge (Fredricks et al., 2004). The emotional engagement specifically involves feelings and emotions attached with academic's institutions, faculty, class mates and academic responsibilities (Fredricks, et al., 2004). In our society more attention is usually given to the behavioral engagement rather than emotional or cognitive engagement due to which more studies are required in other dimensions of academic engagement (Sakurai, et al., 2015).

2.1.2 Factors affecting students' academic engagement

The academic institutes such as schools, colleges and universities are not only confined to give academic knowledge to a student but also play an important role in enhancing his social skills and psychological wellbeing (Fraser, 1998). The individual characteristics as well as the environment around him is very important (Entwistle et al., 2003). In order to enhance academic engagement, a healthy surrounding or environment is necessary. A good learning environment includes healthy teacher-student relationship, distinctive objectives, harmonious learning content and self-directed learning options for students. Other studies have also identified numerous factors that affects the academic engagement of the outsiders such as challenges students face during the cultural adaptation, adjustment with new language and unaccustomed academic norms (Campbell & Li, 2008).

2.3 Social support

The term social support doesn't need to be defined as it is clear and speaks for itself. In general, it can be demarcated as the support provided by people to each other by caring, loving and valuing each other (McDowell and Newell, 1996). Social support is divided into different categories. Based on the content of social support there are mainly three types of social support the first one is emotional support provided by loving and liking others. Secondly, instrumental support which is usually provided by giving tangible things to other person in need. Thirdly, the informational support which can be given by providing information about self-evaluation and the environment. In order to categorize social support on the basis of its degree then there are two types one is perceived social support and the other is objective social support (Caplan, 1979). Last but not the least if we characterize social support on the basis of its context then their routine support provided during normal conditions whereas the non-routine support provided during calamity (Lin, Dean, and Ensel, 1986).

2.3.1 Effects of social support

A number of researches have speculated the relationship between social support and mental health outcomes (McDowell and Newell 1996). According to Langford (1997) social support is one of the important factors for sound mental health and wellbeing. Social support is also considered to have great influence on the mortality rate, and it is

well researched that social support helps to decrease the mortality rate as compared to those who lack in social support. Also, social support is very important factor in treating various illnesses (Wills, 1997).

According to Berkman (1995) social support doesn't have positive effects on psychological health but also on the physical health. Social support plays important role in promoting the health of people suffering from myocardial infarction (Wills 1997).

2.3.2 Social support and mental health of IDP

As suggested by literature there found to be significant link between various mental disorders and social support but there is lack of literature which would suggest the role of social support as a mediator or a moderator (Avison 1996). For sound mental health, social support is very important and especially when an individual is suffering from some stress. There are number of negative effects of stress such as poor self-esteem, greater vulnerability of illnesses and lack of self-care. Under such circumstances social support plays a major role in eradicating the harmful effects by decreasing the loneliness, help in coping and increase in self-care and self-worth of the effected individual (Cooper et al. 1999).

2.3.3 Social support and academic engagement

It is assumed that social support plays an important role in the academic engagement as well as the academic achievement of students. This assumption is based on the theory given by Lakey (2000). According to him, when students are being promoted from school to higher education they get effected by the stress. This stress majorly comes from the environment around them. Mostly due to lack of social support students fail to prove themselves in academics. Under such circumstance's parents, teachers and friend around can play a significant role in academic engagement of the students (Wang & Eccles, 2012).

2.4 Mental Health

Mental health can be defined as a person understand his or her own capabilities as a state of wellbeing and can deal and manage their life stressors, can effort effectively and abundantly and serve their community. In this optimistic logic, psychological wellbeing is the basis for happiness and wellbeing and productive working for a person and for a society. Psychological comfort stated to have minor and absence of any psychological illness; it is essential to persons, relatives and cultures, and regulate by surroundings and socioeconomic aspects and behaviors. Mental or Psychological health observe as how individual think or imagine, perceive and sense, independently and together. Circumstances that damage psychological health also destroy the gratification and satisfaction of life and generate severe or long-lasting trauma, which occasionally consequences in psychological illness (WHO, 2004).

2.4.1 Mental health of internally displaced persons

IDPs are mostly affected by their physical health and mental health. They lose their self-esteem, self-efficacy, power and experienced distress in their life. According to study, 25% IDPs said that they did not feel themselves competent and capable and cannot do any productive work. Generally, most of them experienced hopelessness, depression, stress, feelings of tiredness and lethargy and prohibited individuals to engage and start a new life by improving their circumstances. In IDPs, nearly quarter of them had high frighten capabilities and said they were continually anxious and worried. A resulting growth in common psychological disorders in displaced populaces, post war about the world is well recognized (Salah et al, 2013). In Afghanistan, a bordering tribal area conflicts that are related with fights of wars, normal routine life tension, stressors and distressing events are positively associated with problems of psychological health (Panter-Brick, et al., 2009). Furthermore, it is reported that Afghanistan and Pakistan are reported high prevalence of psychological disorders (Cardozo, et al., 2004). Pakistan are reported twice as high as somewhere else in the world (Mirza & Jenkins, 2004) and it should be understood and clarify carefully as it is much higher than any other developed countries (Ventevogel, 2005).

2.4.2 Academic engagement and mental health of internally displaced persons

Research suggest that when persons migrate from their country disasters, mostly youth and children experienced three types of dangers in their life that is physical, mental and academics. The amount to which resettlement have influence the educations can be recognized by attitudes, welfare and inspiration to the students for their education after migrating or displaced to better place (Lori, 2008). One of the studies by Rahha (2006) was done to know the effect of stressors on students' academic and to know the results of displacement in Lebanon after facing disasters and war. They examined academic achievement and stages of hostility in school children. As a result, showed that the children who faced disasters and conflicts are tended to be high level of anger and hostility. However, it also showed that their educational performances were decreased due to disasters they faced (Richardson, 2005).

2.4.3 Academic engagement, social support and mental health of internally displaced persons

Usually, social support was measured as the interchange by speaking and body language communications associated to data of feeling conveyed to support to decrease person's anxiety or ambiguity (Wang, 2012). Academic engagement can be recognized as the number of time and struggle that undergraduate scholars devote on academic projects that are connected to institution work (Kuh, 2009). According to Mackinson (2011), social support results on academic engagement are considered as serious to the

project and application of participations which consume the prospective to expressively progress the psychological health, societal support, and academics outcomes.

3.0 Methodology

The current study sought to determine how internally displaced people's mental health, social support, and academic involvement were related. The research design, sample plan, psychological assessments, and methodology of the current study are all included in this article**.** The association between internally displaced people's mental health, social support, and academic participation was investigated using the correlation study design. In the present study the data was collected by using purposive sampling strategy. A total of 100 participants in the age range of 18 to 30 (M = 22.33, SD = 2.73 years) were recruited from universities in both the public and private sectors.

The included participants of the research study have following characteristics:

- Age range between 18-30 years
- University students studying in Lahore who are internally displaced
- Students (IDPs) from north and south Waziristan having IDPs card
- The participants who can comprehend English language

The excluded participants of the study with following characteristics were excluded:

- The participants who were having some physical disability
- The participant who were having any psychological disability

4.0 Measuring Instruments

The following measuring instruments were used in the present study.

4.1 Demographic Questionnaire

The demographic sheet was developed to obtain personal information of the participant. This questionnaire included information regarding age, gender, education, number of siblings, birth order, family system, family income and presence or absence of any physical or psychological disability in participant.

4.2 Work and wellbeing survey. ([UWES-S]; Schaufeli & Bakker, 2003)

The student work and wellbeing survey consists of 17 items. It assesses academic engagement of the students. It consists of 7-point likert scale ranging from 0 (Never) to 6 (Always). It consists of three subscales i.e vigour, absorption and dedication. The items included are for example 'At my work as a student, I feel bursting with energy, 'Time flies when I'm studying etc. The Cronbach's α coefficient for the subscales of vigor, dedication and absorption is .63, .81 and .72 respectively which indicates high internal consistency of the subscales (Schaufeli & Bakker, 2003).

4.3 The Multidimensional scale of perceived social support. ([MSPSS]; Zimet, Dahlem, Zimet& Farley, 1988)

The Multidimensional scale of perceived social support consists of 12 items. It consists of 7-point likert scale ranging from 1 (very strongly disagree) to 7 (Very strongly agree).

71

The items included are for example 'My family really tries to help me', I have a special person who is a real source of comfort to me etc. It consists of three subscales i.e significant other, family and friends. The Cronbach's α coefficient for the subscales of significant other, family and friends are .91, .87, and .85 respectively, which indicates high internal consistency of the subscales. The reliability of full scale is .88 and the test re-test reliability of whole scale is .85. The validation studies indicated that the perceived social support from family has significant negative correlation with depression (r=-.24) and anxiety (r=-.18) subscales of Hopkins symptom checklist. The perceived social support from friends has significant negative correlation with depression subscale (r=-.24) but not to anxiety subscale. The perceived social support from significant other has significant negative correlation with depression (r=-.13) subscale of Hopkins symptom checklist.

4.4.Mental Health Inventory. ([MHI-38]; Veit& Ware, 1983)

The mental health inventory consists of 38 items. It assesses psychological distress and wellbeing of the participants. Higher score indicates high global mental health. It consists of 6-point likert scale ranging from 1 (Never) to 6 (Always). The items included are for example 'Did you feel depressed during the past month?', 'How often have you felt like crying, during the past month?' etc. The Cronbach's α coefficient is .93, which indicates high internal consistency of the inventory (Veit& Ware, 1983).

5.0 Reliability Analysis

First the reliability analysis of scales was run to calculate the Cronbach alpha values of measuring instruments.

Table 5.1

Psychometric properties of the measures Work and Wellbeing Survey, Multidimensional scale of Perceived Social Support and Mental Health Inventory (N=100)

Measures	n	M	SD	α	Range		Skew
					Actual	**Potential**	
Work and wellbeing	17	59.18	21.53	.90	2-102	0-102	.05
Dedication	5	18.77	7.24	.77	0-30	0-30	-.04
Absorption	6	20.17	8.50	.77	0-36	0-36	.13
Vigor	6	20.84	7.77	.72	2-36	0-36	-.007
Social support	12	53.03	13.93	.88	17-84	12-84	-.25
Significant Others	4	17.08	6.08	.84	4-28	4-28	-.25

Family	4	18.24	5.39	.78	4-28	4-28	-.35
Friends	4	17.71	5.04	.74	4-28	4-28	-.51
Mental Health Inventory	38	139.04	24.69	.90	71-193	38-226	-.10

According to the above table, work and wellbeing survey has high internal consistency i.e. .90. There are three subscales of Work and Wellbeing Survey i.e. Dedication, Absorption, Vigor had Cronbach's alpha of a= .77, .77 and .72 respectively. The Cronbach's alpha of subscales of Work and Wellbeing Survey reveal that there is high internal consistency. Table also shows that Multidimensional scale of Perceived Social Support has high internal consistency that is 84. There are three subscales of Multidimensional scale of Perceived Social Support i.e. Significant others, Family and Friends with Cronbach's alpha of a= .84, .78 and .74 respectively which are high internal reliability values. There is high internal consistency of Mental Health Inventory that is .90. Overall reliability values of their measuring instrument were found to be highly reliable. The values of skewness are below absolute 2 which indicate that the distribution is symmetrical.

5.2 Descriptive Statistics
Table 5.2

Showing the percentage and frequency of the participant demographic characteristics (N=100)

Participant characteristics	*f*	%
Gender		
Male	76	76
Female	24	24
Education		
BS, MSC	92	92
MS, MPHIL	8	8
Birth Order		
First Born	23	23
Middle born	48	48
Last Born	26	26
Only Child	3	3
Family system		
Joint system	73	73
Nuclear system	27	27
Family Income		
10000-30000"	28	28
31000-70000	43	43
71000 and above	29	29

Presence of physical illness		
Yes	0	0
No	100	100
Presence of psychological illness		
Yes	0	0
No	100	100

Table 5.2 shows that most of the participants (76%) are men and 24% are women. More than half of the participants (73%) lived in joint family system. All the participants (100%) reported no physical illness. And all participants reported no psychological illness (100%).

5.3 Regression Analysis
Table 5.3
Linear Regression shows Vigor, Support from Friends and Mental Health.

	Mental health	
Predictors	B	β
Constant	91.47***	
Vigor	1.19	.28***
Support from friends	1.28	.44**
R^2		.25
F		16.40***
ΔR^2		.06
ΔF	8.47**	

Note. * $p<0.05$, ** $p<0.01$, *** $p<.001$

The model was significant at alpha level *p<.001*, which indicated that the vigor and support from friends are significant predictors of mental health. The model was able to account for 25% of the variance in mental health due to the vigor and support from friends. It means that vigor and support from friends are significant positive predictors of mental health, which indicates that the mental health increases with increase in vigor and support from friends.

6.0 Discussion and conclusion
The present study was conducted to find the relationship between Academic engagement, social support and mental health of internally displaced persons. Reliability

Analysis of the measuring variables used in the research was calculated first. Following inferential statistics including Pearson Product Moment correlation was run to see the association between the variables. Results of present study are discussed below in reference to the literature, cultural context and theoretical framework. The total sample (N=100) was taken from internally displaced persons. It was hypothesized that there will be positive relationship between Academic engagement, social support and mental health. For this purpose, correlation analysis was conducted which showed strong positive correlation among the measuring variables. The second hypothesis stated that Academic engagement and social support are likely to be the predictors of mental health. Results showed that there work and wellbeing survey (Academic engagement) has significant positive relationship with social support as well as all three subscales of social support i.e. significant others, family and friends. It implies that academic engagement increases with increase in social support from friends, family or significant others and vice versa. It depicted that as social support is positively associated with academic engagement in youngsters and adults (Folkman et al., 1986) and social support from parents and peers are important factors from students to progress and engage in their academics (Klem & Connell, 2004). The finding of current study is in accordance with previous studies that social support is associated with academic engagements of undergraduates (Jayarathna, 2014). Moreover, social support provided by the people around them is very important for increasing academic achievement and reducing stress (Ahmad, Hussain & Shaheen, 2020).

A significant positive relationship is found between dedication and two subscales of social support i.e. significant others and family. As academic engagement was improved by the social support (Lakey, 2000) and mostly due to lack of social support students fail to prove themselves in academics. Under such circumstance's parents, teacher, and peer support have a significance role with higher education of student (Wang & Eccles, 2012). Mental health inventory is found to have significant positive relationship with Work and wellbeing survey (Academic engagement) and all of its three subscales i.e. dedication, absorption and vigor. It signifies that mental health increases/decreases with increase/decrease in academic engagement. Persons migrate from their country disasters, mostly youth and children experienced three types of dangers in their life that is physical, mental and academics. Children who faced disasters and conflicts are tended to be high level of anger and hostility. However, it also showed that their educational performances were decreased due to disasters they faced (Richardson, 2005). This finding is consistent with previous researches that in Afghanistan, a bordering tribal area conflicts that are related with fights of wars, normal

routine life tension, stressors and distressing events are positively associated with problems of psychological health (Panter-Brick, et al., 2009).

Academic engagement has significant positive relationship with social support as well as all three subscales of social support i.e. significant others, family and friends. It implies that academic engagement increases with increase in social support from friends, family or significant others and vice versa. A significant positive relationship is found between dedication and two subscales of social support i.e. significant others and family. Absorption is also found to have significant positive relationship with social support as well as support from friends, family and significant others. There is significant positive relationship between Vigor and social support as well as all three subscales of social support. Mental health is found to have significant positive relationship with Academic engagement and all of its three subscales i.e. dedication, absorption and vigor. It signifies that mental health increases/decreases with increase/decrease in academic engagement. Mental health is also found to have significant positive relationship with social support and all of its three subscales i.e. Significant others, friends and family. It signifies that mental health increases/decreases with increase/decrease in social support from all three above stated domains. A significant negative relationship is found between no. of siblings and Academic engagement and all its three subscales i.e. dedication, absorption and vigor. It implies that as the no. of sibling increases the academic engagement decreases and vice versa. Moreover, birth order is found to have significant positive relationship with vigor which signifies that as the people with higher birth order tend to be more vigorous in academic engagement. Vigor and support from friends are significant predictors of mental health.

7.0 Limitation and Suggestion

Like all other researchers the present study also has some limitations. The limitations and suggestions regarding present study include

- The data was collected online which led to low response rate. For future researches, data should be collected by approaching participants in person.
- Some of the students might have attempted the questionnaire carelessly which might have affected the results.

8.0 Implications

- The present research will provide insight to future researchers regarding the relationship

Academic engagement, social support and mental health of internally displaced persons.

- The research will use the feedback from field experience in incorporating some changes in the next version of the questionnaire.

- Counseling and other interventions can be provided to those who cannot able to engage in their academics and want to seek help regarding their academic engagement.

Contributions

Sharif Shah: Problem Identification and Model Devolvement

Aqsa Rajpoot: Literature search, Methodology

Ayesha Khalil: Drafting and data analysis, proofreading and editing

Conflict of Interests/Disclosures

The authors declared no potential conflicts of interest w.r.t this article's research, authorship, and/or publication.

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