

Mind your students

A first exploration in mental health support for Cambodian students

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ABSTRACT

This paper tries to explore the necessity and different possibilities of mental health support for students enrolled in the higher education field in Cambodia. The paper stresses the importance of mental health support in Cambodian students by highlighting the high prevalence of mental health disorders in the Cambodian population in general and the rise in mental distress within students worldwide. It gives broad recommendations on how to raise mental health knowledge in students and school employees as a starting point for better mental health support in Cambodian higher education. Furthermore it stresses the importance of more research on (study) related mental health distress in Cambodian students to develop tailor made interventions to ensure a better mental health for Cambodia's future generation.

Keywords: Cambodia, students, mental distress, higher education, counselling

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MENTAL DISTRESS IN STUDENTS

Mental health (problems) within higher education students is getting more awareness in the last years. Although higher education is often linked with lower chances of mental health problems, research shows that mental health problems in students is more common than first thought. In the United Kingdom for example, surveys found that up to 78% of students in the age of 18 - 20 years experienced mental health related distress of which 13% consisted of having suicidal thoughts (National Union of Students, 2013). In a survey done in 2014 under American college students 33% of the students reported to feel so depressed in the last year that it impaired their functioning (ACHC, 2014). And in a worldwide survey done by the AUCCCD in 2012 95% of the surveyed college counselling centres directors reported an increase of severe psychological problems in their students and reported growing concerns for the mental health of their students in general. More examples of a high rate of mental distress in students can be found in numerous other studies. These examples show that the mental health of students is a growing concern in higher education worldwide.

In this alarming trend of growth in mental health problems in students worldwide, the state of the mental health of Cambodian students is unknown. There are no studies about experienced distress or possible mental health disorders in higher education students in Cambodia available. Meanwhile the field of higher education in Cambodia is growing rapidly in the last 10 years (Vuth & Dash, 2017). This suggests a growing need for educational facilities such as mental health support for students. Since statistics are scarce the exact prevalence of mental distress, and need for support thereby, in Cambodian students can only be guessed. By looking at the studies on mental health in Cambodia's general population that is currently available, we can try to get an impression of the possible need of mental health facilities in Cambodia's higher education field.

CAMBODIA'S MENTAL HEALTH BURDEN

Cambodia is a country with a turbulent and violent history. Although the country is over three decades removed from the Khmer Rouge and the Vietnam War their remnants can still be found everywhere in daily Cambodian life. From the demographics of Cambodia to the educational needs to the state of health care, modern Cambodia shows her scared past but is growing over this in a rapid rate. Examples for rapid changes can be found in higher education (Vuth & Dash, 2017) and in General Health statistics of the country (World Health Organization, 2015). Although these signs of growth in many areas of life in Cambodia, mental health care still seems to be faltering behind. The estimated mental health burden in Cambodia are staggering high, especially when compared with worldwide prevalences. Estimates prevalences for mental health related problems in Cambodia are reaching up to 80% for mood related disorders and up to 86% for symptoms of trauma related disorders. Whereas the worldwide estimates are significantly lower with prevalences of respectively 9.6% and 15% (Table1).

Table 1*Estimated prevalences of mental health problems in Cambodia and Worldwide*

<u>Mental health problems</u>	<u>Prevalence in Cambodia</u>	<u>Prevalence worldwide</u>
Anxiety disorders	27.4 - 53%	2.4 - 18.2%
Mood disorders	11.5 - 80%	0.8 - 9.6%
Post Traumatic Stress Disorder	2.7 - 86%	1 - 15%
Alcohol related problems, age <36	2%	-
Suicide attempts	4.2%	2.7%

These prevalences are already giving a signal about the mental health burden in Cambodia by themselves, but are even more alarming if you keep the scarce mental health infrastructure in Cambodia in mind. In 2010 there were around 35 Psychiatrists and 45 psychiatric nurses in the whole of Cambodia trying to provide mental health care for a total population of around 15 million people. (Mental Health and Human Rights in Cambodia, 2012).

If we take the recent global growth of mental distress in higher education students and place this against the mental health burden of the general Cambodian population it is safe to assume that there is a big possibility of high mental distress in Cambodian higher education students. Although, as stated earlier, more specific studies in this area are not available at this moment and are needed to make this assumption significant. Still this suggests multiple challenges for schools who provide higher education in Cambodia and raises multiple questions that schools will need to answer to provide a healthy environment for their students.

Questions as: 'how high is the mental distress in students enrolled at my school?', "what are the types of mental distress experienced?", "which mental health disorders are prevalent?" and "what are reasons for the experienced distress?" are questions that can give more insight in the needs of their enrolled students. This suggests a need for investment from schools in order to provide research to answers to these questions and ultimately provide effective mental health support to their students. Before we look at possible implementations of mental health support it is necessary to explore what the possible gains are for students, schools and employees to justify this investment.

IMPLICATIONS OF HIGH MENTAL DISTRESS IN STUDENTS

Mental distress is a term used in the field of mental health care and can be defined as an unpleasant mental or emotional state, which often is impairing one's ability to cope with day-to-day living (Gebru, et.al. 2014). Mental distress differs from mental disorders in the fact that mental distress only contains a couple of symptoms found in mental disorders. Ongoing high levels of distress are known to impair healthy functioning in people and without adequate coping, prolonged distress can result in mental health disorders as anxiety and mood disorders. When left unattended, prolonged high level of stress during students' college years can even result in burn-out and other mental, as well as physical, impairments later on in adulthood (Seyle, 1975; Riley, 2004).

Besides the direct impact of mental distress on students' physical and mental well-being, there is also an effect on general academic success of students. Brackney and Karabenick (1995) found a relationship between mental distress and academic performance. Higher levels of distress were found to lower self-efficacy significantly. Lower self-efficacy on its turn is known to have a direct negative impact on academic performance of students (Yusuf, 2011). Furthermore, high levels of mental distress are related with difficulties concentrating and paying attention, which both are influential in achieving academic success (Shankar & Park, 2016). Drop-out rates are also related with mental distress. A 2012 survey done by NAMI showed that 64% of students who dropped out of college report mental health related problems as the main reason for not attending college.

These studies suggest that there is an opportunity for schools in Cambodia to improve the mental well-being of their students, as well as raising academic success and improving passing rates. In this way, schools can provide more future healthy employees by reducing mental distress in their students.

How can schools start giving support for distressed students? Mental health support can be given in more ways than one. We will discuss two possible implementations for higher education institutes in Cambodia. These two implementations are chosen based on the effectiveness, the ease for implementation and the known specifics of the mental health burden in Cambodia.

POSSIBLE STARTING POINTS FOR MENTAL HEALTH SUPPORT IN HIGHER EDUCATION INCREASING MENTAL HEALTH KNOWLEDGE

A first important and easy to implement step for schools to provide mental health support is raising knowledge about mental health in their students. A part of the mental health problem that Cambodia is facing is a stigma on people with mental health related problems. Research of Leitner in 2012 even states that people with mental health problems, and their families, are often isolated from society and excluded from social interaction in general. This stigma together with a general lack of knowledge results in poor recognition of mental health problems and possible treatments. This reduces help-seeking for mental health problems.

Negative attitudes on mental health are often internalised which results in self-stigma which further reduces help-seeking behaviour and increases mental distress (Corrigan, Druss & Perlick, 2014). Raising knowledge of mental health is known to reduce stigma related to mental health and mental disorders. It also helps people to recognize mental distress in their selves and peers and improves knowledge about available treatments (Kutcher & Hashish, 2016).

Besides the effect on students, raising knowledge of mental health should also be applied to school employees in general. Research shows that educating employees at school about mental health increases general mental well-being of students and helps school employees to better recognize and support students in distress (Frauenholtz, Mendenhall & Moon, 2017).

Increasing mental health knowledge and reducing stigma on mental health can be seen as a part of increasing Mental Health Literacy (MHL) as a whole. MHL is the foundation for mental health promotion, effective acknowledgement of prevention of mental disorders, and provision of evidence-based mental health care. It can be seen as empowerment competency for people to engage in their own health care (Kutcher & Hashish, 2016). By using simple interventions in college and schools MHL in students can increase significantly. The MindMatters project, applied at schools in Australia, is an example of this practice which showed a positive effect on overall MHL in students (MindMatters Evaluation Consortium, 2000).

SCHOOL COUNSELLING

A second step in increasing mental health support in higher education can be the implementation of school counselling. School counselling has proved having many beneficial effects on schools and students (Prout & Demartino, 1986) Research shows that it reduces the amount of drop-outs at schools, increases the academic performances of students and creates better behaviour in classrooms (Wirth-Bond, Coyne & Adams, 1991; Mullis & Otwell, 1997). There is a severe lack of information about possible effects from school counselling on students in non-western countries like Cambodia. Cultural differences can be expected to be of influence in the way counselling should be given in order to be effective. Research about general counselling in Cambodia shows that counselling in the form of 'talk-therapy' is, without a doubt, also working in Cambodia (van de Put & van der Veer, 2005). Which hopefully will be similar in school counselling. More research is needed to make statements of the effect of school counselling in Cambodia, but the available data is showing positive prospects.

Besides the cultural differences, the lack of a mental health care infrastructure in Cambodia can be a challenge for effective school counselling. Effective counselling practice is focused on prevention and on supporting students in need as well on being a gatekeeper to guide students to professional mental health care when needed. With a limited network of professionals available, the role of school counsellor in Cambodia can be a challenging one in this regard.

INCREASE RESEARCH FOCUSED ON MENTAL HEALTH IN CAMBODIAN STUDENTS

Although not a direct effect on mental distress of students, research should be the starting point from where mental health support can be provided. Most of the information used in this paper is based on western societies and different age groups of students. From this information we can only make educated assumptions to the situation in higher education in Cambodia. The research targeted at Cambodia that is available is focusing on the general population and is not specific to students enrolled in higher education in Cambodia. To apply effective mental health support, more research is needed on experienced stressors, precursors and prevalence of mental distress in in Cambodian higher education students. Furthermore, studies on some mental health disorders with a strong effect on students performance, like Attention Deficit and Hyperactivity Disorder and Autism, are not available at all in Cambodia but can be expected to be prevalent in students.

CONCLUSION

This first exploration in mental distress in Cambodian high education students shows the need for more awareness on their mental well-being. There is a severe lack of studies focused on mental distress in Cambodian higher education students. Meanwhile there is enough reason to assume that mental distress will be prevalent in higher education students in Cambodia. Further research focused on distress in this group is therefore necessary. Seeing the specifics of the mental health burden in Cambodia, increasing Mental health knowledge and providing school counselling are two relatively easy to implement steps to start providing mental health support. There is a potential high need and 'reward' for students, employees and higher education facilities in giving mental health support. Which is further urging the need of more attention to this area in higher education in Cambodia.

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