

The Role of Health Education in Promoting Mental Well-being Among University Students in Zambia

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Abstract

Mental well-being among university students is a critical issue that influences academic performance, personal development, and overall quality of life. This study investigates the role of health education in promoting mental well-being among university students in Zambia. The research employs a mixed-methods approach, combining quantitative surveys and qualitative interviews to gather comprehensive data from a diverse sample of students across four Zambian universities. Key areas of focus include the effectiveness of existing health education programmes, students' awareness and attitudes toward mental health, and the impact of these programs on reducing stress, anxiety, and depression. Findings reveal that while there is a growing recognition of the importance of mental health, many students still lack adequate knowledge and resources to manage their mental well-being effectively. Health education initiatives, particularly those integrated into the university curriculum and supported by counseling services, play a pivotal role in enhancing students' understanding and management of mental health issues. The study highlights the need for more robust and accessible health education programmes that are culturally sensitive and tailored to the specific needs of Zambian students. Recommendations include implementing comprehensive mental health education programmes, increasing training for educators and counselors, and promoting a supportive campus environment. These measures are essential for fostering resilience, reducing stigma, and promoting a culture of mental wellness among university students. The research underscores the critical role of health education in improving mental well-being and suggests that such initiatives should be a priority for educational institutions in Zambia.

Introduction

Mental health issues have garnered significant attention from experts across various fields due to their profound impact on human communication. Mental health is defined as a state of cognitive and emotional well-being and the absence of mental disorders (Nesse, 2005, in Khodabakhsh, 2014). From a positive psychology perspective, mental health encompasses the ability to enjoy life and maintain a balance between life activities while achieving psychological flexibility. Over the past few decades, mental health has been recognized as a crucial aspect of overall health. Recent studies from various

countries have shown that mental illness has the highest incidence and prevalence, making it a top health priority (Morgan, 2013). The World Health Organization (WHO, 2005) defines mental health as "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and can contribute to his or her community."

Research indicates that student mental health (SMH) significantly affects all aspects of student life. As a vital part of society, students contribute to future economic growth and development, making student mental health a global concern deserving attention (Pillay, 2022). According to WHO (2019), mental health conditions, disorders, diseases, and the well-being of university students are rarely prioritized in health regulations and global and local health agendas. It is estimated that worldwide, about 10-20% of young people experience mental disorders.

Entering university marks a transitional period for young people, during which they face new challenges such as making independent decisions about their lives and studies, adjusting to academic demands, and interacting with a diverse range of people. Many students also leave their homes and support networks for the first time (Cleary et al., 2011 in Hernández-Torrano et al., 2020). These challenges can impact the mental health and well-being of higher education students. Evidence shows that mental health strain increases when students start university but decreases throughout their studies (Macaskill, 2013; Mey & Yin, 2015).

Mental disorders, such as major depressive disorder (MDD) and non-communicable diseases (NCDs), particularly lifestyle-related diseases (LSRD), are becoming leading causes of ill health (WHO, 2017). The prevalence of mental disorders has increased dramatically in recent decades, even in non-industrialized countries (WHO, 2017). Today, the risk of mental disorders, especially depression (MDD), affects various population groups, constituting a public health burden and a major cause of premature mortality and disability across all ages and cultures.

A condensed four-year degree program entails a high workload and demanding schedule. Academic pressures often lead to increased anxiety and lower moods in otherwise healthy university students, particularly during examination periods (Worobetz et al., 2020). Medical students, in particular, show high levels of suicidal ideation, with a meta-analysis indicating a prevalence of suicidal ideation of 11.1% (Worobetz et al., 2020).

Emerging adults, such as university students, are vulnerable to mental health conditions, especially depression and anxiety, and experience significant stress (Hebert, 2022). Hebert (2022) suggests that university students, as emerging adults, suffer from mental health problems, including depressive symptoms, anxiety, and stress. Additionally, both individual physical fitness and regular exercise and physical activity are significantly related to mental health and well-being. This study, therefore, focuses on the role of health education in promoting mental well-being among university students in Zambia.

Literature Review

Numerous studies have investigated mental health, with particular focus on university students. For instance, Worobetz et al. (2020) studied first- and second-year medical students at the University of Limerick, Ireland, during the 2018–2019 academic year. Their findings indicated a high prevalence of suicidal ideation among medical students, with a meta-analysis showing

an 11.1% prevalence rate. However, this study was limited to one university, whereas the current study encompasses five universities in Zambia.

Hebert (2022) revealed that exercise interventions, conducted three times weekly over six weeks at moderate intensity, are effective in reducing depressive symptoms and perceived stress among university students.

Milanzi's (2023) research at Mulungushi University in Zambia found that mental health-seeking intentions were weak, with 69% of students unlikely to seek help and 60% specifically unlikely to seek university-based help. The study highlighted that stigma significantly reduced the likelihood of seeking help (OR=3.190, CI=0.8-11.339, P=0.041), and gender also played a role, with females showing stronger intentions to seek help than males (OR=0.90, CI=0.3826-2.137, P=0.003). This study was confined to Mulungushi University, while the current study includes five Zambian universities, providing a broader perspective.

Hernández-Torrano et al. (2020) conducted a comprehensive review of 5,561 journal articles on university students' mental health from 1975 to 2020. Using bibliometric methods, they identified key trends: a steady increase in research, especially after 2010; widespread dissemination of studies primarily in psychology, psychiatry, and education; a significant contribution from the United States; and a fragmented research community. The research focused on pathogenic approaches and identified seven main topics: positive mental health, mental disorders, substance abuse, counseling, stigma, stress, and mental health measurement. Unlike the current study, which explores the role of health education in promoting mental well-being, this review used bibliometric analysis to map the existing literature.

Khodabakhsh et al. (2014) examined the connection between psychological well-being, parenting styles, and students' mental health among 278 high school students in Iran. They found strong positive links between mental health and both psychological well-being and authoritative parenting styles, while permissive parenting also had a positive correlation. This study employed Pearson correlation and regression analyses, in contrast to the current study's mixed-method approach using SPSS version 20.

Tuchili (2019) emphasized the influence of guidance and counseling services on student behavior and stress management in Zambian public universities. In contrast, the current study explores the broader role of health education in enhancing mental well-being among university students in Zambia, with counseling as one component.

Statement of the problem

Mental well-being is crucial for university students, as it significantly affects their academic performance, personal development, and overall quality of life. Despite growing recognition of its importance, many university students in Zambia lack the knowledge and resources to manage their mental health effectively. Existing health education programs do not adequately address these students' needs, leading to persistent issues such as stress, anxiety, and depression. This study seeks to explore the role of health education in promoting mental well-being among university students in Zambia and to identify effective strategies for integrating mental health education into the university curriculum. There is a pressing need for robust, accessible, and culturally sensitive health education programs that equip students with the tools to manage their mental health and foster a supportive campus environment.

Research Questions

1. What is the current state of mental well-being among university students in Zambia?
2. How effective are existing health education programs in promoting mental well-being among university students in Zambia?
3. What are university students' awareness and attitudes toward mental health issues in Zambia?
4. What specific components of health education programs are most effective in reducing stress, anxiety, and depression among university students in Zambia?
5. How can health education programs be improved to better support mental well-being among university students in Zambia?
6. What role do counseling services play in conjunction with health education programs in promoting mental well-being among university students in Zambia?
7. How do cultural factors influence the effectiveness of health education programs aimed at improving mental well-being among university students in Zambia?
8. What are the barriers to accessing and benefiting from health education programs for mental well-being among university students in Zambia?

Methodology

The study used a mixed-methods approach, combining quantitative and qualitative methods. The quantitative part involved surveying 240 university students using an online questionnaire, focusing on mental health awareness, attitudes, perceived effectiveness of health education programs, and levels of stress, anxiety, and depression. For the qualitative part, semi-structured interviews were conducted with 50 students and 15 administrative staff, selected through stratified random sampling to ensure diversity across genders, academic levels, and backgrounds. The interviews aimed to gain detailed insights into experiences with mental health education and support services. Quantitative data were analyzed with descriptive statistics, while qualitative data underwent thematic analysis to find common themes and unique insights. The results from both parts were combined to give a complete understanding of how health education promotes mental well-being. Ethical considerations, including informed consent and confidentiality, were strictly adhered to, and the study was conducted with cultural sensitivity to ensure the relevance of the recommendations.

Findings and Discussion

The study aimed to examine the role of health education in promoting mental well-being among university students in Zambia, using a mixed-method approach with 292 respondents. The data revealed the following thematic areas:

Availability of health education programmes

The study revealed that there were mental health programmes in all the Five higher learning institutions under the office of the students counselling services. One participant Counsellor (MT) indicated that:

We have several mental health education programs, including Individual Counselling, which consists of one-on-one sessions to address personal issues such as stress, anxiety,

and other mental health concerns. We also offer Group Counseling for students with similar issues, such as alcohol abuse, where students share experiences and support each other. Additionally, we conduct mental health workshops that cover topics like stress management techniques, handling depression, disappointments, failure, academic pressure, time management, anxiety, and coping strategies. We not only train students to support their peers but also host virtual sessions on mental well-being topics. To date, we have organized three webinars featuring mental health experts and trained 85 peer counselors. We also conduct Mental Health First Aid Training for students and staff on recognizing and responding to mental health issues. So far, seven student affairs officers and nine security staff members have been trained in basic mental health first aid. Furthermore, we run awareness campaigns, including door-to-door sensitizations in hostels and boarding houses on various mental health topics; we have conducted eight campaigns so far. We collaborate with external experts to provide additional resources and support, maintaining a strong relationship with the Kabwe Central Hospital Psychiatry ward for referrals beyond counseling and psychotherapy.

The above finding appears to align with the quantitative data collected from students, which showed that 44.2% were aware of mental health education programs, while only 10.3% were unaware.

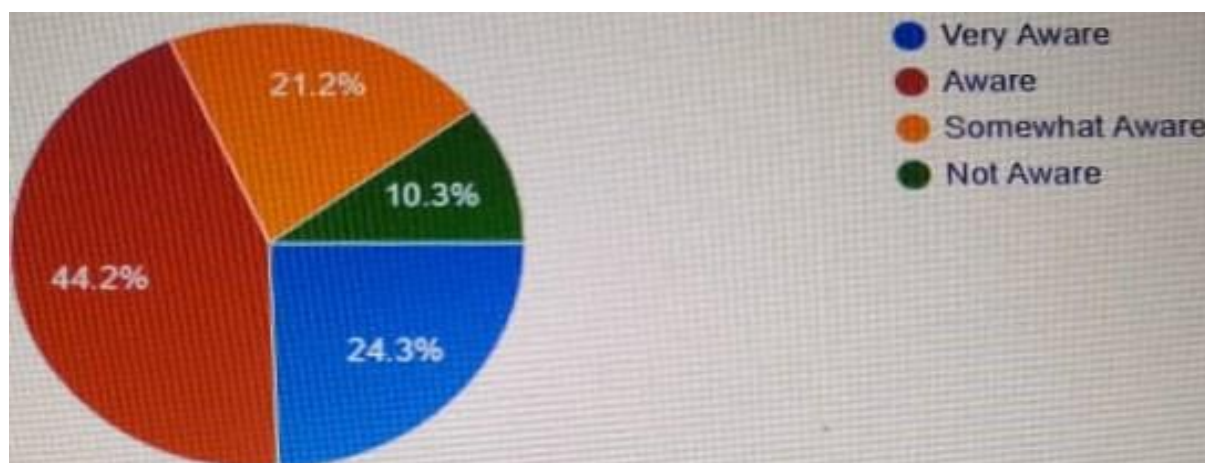


Figure 1.0: Awareness of Mental Health Education Programs

On the contrary, another participant, Dean of Student Affairs, indicated that “*there are no traceable health education lessons on campus. Only occasionally do we have simple talks through organized meetings, such as students’ launch campaign or during the fund UNESCO activity, where some talks could be integrated?*” The disparity in the above findings across the same institutions probably suggests that there is no coordination among the key players in students' well-being.

Effectiveness of the Programmes

The findings here indicated a mixed response to the program, as some institutions reported it was effective while others disagreed. For instance, one Dean of students’ affairs participant said: “These programs are not in any way effective because they are only on the surface and the time of dissemination is not best timed. The attendees have a limited platform to ask intelligent questions due to limited time and a mixed audience.” Conversely, a student counsellor gave a positive view of the program, stating that students gain a better understanding of mental health issues and have improved coping skills. He added that workshops and seminars have built

resilience and are helping students bounce back from setbacks and challenges. Increased awareness of the benefits and availability of counseling services might lead more students to use them. This observation aligns with Tuchili's (2019) study, which highlighted the impact of guidance and counseling services on student behavior and stress management in Zambian public universities. Regarding student responses, the study showed that 12% found mental health programs in all universities to be very effective, while 40.8% indicated the question was not applicable.

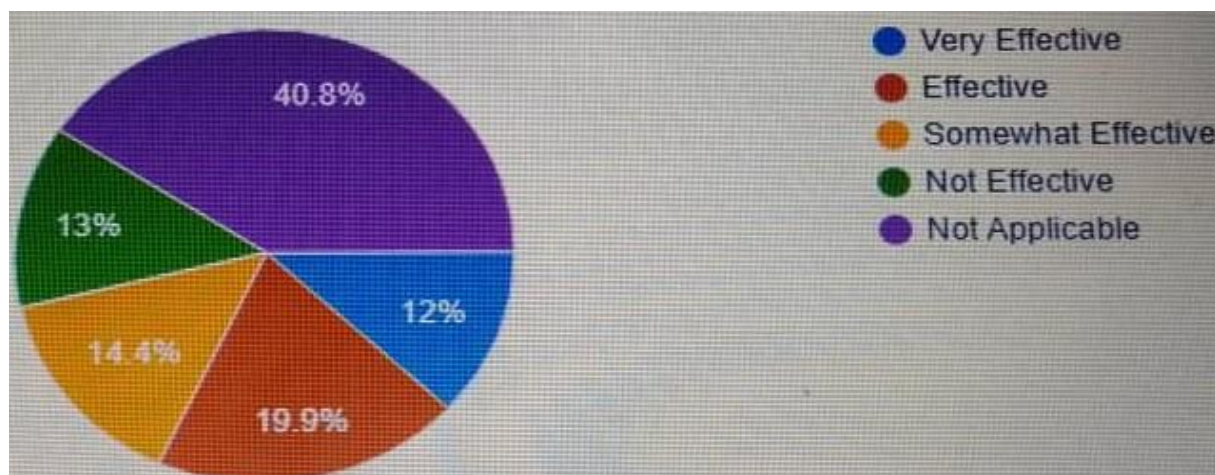


Figure 2.0: Effectiveness of Mental Health Programs

The study further revealed that 80.6% of students used counseling services offered by their respective universities. In comparison, only 20.2% expressed satisfaction with the mental health support and education provided by their universities, and 50.3% remained neutral. However, they rated the support from counseling services at 59%, as shown in figure:

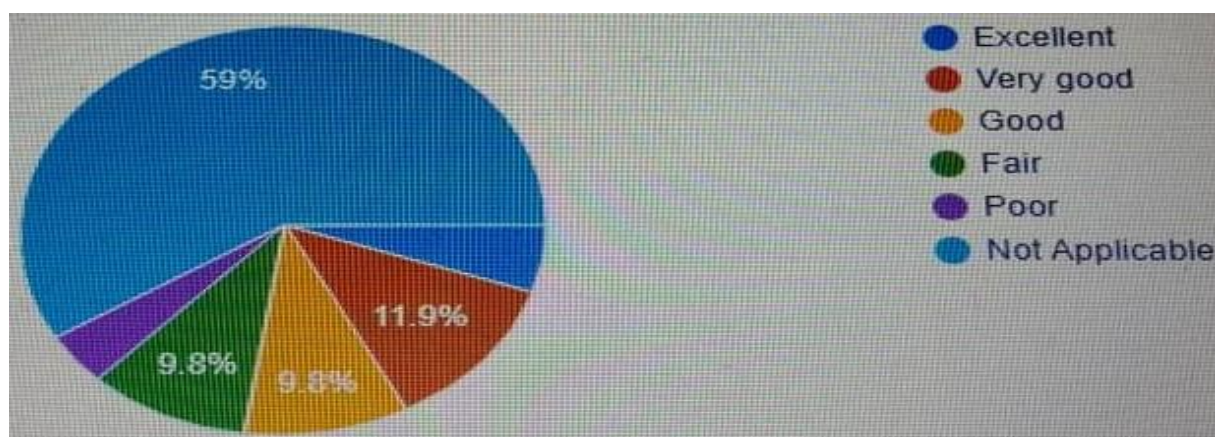


Figure 3.0: Counseling Services

Common Mental Health Problems

Suicide cases, suicide attempts, gross indiscipline such as students insulting staff, highly questionable jokes, isolation, dressing styles, hairstyles, and sometimes fights were identified as significant mental health issues. One participant mentioned that these common problems stem from academic pressure, social challenges, financial concerns, future uncertainty, social isolation, homesickness, and personal struggles. These findings align with Hebert (2022), who

suggests that university students, as emerging adults, face mental health problems like depression, anxiety, and stress. Similarly, Worobetz et al. (2020) argue that academic pressures often increase anxiety and lower mood in otherwise healthy students, especially during exam periods. When students were asked if health education programs helped reduce their stress, anxiety, or depression levels, 33.9% agreed, while 32.9% remained neutral. Only a small percentage strongly disagreed, as shown in Figure below:

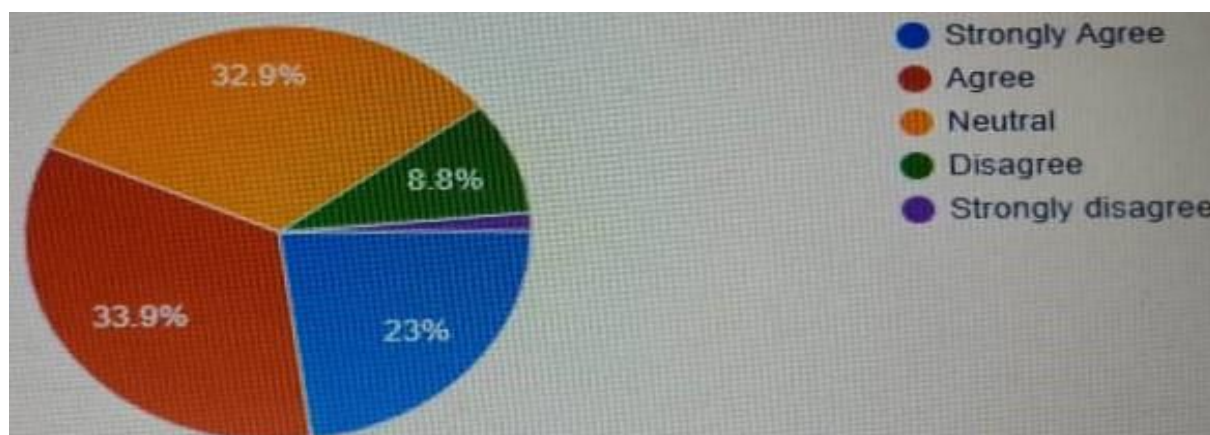


Figure 4.0: Common Mental Health Problems

Student Engagement in Mental Health Education (MHE) programmes

The study revealed that most institutions involve students in mental health education programs, such as Peer Counseling Programs, Workshops and Seminars, and online resources, and are active on interactive, engaging platforms for students. Furthermore, the study indicated that students receive certificates of completion for attending mental health workshops and programs, are rewarded for participating in competitive activities, and are provided with youth-friendly safe spaces. They also offer programs at various times, including evenings and weekends, to accommodate different schedules. One student counselor participant stated: *“So far, we have one designated safe space on campus at the counseling center where students can access youth-friendly services. We have also trained staff to recognize signs of mental health issues and refer students to appropriate resources.”* However, this was not the case at other institutions, as one participant said: *“During games or sports activities or during occasional UNESCO events that is when there is some information to do with mental health.”* This response indicates that mental health education at this institution is not given priority, which appears to reflect WHO (2019), which suggests that mental health conditions, disorders, diseases, and the well-being of university students are rarely prioritized in health regulations and both global and local health agendas.

Challenges in delivering MHE programmes

It was revealed that there were numerous challenges in delivering mental health programs in most institutions. The common challenges included limited mental health services and resources, which make it difficult for all students to access the help they need; lack of awareness; students’ busy schedules; confidentiality concerns; limited resources; among others. One student counselor participant added: *“Cultural and language barriers have been also a challenge when it comes to students with hearing impairments (there is a need to train in sign language).”* Another one added:

They offer counseling services, but the impact is very limited due to scarce resources, staff, and time. There are no support systems, initiatives, or programs at this level. I suggest that the administration receive training to better understand the nature of the problem and that regular orientation on mental health be provided, along with dedicated budgets for this purpose.

Stigma was also identified as a major obstacle to delivering mental health programs in the selected institutions. This finding aligns with Milanzi's (2023) research at Mulungushi University in Zambia, which showed that stigma greatly decreases the likelihood of seeking help. However, Tuchili's (2019) study emphasized the role of guidance and counseling services in shaping student behavior and managing stress in Zambian public universities.

The Role of University Counsellors in MHE

The study showed that student counselors play a key role in mental health education by conducting thorough needs assessments to identify students' mental health needs. These assessments are done using surveys, focus groups, and one-on-one interactions, which provide vital information for creating relevant and effective health education programs. Based on the results, counselors develop programs that address common mental health challenges like stress, anxiety, depression, and substance abuse. To ensure the content is accurate and relevant, they work with experts from the DEC (Drug Education Council) on drug-related topics. Counselors also actively participate in delivering these programs through workshops, seminars, and group therapy sessions, making sure the programs are interactive and include practical strategies to help students improve their mental well-being. Additionally, counselors help develop resources by creating materials that support mental health education efforts.

Culture's effect on Mental Health Education programmes

The study revealed that culture influences mental health education at the selected universities. It showed that many students and staff believe mental health problems are linked to family charms and Satanism, leading to high levels of misconceptions and myths. One participant remarked: *"In some cultures, family and community play a central role in individuals' lives, and decisions about seeking help may be influenced by these groups. Equally, Religious and spiritual beliefs do shape attitudes toward mental health and the preferred methods of dealing with mental health issues."* This finding contrasts with most studies indicating that mental health problems among students are mostly caused by academic pressures, which often lead to increased anxiety and lower moods in otherwise healthy university students (Worobetz, et al., 2020; Herbet, 2022; Macaskill, 2013; Mey and Yin, 2015).

Conclusion and Recommendations

In conclusion, the study emphasizes the complexities and challenges of promoting mental well-being through health education among university students in Zambia. The existence of mental health programs in higher education institutions is a positive step, but their effectiveness is limited by issues such as lack of coordination, scarce resources, and cultural misconceptions. While some institutions demonstrate active engagement and achieve positive results, others face difficulties with poor implementation and low student participation. The role of student counselors is vital, yet their efforts are often blocked by stigma, insufficient support, and

cultural barriers. These findings highlight the need for a more coordinated, well-funded, culturally sensitive, and inclusive approach to mental health education. Improving these programs could significantly boost students' mental well-being, helping them better handle the pressures of university life.

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Conflict of Interest

Authors declare that there is no conflict of interests regarding the publication of the paper or otherwise.

Authors' contributions

Jive Lubbungu: Conception/design, development of data collection instrument, analysis, interpretation of data, revised manuscript (30%)

Jive Lubbungu: Conception/design, data collection, analysis, interpretation of data, editing and first draft (20%)

Jive Lubbungu: Analysis and Interpretation of data (10%)

Jive Lubbungu: Interpretation of data, first draft and revision (10%)

Augustine Sisagali Lumwanga: Data collection, interpretation of data, and first draft (10%)

Augustine Sisagali Lumwanga: Interpretation of data, first draft and editing (10%)

Augustine Sisagali Lumwanga: Data collection, interpretation of data and first draft (10%)

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