



## Mental Health Literacy In Health Students: A Preliminary Study

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### Abstract

Mental health become a public health concern because of its rising prevalence and severe consequences. Adolescents who are attending university are the most vulnerable to mental health problems. Students, particularly in health science programs, perceive themselves as more stressed than students in other science disciplines. As a result, strategies for preventing mental disorders, beginning with an in-depth grasp of mental health literacy, can lead to improved mental health outcomes. The purpose of this study is to figure out the aspects of mental health literacy among health students. This study used a quantitative approach with a cross-sectional design. The research variables were mental health literacy and respondent characteristics. Three hundred ninety-nine samples were recruited using accidental techniques. Data analysis used descriptive and Mann-Whitney tests. The results revealed that the mental health literacy category was lower (54.4%) than the high category (45.6%). Statistical tests showed no significant difference in mental health literacy among respondent characteristics ( $p > 0.05$ ). This study's practical implications include improving mental health literacy through integration into learning.

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## Introduction

According to the GBD (*Global Burden of Disease*) study, mental health is one of the seven noncommunicable diseases (NCDs) that have become a significant focus around the world due to its potential for complicated consequences. (Institute of Health Metrics and Evaluation, 2019). *World Health Organization* also stated that 1 in 8 individuals in the world live with mental health problems. (World Health Organization, 2022). According to a recent assessment, there has been a global rise in cases of mental disorders by 25% since the onset of the COVID-19 epidemic. (World Health Organization, 2022).

Similarly, this happens for conditions in Indonesia. According to the 2018 Indonesian Basic Health Research (RISKESDAS) findings, the prevalence of mental health problems increases year after year, with approximately one in every five persons (20%) in Indonesia having the potential to develop mental disorders (Kementerian Kesehatan, 2018). Mental health problems might affect anyone, including people of all ages. Adolescents, on the other hand, are a more vulnerable population to mental health issues. According to data from the *United Nations Children's Fund* (UNICEF), approximately one in every seven

teenagers (89 million boys and 77 million girls) experienced mental problems in 2019 (UNICEF, 2021). According to the 2022 National Adolescent Mental Health Survey (I-NAMHS), one in every three Indonesian adolescents aged 10 to 17 experienced mental health problems during the previous year. This equates to 15.5 million adolescents nationwide (Center for Reproductive Health, University of Queensland, 2022). Other research indicates that about (70-75%) of adults have mental health disorders, which begin in youth or early adulthood (12-25 years) (Uddin et al., 2019).

Students are a frequently stressed group. A study discovered that university students had considerable stress in general (63.4%). The study also discovered that university students experience more stress from environmental and academic causes. Explicitly, the lack of a fair grading system, academic overload, difficulties with academic matters, lousy subject matter, and teachers' lack of competency are among the causes of excessive academic stress. (Yikealo et al., 2018).

It has been observed that students in health science programs are more stressed than those in other disciplines. According to the study's findings, students' stress levels were medium to high due to their academic difficulties. (Fauzi et al., 2021). Other studies have also shown that medical and nursing students face significant levels of scholastic stress, anxiety, insomnia, and depressive symptoms. (Alhamed, 2023). In addition, a Saudi Arabian study discovered that nearly 75% of health students said they were stressed. Approximately two-thirds were classified as borderline/exhibiting anxiety or depression cases. Students who experienced anxiety were four times more likely to perceive stress. (Alwhaibi et al., 2023). Chronic mental disorders can be mostly avoided through preventive actions, one of which is a solid understanding of mental health literacy.

In health care, prevention, and promotion, health literacy is crucial. It significantly impacts people's ability to make health-related decisions at home, in the community, on social media, at work, and in other contexts throughout their lives. Mental health literacy is included in the vast category of health literacy. According to Jorm, mental health literacy includes knowing how to prevent mental illnesses, recognizing them when they arise, being aware of the resources available for seeking help and treating them, being aware of successful self-help techniques for less severe issues, and knowing how to provide first aid to people who are experiencing a mental health crisis or developing a mental illness. (Okan et al., 2019).

Individuals who acquire adequate mental health literacy may protect against mental illnesses and maintain their physical and psychological well-being. Cairns and colleagues conducted a systematic review of longitudinal risk and protective factors to determine the appropriate actions that adolescents can take to lower their risk of depression. The study's findings indicated that many strategies, such as developing mental fitness and life skills, fostering healthy relationships, and adopting a healthy lifestyle, have the potential to prevent depression. (Cairns et al., 2015). In contrast, those with low mental health literacy may negatively impact mental health outcomes. Wang contends that protracted wait times for assistance could be caused by a failure to identify mental illness. (Wang, P. S. et al., 2007). Furthermore, a report that analyzed data from 24 countries' World Mental Health Survey revealed that the most common reason for not starting mental health treatment in moderate and mild cases—rather than in severe cases—was low perceived need, and the most commonly cited obstacle to not receiving treatment was the desire to handle problems on one's own (Andrade et al., 2014).

According to earlier studies, mental health literacy is essential for addressing mental illnesses. Ensuring university students' mental health and welfare can facilitate a more seamless transition into early adulthood. A crucial period of life for mental wellness is adolescence. It is a process in which the brain grows and develops quickly. Teenagers will, therefore, develop cognitive and social-emotional abilities that will influence their mental health in the future, and they must assume adult responsibilities in society. As a first step toward more research, this study aims to ascertain the state of mental health literacy among health students.

## Methods

This study uses a cross-sectional design. The participants in this research were health students enrolled in the Ministry of Health's Health Polytechnic (Poltekkes Kemenkes Palembang, Bandung, and Jayapura). The convenience sampling approach was employed in conjunction with the non-probability sampling technique. The Slovin formula was used to determine the minimum sample. Three hundred ninety-nine respondents enrolled in Diploma 3, Diploma 4, and Professional Education levels that focused on the Nursing, Midwifery, and Pharmacy Programs participated in this research. The data collection tool uses *The Mental Health Literacy Questionnaire-Short Version for Adults* (MHLq-SVa) (Campos et al., 2022). This instrument consisted of 16 question items with four dimensions: *Knowledge of mental health problems*,

*False beliefs/stereotypes, First aid skills and help-seeking behavior, and Self-help strategies*—instrument reliability with a Cronbach's alpha value of 0.82. The questionnaire was shared through an online form for three months (November 2024 -January 2024). All procedures were approved by The Health Research Ethics Committee, the Faculty of Public Health, Diponegoro University (No: 490/EA/KEPK-FKM/2023).

## Results

**Table 1. Frequency Distribution of Respondents**

Characteristics	Total	
	n	%
Sex		
Male	40	10.0
Female	359	90.0
Age		
17-20 years	197	49.4
21-25 years	202	50.6
Study Programme		
Nursing	156	39.1
Midwifery	136	34.1
Pharmacy	107	26.8
Campus Origin		
Poltekkes Kemenkes Bandung	126	31.6
Poltekkes Kemenkes Palembang	184	46.1
Poltekkes Kemenke Jayapura	89	22.3
Study Level		
Diploma 3	358	88.5
Diploma 4	32	8.0
Professional	14	3.5
Enrolling in Fundamental Health Psychology		
Yes	223	55.9
No	176	44.1
Year of Study		
Year One	74	18.5
Second Year	169	42.4
Third Year	146	36.6
Year Four	10	2.5
Residences		
With parents	240	60.2
Living alone	159	39.8

Based on Table.1, almost all respondents were female students (90%), aged > 20 years (50.6%), and the order of study programs from highest to lowest was Nursing (39.1%), Midwifery (34.1%) and Pharmacy (26.8%). The highest percentage of respondents came from Poltekkes Kemenkes Palembang (46.2%), the least from Poltekkes Kemenkes Jayapura (22.3%), and more than  $\frac{3}{4}$  of respondents came from Diploma 3 study level (88.5%) and lived with parents (60.6%). Respondents generally took introductory/health psychology classes (55.9%).

**Table 2. Mental Health Literacy Categorisation**

Categorization	n	%
Low	217	54.4
High	182	45.6

Based on Table 2, respondents are higher in the low category of mental health literacy (54.4%) than those in the high category (45.6%)—categorization using the Median.

**Table 3. Overview of Mental Health Literacy Dimensions**

Mental health literacy	n	%
Knowledge of mental health problems	24.22	4.28
False beliefs/stereotypes	11.01	1.85
First aid skills and help-seeking behavior	12.55	2.17
Self-help strategies	17.45	2.55
<b>Total Score Mental Health Literacy</b>	<b>64.71</b>	<b>9.33</b>

Based on Table. 3, the highest dimension of mental health literacy is knowledge of mental health problems with a Mean value (of 24.22) compared to the dimension of self-help strategies (17.45), the dimension of first aid and help-seeking skills (12.55), and the dimension of false beliefs/stereotypes (11.01). The total score of all dimensions is the mean (64.71) with a standard deviation (9.33).

**Table 4. Mann-Whitney test**

Characteristic	Mental health literacy	Ranks			p-value*
		N	Mean Rank	Sum of Ranks	
Sex	Low	217	197.94	42952.00	0.45
	High	182	202.46	36848.00	
Age	Low	217	197.37	42829.50	0.56
	High	182	203.13	36970.50	
Campus origin	Low	217	209.53	45467.50	0.052
	High	182	188.64	34332.50	
Study level	Low	217	199.92	43382.50	0.97
	High	182	200.10	36417.50	
Study program	Low	217	205.50	44594.00	0.26
	High	182	193.44	35206.00	
Year of Study	Low	217	200.66	43543.50	0.89
	High	182	199.21	35256.50	
Psychology class	Low	217	212.21	46049.50	0.07
	High	182	185.44	33750.50	
Residences	Low	217	199.56	43305.50	0.93
	High	182	200.52	36494.50	

\* Significance p-value <0.05

Table 4 shows differences in mental health literacy regarding respondent characteristics, with a *p-value* < 0.05.

## Discussion

The analysis showed that a more significant proportion of the respondents fell into the low mental health literacy group. This is consistent with Lam's research, which showed that just 16.4% of teenagers met the criteria for being adequately literate in mental health. (Lam, 2014). A study in Iran involving undergraduate students also found that mental health literacy is lacking (Mahmoodi et al., 2022). The same study in the UK also found that mental health literacy was lower among the sampled students compared to the previous study (Gorczyński et al., 2017).

However, these results contrast with a preliminary study by Idham and colleagues, which involved 501 students from various provinces and determined the trend of mental health literacy in Indonesian students. It found that most students (54.1%) had a high level of mental health literacy. (Fuady et al., 2019), As well as findings from Permana and colleagues involving 126 nursing student respondents found that 64.4 percent had a high level of mental health literacy (Permana et al., 2023).

Several factors contribute to the low level of mental health literacy among students. A study found that Schools often do not have comprehensive mental health education, leaving students uninformed about mental health issues and available resources. (Kutcher et al., 2015). In addition, gender and family education levels also influence mental health literacy. The research found that female adolescents have a greater tendency and skill to ask for help, and individuals with families with higher education levels have better mental health literacy compared to those with lower education levels. (González Sanguino et al., 2024). Other findings also added that older age significantly influenced adolescents' mental health literacy levels. (Özbiçakçı & Salkim, 2024).

A study of adolescents found that low levels of mental health literacy were associated with poor mental health status, notably higher levels of depression. (Lam, 2014). Instead, higher mental health literacy was associated with a decrease in the stigma of mental illness. (Morgan et al., 2018). Other findings also suggest that individuals who have been previously diagnosed with a mental health disorder have significantly higher mental health literacy scores than individuals who have never been diagnosed with a mental health disorder. (Gorczyński et al., 2017). Individuals with high mental health literacy tend to utilize mental health services compared to individuals with low health literacy. (Handayani, T., Ayubi, D., & Anshari, 2020).

According to Rachmayani and Kurniawati's research, some teenagers continue to stigmatize people with mental illnesses, feel fearful of them, and believe they pose a threat to others. This research describes the level of mental health literacy among adolescents. Up to 52% of teenagers expressed opinions about mental illnesses in general, using terminology like "incurable disorder," "stress," "crazy," "defective," and "strange behavior." Another view of adolescents also found that 27 percent of adolescents felt strange, disgusted, scared, and sorry when dealing with individuals with mental illness, so adolescents tended to avoid them. Only 17 percent of adolescents felt that they did not deserve to be negatively stigmatized but instead needed help in the form of social support and intervention. (Rachmayani & Kurniawati, 2018).

A study also discovered that respondents gave the mental health knowledge factor the highest score out of all the dimensions of mental health literacy. Understanding the warning signs, symptoms, causes, and consequences of mental illness, as well as being able to identify and categorize different mental disorders, are all considered aspects of mental health knowledge. (Yin et al., 2020). These results are in opposition to several studies that demonstrate the general public's continued ignorance of mental health. According to Mahto and colleagues, college students are the group with the slightest knowledge regarding mental health. (Mahto et al., 2009).

The lack of mental health literacy needs to be considered. A study in India found that a 90-minute interactive one-session intervention can improve mental health knowledge and behaviour. (Raghavan et al., 2024). Other studies have also shown that knowledge about mental health affects mental health awareness. (Lee et al., 2023).

Mental health literacy is critical for mental health promotion, early detection and referral to mental health services, and continuity of care. (Kutcher et al., 2016). As a result, proper literacy can assist each individual in helping themselves to avoid many potential mental diseases that may attack, particularly among health students. One aspect of mental health literacy is recognizing and treating mental health, which is directly tied to the decision to seek professional assistance. According to Jorm, the idea of mental health literacy relates to knowledge and beliefs about mental diseases connected to recognition, management, or prevention, implying that people with mental health literacy understand mental disorders, their causes, symptoms, and treatments. (Okan et al., 2019). In addition, mental health literacy also plays a vital role in the recognition of mental health problems and help-seeking (Kim et al., 2020).

The difference test analysis revealed no significant difference in mental health literacy across respondent characteristics. This conclusion is consistent with Marcus and Westra's findings, which indicated no significant difference in mental health recognition and knowledge between younger and older persons. Young adults, on the other hand, were much less likely to support access to professional treatment (e.g., doctors), less likely to see medicine as beneficial, and slightly less likely to believe that psychotherapy could assist in improving mental health. Young adults, particularly men, expressed a preference for self-management or support from friends and family when dealing with mental health issues. (Okan et al., 2019). Other research has also found a significant relationship between education level and mental health literacy scores. (Noroozi et al., 2018).

## Conclusion

Mental health literacy among health students is a low category. The dimension of mental health literacy, knowledge of mental health, has the most significant score compared to the other aspects. There is no difference in mental health literacy regarding respondents' characteristics. The practical recommendation in this study is to be one of the policy materials for the Government to include mental health material in the teaching curriculum.

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