

THE STATE OF MENTAL HEALTH AND AVAILABLE SERVICES FOR POST-SECONDARY STUDENTS IN PAKISTAN: A GAP IN EDUCATIONAL INSTITUTION HEALTH POLICY

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Submitted: May 19, 2022

Accepted: December 30, 2022

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ABSTRACT

We explored the literature to evaluate the status of mental health among post-secondary students at the global and local levels with a special interest in medical students along with the detrimental effects on mental health caused by COVID-19 pandemic. The implementation strategies already developed and in the process by some countries to improve the mental health of post-secondary students are also covered in this review. The results of this literature review have brought to light the presence of a high number of mental health disorders among post-secondary students throughout the world, including Pakistan, which is further deteriorated by the negative effects of COVID-19 pandemic. Several challenges and treatment gaps have been identified globally, especially in Low and Middle-Income Countries (LMIC) including Pakistan which show a lack of data as well as a lack of services which warrants a need for a framework that will use a holistic approach to tackle these issues in post-secondary students.

KEYWORDS

COVID-19, Low and Middle-Income Countries, Pakistan, Pandemics, Medical Students

METHODOLOGY

An extensive published literature exploration was done using multiple databases and search engines to identify articles and collect information regarding the question.

Students studying at higher education institutions, between the ages of 19-24 years of age, were included as post-secondary students for the purpose of this review.

Literature search technique used in order to explore the literature for relevant articles through different databases and search engines included Boolean search operators AND and OR with multiple search terms were used to extract information about the mental health status of university students and any strategies being used for improving the former. These included:

- Mental health needs of post-secondary students
- Mental health problems of university students
- Implementation plan for mental health globally
- COVID-19 effects on mental health
- Mental health in LMIC

Boolean search operators with mixed commands were used in combination for performing online data searches. The literature search strategy was according to recommended protocols of Haig and Dozier.¹ Thorough research was performed by using PUBMED, Eric, and SpringerLink Key terminologies. Also, Google Scholar as a search engine was used to select the most relevant articles. The inclusion-exclusion criteria for published work were as follows;

Inclusion criteria:

- Articles with full text
- Peer-reviewed journal publications
- Systemic reviews
- Meta-analysis
- Longitudinal studies
- Cross-sectional surveys
- News reports
- Relevant Websites
- Abstracts

Exclusion criteria:

- Non-English articles
- Book chapters
- Commentary/essays
- Irrelevant articles
- Protocols
- Information regarding primary schools

INTRODUCTION

It is estimated globally that 1 family out of 4 have a resident with a mental disorder.² The number of adolescents and young people with mental health issues is over 250 million globally.³ In S) Pakistan, for example, 21.5 percent of the population is between the ages of 15 and 24.⁴ The mental health struggles faced by individuals at risk have further escalated due to COVID-19 pandemic and the associated control measures. Despite the high prevalence of mental health issues, the vast majority of people do not receive any treatment. Thus, a huge treatment gap even in the High



Income Country (HIC) settings exists. All over the world 450 million people go through neuropsychiatric disorders as per WHO estimate.² Studies showed that almost half of the mental health problems occurring among adults started at a younger age. College period is a crucial time as young people experience hormonal, neuro developmental, psychosocial, and emotional changes during this period.⁵ These include not only discovering their self-identity and coping with physical changes correlating to their appearance, and personality but also during this time some students may need to work part-time to meet the financial needs of their education or fulfill family responsibilities.⁶

1. Prevailing mental health problems globally among the young population in educational institutions

When post-secondary students enter college and university life, they face challenges in all the eight dimensions of well-being that are mutually co-dependent and considered vital in leading a healthy and prosperous life. These dimensions are physical, social, occupational, environmental, emotional, spiritual, financial, and intellectual. Incompetency in any of them brings a state of unrest to them and adversely affects their personal well-being and quality of life⁷ As per an international survey of 24 universities across 9 countries conducted by WHO Root, causes of mild stress in two-thirds to three-fourths of students were financial problems (68.6%), love and sex life (66.8%), and health problems 64.3%). About 13.4% of students were found to have a major depressive disorder.⁵ Due to high parental expectations, peer pressure, lack of leisure time, vigorous training, high demanding programs, medical students experience more burnout in comparison to other university students.⁸ Mental distress leads to compromised academic performance hence high dropouts.⁹ The meta-analysis and systematic reviews conducted on medical students of China, Brazil, and Asia revealed the prevalence of mental disorders; including depression 29%, Anxiety 21%, suicidal ideation 11%, and eating disorders 2% in China. Anxiety was 7.04% and depression was 11.0% in Asian students and overall mental disorders in Brazil were 31.1%.¹⁰⁻¹² According to WHO, 70% of mental ailments initiate at 25 years of age, and the period before transitioning from adolescence to adulthood is vulnerable to psychological accidents.¹³ In addition to the above-mentioned risk factors, other factors contributing to a higher risk of mental health disorders among the population in EMRO countries are; high fertility rates, complex emergencies, instabilities, and rapid urbanization. Long-term economic and social consequences will have to be faced if these problems related to mental illness remain unattended, affecting the post-adolescent life, and will be interlinked with the coming generations.¹³

2. Prevalence of mental health disorders among medical college students of Pakistan

Medical students in developing countries such as Pakistan not only face challenging education and training programs but also deal with poverty, civil strife, and environmental stressors, exposing them to severe mental illness. Therefore, scientific interest in the mental health experience of students has increased in the last few years. Multiple studies among public and private institutions in Karachi, Lahore, Islamabad, and Peshawar revealed that mental health problems negatively affect the academic performance of students with a high prevalence of anxiety and depression among students.¹⁴⁻¹⁶

3. COVID-19 pandemic effects on the mental health of students

The adverse mental health consequences of social distancing on post-secondary students have been documented. (17) The stress and anxiety generated by the pandemic, in addition to the negative emotional state and loneliness stemming from by COVID-19 distancing rules, will fuel the mental illness and substance abuse which currently consists of 13% of the world's population.^{1, 6, 18} A plethora of literature from different countries has also indicated worsening of common mental health problems and well-being during the pandemic worldwide; for example, Hong Kong, India, Pakistan.(19-21). The global effects of the COVID-19 pandemic have rendered the youth vulnerable to extreme mental distress, catalyzing the anti-psychosocial and negative emotional development.

4. Identifying the gaps and needs in Lower Middle-Income Countries (LMICs):

Greater than 80 percent people having mental illnesses live in LMICs, with substance addiction and mental illness disorders accounting for 16.6 percent and 8.8 percent of the total burden of disease respectively along with depression, which is expected to be the 3rd greatest cause of burden of disease in low-income nations by 2030, and the 2nd highest source of burden of disease in middle-income countries, experts claim. In many LMICs, social and demographic factors function as regulators of the high prevalence of mental illness. Because mental illnesses are associated with social stigma, people are hesitant to seek help. Many issues, including governance, planning, and the unavailability of adequately adapted evidence-based interventions and training, all contribute to the challenges that mental health services face in LMICs. There is a critical need to establish policies that are practical, long-term, and beneficial to communities in order to overcome these challenges.⁴ The WHO Mental Health Gap Action Programme Intervention Guide, especially in low- and middle-income countries, includes treatment strategies for mental disorders in youth, including "talking therapies".² It is worrisome that despite the presence of efficacious interventions in Pakistan, the implementation is lacking.²²



5. Situation of mental health in Pakistan

Pakistan, a country with an approximate population of 185 million.² of which, around 63% of the total population comprises youth(23), with around 58.5 million youngsters in the age group of 20-24.⁷ Pakistan is still struggling in several health disciplines. As a developing country, with around 45% of the population living in or near poverty, particularly in the periphery with mental health, is receiving the least attention. According to research, Pakistan has just 400 psychiatrists for a population of 220 million people, and 3,729 outpatient mental health care departments are available to serve 343.34 users per 100,000 people.⁸ Various studies conducted on adolescents in Pakistan have shown that low mood affects 39% of adolescents with 36% having been diagnosed with anxiety and depression. 14.3% of the young students were found to have bipolar disorder²⁴ Around 13000 suicides were recorded in Pakistan in the year 2012 with the majority of cases in people less than 25 years of age.²⁵ Apart from the above-mentioned disorders, schizophrenia, psychosomatic disorders, obsessive-compulsive disorder, and post-traumatic stress disorder are also found in the Pakistani population²⁶ This situation is worsened further by the social stigmatisation of mental health disorders which are considered humiliating and taboo; most people deny their presence for the fear of being judged as a mentally compromised person.²⁷

6. Situation of stewardship regarding Mental Health in Pakistan

Pakistan has never carried out a national mental health and demographic survey to enumerate the prevalence and risk factors of mental health disorders within its population. However, as a signatory, Pakistan participated in the recent WHO, EMRO Region mental health atlas related survey 2014.² Pakistan Bureau of Statistics stated that no budget is fixed separately for mental health and health insurance for mental illness is almost non-existent.²⁸ Services for mental health are limited to the department of psychiatry in teaching hospitals or clinics run privately.²⁹ Although there is no structured framework available or implemented for mental health well-being for postsecondary students, exploratory studies are being conducted by educational institutions to the best of our knowledge.

7. Strategies to improve the mental health among post secondary students

Different countries have developed some frameworks and policies to cater to the needs of the students belonging to post-secondary educational institutions.

Canada

The National Standard on Psychological Health and Safety for Post-Secondary Students also referred to as “the Standard”, a framework that was published in 2020 and provides a detailed and flexible guide helping Canadian post-secondary institutions better address and respond to on campus needs

This framework is currently implemented successfully in Canada, with more than 24 universities and many post-secondary colleges addressing the mental health needs of the Canadian youth.³¹

Australia

The national mental health performance framework was developed in collaboration with ORYGEN, the mental health sector, the university sector, student representatives, and the government after studying students' case studies from different universities in Australia The framework which consists of six principles can be used by the sectors related to mental health and universities in order to recognize and rank the needs of the students.³²

UK

Stepchange: Mentally Healthy Universities is a new strategic framework for a university-wide approach to mental health and well-being. It urges colleges to consider mental health to be fundamental to all elements of university life, for both students and faculty.

Universities in the United Kingdom should be organizing settings that promote mental health and well-being, allowing all employees and students to achieve their full potential. If all colleges make mental health, a strategic priority and take a comprehensive strategy, this may be accomplished. This document serves as both a rallying cry and a unified framework for change.³³

RESULT

Our thorough search through 32 articles and news reports has brought to light the presence of a high number of mental health disorders among post-secondary students throughout the world, including Pakistan, which is further deteriorated by the negative effects of CoVID-19 pandemic. Several challenges and treatment gaps have been identified globally, especially in LMIC including Pakistan which shows a lack of data as well as a lack of services which warrants a need for a framework that will use a holistic approach to tackle these issues in post-secondary students.

CONCLUSION

The mental health of post-secondary students is at risk throughout the world. This crisis has been compounded by the arrival of COVID-19 pandemic, which has caused considerable mental and physical distress and has rendered the whole world crippled economically. Some countries have successfully developed and implemented while others are developing interventions to support students during this vulnerable stage in life and are following their respective frameworks to prevent and treat mental health disorders among their university students. Considering this scenario,



there is a dire need to develop and implement a framework in the Pakistani universities to encourage and facilitate the mental health of our students.

A healthy student is a promise to a successful future for a country.

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