ISSN: 2584-0142
PSYCHOPEDIA JOURNALS
International Journal of Interdisciplinary Approaches in Psychology (IJIAP)

A critical analysis of pathway to mental health care in Low Middle-Income Countries: An overview of Mental Healthcare Pathways and its utility in support provision for educational institutions

[1]Megha Tiwari

tmegha.96@gmail.com

Department of Psychology, SIES College of Arts, Science and Commerce (Autonomous), Mumbai, India.

[2]Amruta Padhye

Department of Psychology, SIES College of Arts, Science and Commerce (Autonomous), Mumbai, India.

Amruta.padhye@gmail.com

ABSTRACT

College experiences are complex and are often filled with diverse and unique stressors that can impact the mental health of students. Young people are at risk for developing a range of mental illnesses due to their complex experiences and difficulties finding appropriate pathways for care. Care pathways are existing pathways to care which individuals use to reach a certain modality of

care. In healthcare these pathways tend to be organized and help achieve optimal care provision for patients. The current chapter attempts to provide an overview of existing care pathways for mental illnesses in LMICs and adapt the same for the purpose of organizing care in educational institutions. The authors conducted a comprehensive literature review focusing on care pathways in LMICS and its utility for educational institutions. A total of 127 studies focusing on mental health of college students using Rayyan. A comprehensive inclusion and exclusion criteria were developed to screen the articles. 50 studies were included based on the inclusion and exclusion criterias and a data extraction sheet was used for the purpose of study appraisal. In the chapter, the authors proposed a methodical model of a mental health care pathway designed specifically for educational settings and highlight how it can be used for enhancing mental health outcomes of college students.

Keywords*: Mental Health care on college campus, Care pathway, Student mental health, low-middle income countries*

INTRODUCTION

Colleges across the world are facing the challenge of increasing the burden of mental illnesses on campus (Auerbach et al., 2018). Globally, student mental health is an important public health concern with increasing awareness of high prevalence of common mental disorders (CMDs) in this demographic (Bantjes et al., 2022, Duffy et al., 2019, Storrie et al., 2010). College students are at risk for multiple psychiatric conditions including but not limited to depression, anxiety disorders, social phobia, Post traumatic stress disorder and obsessive-compulsive disorder (Pedrelli et al., 2014, Kessler et al., 2007).

Given the context, it becomes imperative to study the mental health concerns of college students and work towards developing initiatives to decrease the student mental health crisis. Help seeking behavior for mental health is a complex process as many factors are involved in deciding when, how and from whom help shall be sought. Mental illnesses are often associated with social stigma posing dual risk to those dealing with it. Persons with mental illnesses face negative consequence of their psychiatric illness (such as occupational, social, physical, and marital issues) in addition to stigma associated with mental health and illness (such as challenges in accessing quality care, limited employment opportunities, and loss of social status) (Vaishnav et al., 2023, Thornicroft et al., 2022, Javed et al., 2021). The high level of societal stigma makes it vital to arrange care delivery so that mental health treatments are accessible and in a way that motivates people to get help.

For organizing care provision in colleges and otherwise in society, care pathway models can be used. Care pathways are defined “as the organized sequence of contacts with individuals and organizations initiated by the distressed person’s efforts, and those of his or her significant others, to seek care or help” (Lilford et al., 2020). In the chapter it is proposed adaptation of care pathway models for educational set ups to improve mental health outcomes in colleges in LMICs.

METHODS

For this review, the authors screened a total of 127 studies focusing on mental health of college students using Rayyan. Comprehensive inclusion and exclusion criteria were developed to screen the articles. A literature search was performed between April 1st 2024 to April 29th 2024. Authors utilized the keyword search strategy to find relevant literature. Keywords used included pathways to mental health care, mental health on college campuses, College students’ mental

health care in LMICs, Care pathway in LMICs. The papers and articles were shortlisted based on their relevance to the topic. Further, an effort was made to review a wide variety of studies including quantitative and qualitative studies, review papers, systematic reviews and original research articles. A total of 50 studies were included based on the inclusion and exclusion criteria's and a data extraction sheet was used for the purpose of study appraisal.

DISCUSSION

To understand how care pathway models can be adapted to educational institutions and utilized for support provision for college students, we must first evaluate the current pathway to mental health care available to any person with mental health issues in LMICs.

EXAMINING EXISTING PATHWAYS TO MENTAL HEALTHCARE IN LOW-MIDDLE- INCOME COUNTRIES (LMICs)

Three categories can be used to group the distinguishable phases of help-seeking behavior across care routes; these are: 1) Defining the problem 2) Deciding where to seek help 3) Finding a source of support (Ikwuka et al., 2016). Care pathways for mental illness in Low Middle-income countries (LMICs) are often complex and pluralistic in nature and include traditional healing practitioners (Lilford et al., 2020). There are three categories of care provision choices available to individuals among LMICs' pathways to mental health care: a) Community sector b) Traditional healing modalities c) Professional care sector. It is possible that an individual may access multiple practitioners simultaneously in his care seeking journey. Figure 1 summarizes the pathways to mental health care in LMICs.

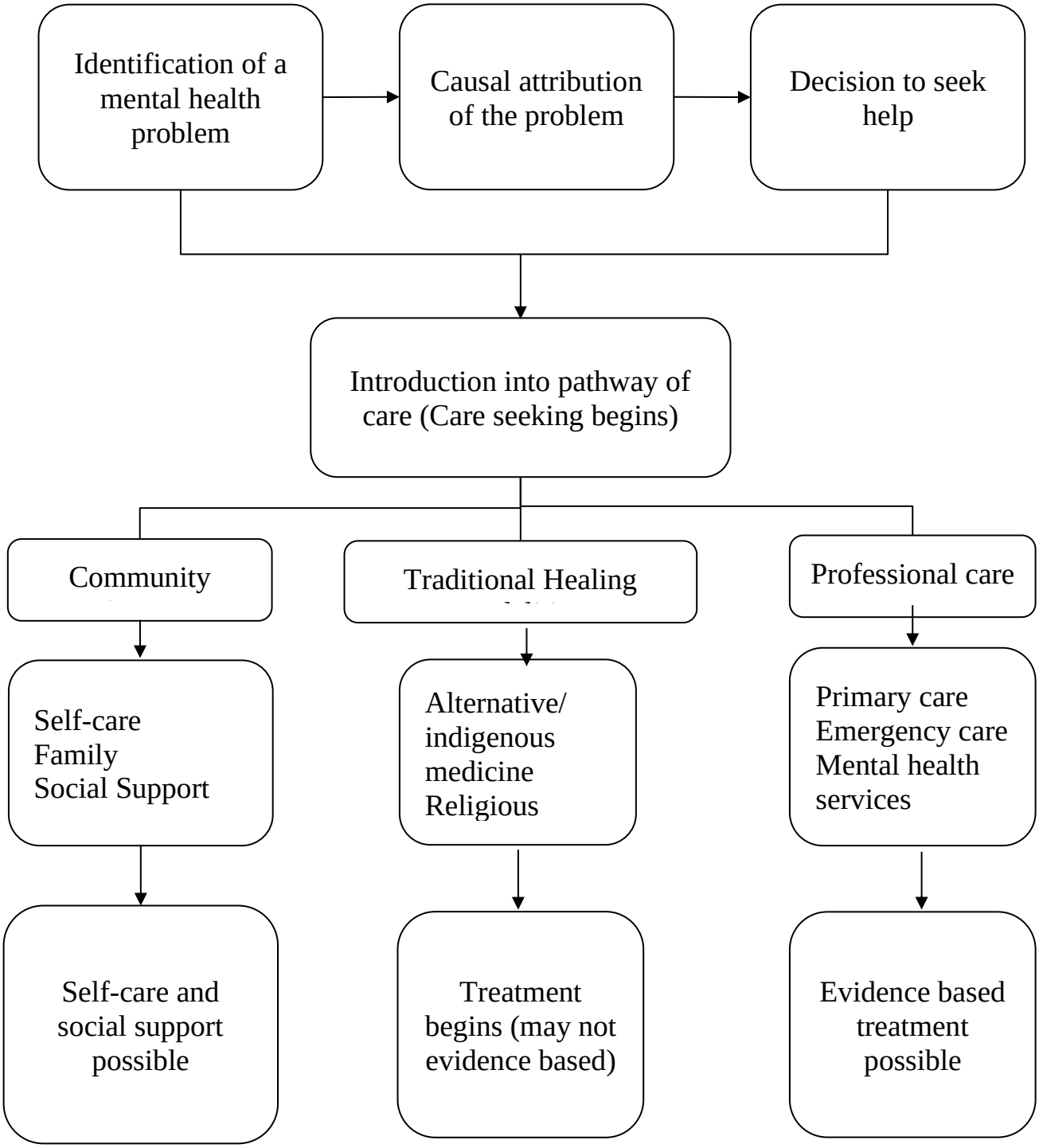

Figure 1*: Care Pathway for Mental Health Care in Low-Middle income countries (LMICs)*

UTILITY OF CARE PATHWAY MODELS IN EDUCATIONAL INSTITUTION IN LMICs

Research indicates that most mental health disorders have their peak onset during young adulthood (Pedrelli et al., 2014, Kessler et al., 2007). Additionally, college life brings with itself a range of stressful tasks for college students including separation and individuation from their families, additional work and family responsibilities, academic and social stressors (Wasil et al., 2022, Pedrelli et al., 2014). Given the complexities of college life and its impact on the mental health of students, student mental health at university campuses is a responsibility of the educational institutions in which these students are embedded. Creating a structured care pathway where every student can be placed organically is one of the ways to address the mental health of students on college campuses. The care pathway models that are now available for obtaining mental health services can be adjusted to fit the college requirements and environments. Figure 2 outlines the proposed care pathway model for educational institutions.

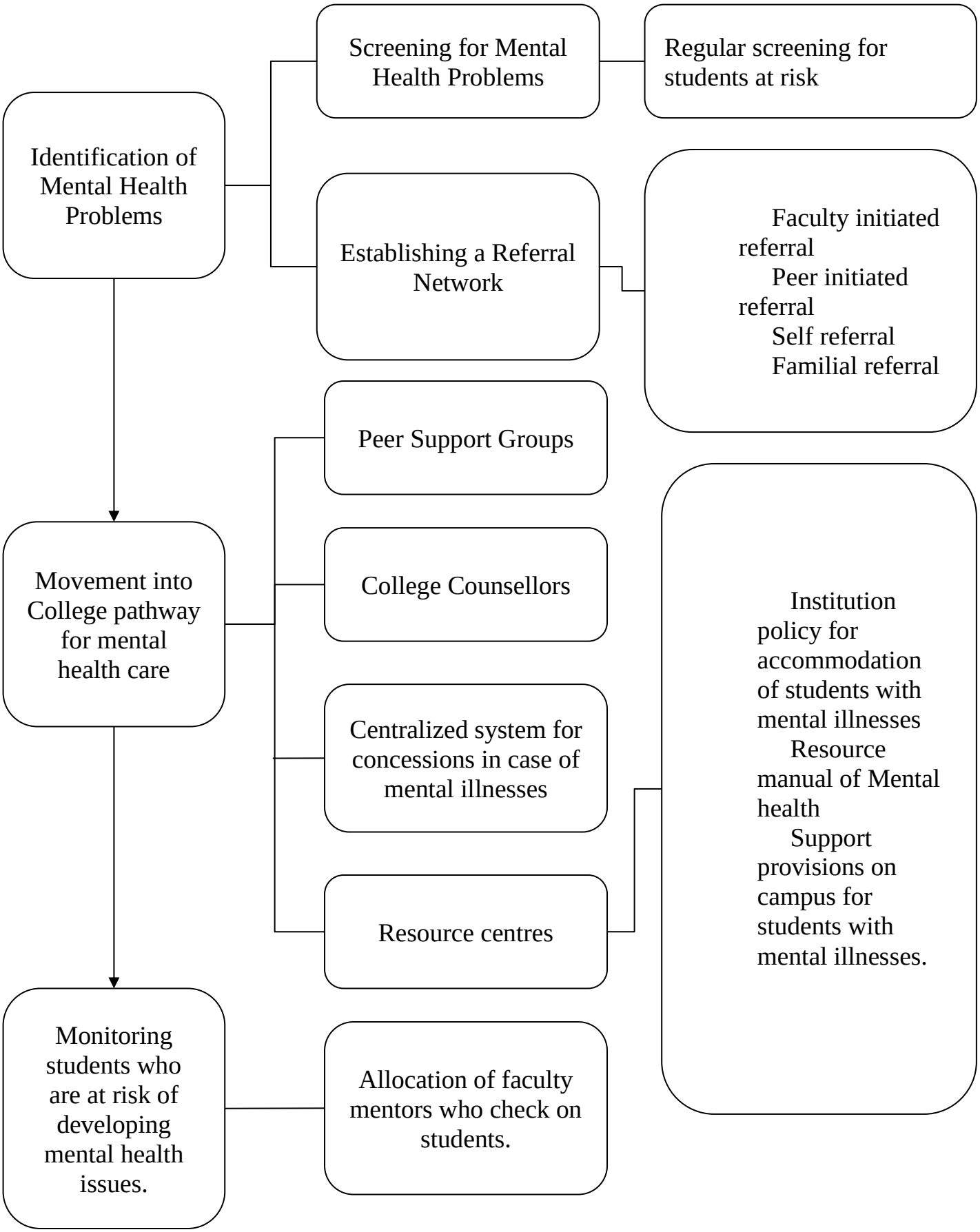
Identification of Mental Health Problems
Screening for Mental Health Problems
Regular screening for students at risk
Establishing a Referral Network
Faculty initiated referral
Peer initiated referral
Self referral
Familial referral
Movement into College pathway for mental health care
Peer Support Groups
College Counsellors
Centralized system for concessions in case of mental illnesses
Resource centres
Institution policy for accommodation of students with mental illnesses
Resource manual of Mental health
Support provisions on campus for students with mental illnesses.
Monitoring students who are at risk of developing mental health issues.
Allocation of faculty mentors who check on students.

***Figure 2**: Proposed care pathway model for educational institution*

The proposed care pathway model for educational institutions consists of three components: a) Identification of Mental Health problems of students b) Movement of at-risk students into the care pathway of mental health care and c) Monitoring students who are at risk for developing mental health issues.

Identification of Mental Health problems of students.

Research has highlighted that population-based screening can enhance help seeking behaviour of college students who are at risk for mental health problems (Downs et al., 2017, Kim, Coumar, Lober, & Kim, 2011). Screening for mental illnesses can happen through web based authorized screening modalities or through sessions in class that exclusively screen students for mental health problems. In addition to regular screening, it is important to set up a cohesive referral network to ensure higher rates of identification of students with mental health issues. The referral network can be divided into referrals initiated by faculties, peers, students themselves or family. All the referred student cases are to be sent to college counselors.

Movement of at-risk students into the care pathway of mental health care.

Once the students at risk are identified, they can then be introduced to the college care pathway for mental health care. The college care pathway for mental health care includes the following components: a) Peer Support Groups b) College Counselor c) Centralized system for concession in case of mental illnesses d) Resource centers. The peer support groups, and college counselors help students navigate their mental health experiences and the centralized system for concession in case of mental illness and resource center helps students become more aware of their rights within the institution and institutional policies for mental health support. For every case referred to the counselor, the counselor is expected to take at least one intake session to understand

the nature of problems that the student is facing and based on his professionalexpertise decide whether the student needs additional professional help outside of college or can it be managed under the college counseling programs. Every student who is advised additional help should be provided with resource manual orienting them to their options for mental health care and the pathway for the same.

Monitoring students who are at risk for developing mental health issues.

Evidence suggests student-faculty mentoring relationships have positive outcomes including better academic outcomes, professional skill development, professional confidence and identity development and psychological and health benefits (Allen & Eby, 2010). Given the multifold benefits of mentoring, we suggest utilizing the student-faculty mentoring relationship as a means of monitoring students mental health and well-being.

RECOMMENDATIONS FOR EDUCATIONAL INSTITUTIONS

We recommend the following strategies to improve mental health outcomes on college campuses to educational institution:

a) Identify Mental Health issues of students via screening methods.
b) Maintain and monitor the mental health and well-being of students.
c) Develop institutional policy for mental health.
d) Design and promote college mental health care pathways.
e) Organize mental health awareness programmes to ensure mental health literacy on campus.
f) Develop capacity of university personnel to deal with mental health issues of students.

CONCLUSION

In conclusion, we suggest that colleges and universities take proactive steps to ensure mental health and well-being of students. While doing so, it is necessary to keep in mind the socio-

cultural context of LMICs as what works in the West may not work here. Student mental health is a public health priority, and educational institutions must take active steps in not just reducing the burden of mental illnesses on campus but also in building resilience and well-being of students.

REFERENCES

Allen, T. D., & Eby, L. T. (2010, April 26). *The Blackwell Handbook of Mentoring*. John Wiley&Sons.http://books.google.ie/books?id=4KbKqbMNJZQC&printsec=frontcover&dq=10.1111/b.9781405133739.2007.00&hl=&cd=1&source=gbs_api.

Auerbach, R. P., Mortier, P., Bruffaerts, R., Alonso, J., Benjet, C., Cuijpers, P., Demyttenaere, K., Ebert, D. D., Green, J. G., Hasking, P., Murray, E., Nock, M. K., Pinder-Amaker, S., Sampson,

N. A., Stein, D. J., Vilagut, G., Zaslavsky, A. M., & Kessler, R. C. (2018, October). WHO World Mental Health Surveys International College Student Project: Prevalence and distribution of mental disorders. *Journal of Abnormal Psychology*, *127*(7), 623–638. https://doi.org/10.1037/abn0000362.

Bantjes, J., Hunt, X., & Stein, D. J. (2022, November 18). Public Health Approaches to Promoting University Students' Mental Health: A Global Perspective. *Current Psychiatry Reports*, *24*(12), 809–818. https://doi.org/10.1007/s11920-022-01387-4.

Downs, A., Boucher, L. A., Campbell, D. G., & Polyakov, A. (2017). Using the WHO–5 Well-Being Index to Identify College Students at Risk for Mental Health Problems. *Journal of College Student Development*, *58*(1), 113–117. https://doi.org/10.1353/csd.2017.0008.

Duffy, A., Saunders, K. E. A., Malhi, G. S., Patten, S., Cipriani, A., McNevin, S. H., MacDonald, E., & Geddes, J. (2019, November). Mental health care for university students: a way forward? *The Lancet Psychiatry*, *6*(11), 885–887. https://doi.org/10.1016/s2215-0366(19)30275-5.

Ikwuka, U., Galbraith, N., Manktelow, K., Chen-Wilson, J., Oyebode, F., Muomah, R. C., & Igboaka, A. (2016, July 28). Pathways to mental healthcare in south-eastern Nigeria. *Transcultural Psychiatry*, *53*(5), 574–594. https://doi.org/10.1177/1363461516660903.

Javed, A., Lee, C., Zakaria, H., Buenaventura, R. D., Cetkovich-Bakmas, M., Duailibi, K., Ng, B., Ramy, H., Saha, G., Arifeen, S., Elorza, P. M., Ratnasingham, P., & Azeem, M. W. (2021, April). Reducing the stigma of mental health disorders with a focus on low- and middle-income countries. *Asian Journal of Psychiatry*, *58*, 102601. https://doi.org/10.1016/j.ajp.2021.102601.

Kessler, R. C., Amminger, G. P., Aguilar-Gaxiola, S., Alonso, J., Lee, S., & ??st??n, T. B. (2007, July). Age of onset of mental disorders: a review of recent literature. *Current Opinion in Psychiatry*, *20*(4), 359–364. https://doi.org/10.1097/yco.0b013e32816ebc8c.

Kim, E. H., Coumar, A., Lober, W. B., & Kim, Y. (2011). Addressing mental health epidemic among university students via web-based, self-screening, and referral system: A preliminary study. IEEE Transactions on Information Technology in Biomedicine, 15, 301-307.

Lilford, P., Wickramaseckara Rajapakshe, O. B., & Singh, S. P. (2020, December). A systematic review of care pathways for psychosis in low-and middle-income countries. *Asian Journal of Psychiatry*, *54*, 102237. https://doi.org/10.1016/j.ajp.2020.102237.

Pedrelli, P., Nyer, M., Yeung, A., Zulauf, C., & Wilens, T. (2014, August 21). College Students: Mental Health Problems and Treatment Considerations. *Academic Psychiatry*, *39*(5), 503–511. https://doi.org/10.1007/s40596-014-0205-9.

Storrie, K., Ahern, K., & Tuckett, A. (2010, January 27). A systematic review: Students with mental health problems—A growing problem. *International Journal of Nursing Practice*, *16*(1), 1–6. https://doi.org/10.1111/j.1440-172x.2009.01813.x.

Thornicroft, G., Sunkel, C., Alikhon Aliev, A., Baker, S., Brohan, E., el Chammay, R., Davies, K., Demissie, M., Duncan, J., Fekadu, W., Gronholm, P. C., Guerrero, Z., Gurung, D., Habtamu, K., Hanlon, C., Heim, E., Henderson, C., Hijazi, Z., Hoffman, C., . .Winkler, P. (2022, October). The Lancet Commission on ending stigma and discrimination in mental health. *The Lancet*, *400*(10361), 1438–1480. https://doi.org/10.1016/s0140-6736(22)01470-2.

Vaishnav, M., Javed, A., Gupta, S., Kumar, V., Vaishnav, P., Kumar, A., Salih, H., levounis, P., NG, B., Alkhoori, S., Luguercho, C., Soghoyan, A., Moore, E., Lakra, V., Aigner, M., Wancata, J., Ismayilova, J., Islam, M. A., Da Silva, A. G., . . . Ashurov, Z. (2023, October). Stigma towards mental illness in Asian nations and low-and-middle-income countries, and comparison with high-income countries: A literature review and practice implications. *Indian Journal of Psychiatry*,*65*(10),995–1011. https://doi.org/10.4103/indianjpsychiatry.indianjpsychiatry_667_23

Wasil, A. R., Malhotra, T., Nandakumar, N., Tuteja, N., DeRubeis, R. J., Stewart, R. E., & Bhatia, A. (2022, March). Improving Mental Health on College Campuses: Perspectives of Indian College Students. *Behavior Therapy*, *53*(2), 348–364. https://doi.org/10.1016/j.beth.2021.09.004