

MENTAL HEALTH? REQUIREMENT OF MENTAL HEALTH EDUCATION IN SCHOOLS

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Abstract: *Abstract: Health is incredibly necessary for development of the country and so is mental health. Mental health has impact on educational outcome, productivity at work, development of positive personal relationships, crime rate, and alcohol & drug abuse. Factors affecting mental health are inherited characteristic, development during childhood, life circumstances. The prevalence of mental disorders is high in the 13-17 age group was 7.3%. Progress in mental health service delivery has been slow in most low- and middle-income countries. There are barriers in delivering mental health services like the existing public-health priorities and its influence on funding, challenges to delivery of mental health care in primary-care settings, the low numbers of those trained in mental health care. There have been numerous calls for invoking political will, for enhancing advocacy and for galvanizing community participation; all with scant improvement in outcomes. So School is one of the most effective places for each educators and students to become more and more tuned in to psychological state, psychological state issues and mental disorders. This truth file highlights the vital aspects of psychological state and disorders.*

Key Words: *Health, Mental health, Mental health education, School.*

1. INTRODUCTION:

Health is incredibly necessary for development of the country. World health Organization (WHO) defines Health “It may be a state of complete physical, mental, social and religious well-being and not simply the absence of malady or infirmity”.

UN agency defines mental state “as mental well-being during which a personal realizes their own skills, will address the traditional stresses of life, will work fruitfully and is in a position to create a contribution to his or her community” During this sense, mental state is that the foundation for individual well-being and also the effective functioning of a community.

2. MENTAL HEALTH HAS IMPACT ON:

- Educational out come
- Productivity at work
- Development of Positive personal relationships
- Crime rate
- Alcohol & drug abuse.

Mental health may be a major concern worldwide and Asian nation isn't so much behind in sharing this. World Health Organization (WHO), in 1954, had cannily declared that “without mental state there may be no true physical health.”

More than sixty years later, the state of affairs has not altered well. Concerning Bastille Day of the worldwide burden of malady is attributed to medicine disorders. The burden of mental disorders is probably going to possess been underestimated owing to inadequate appreciation of the inter-play between psychopathy and different health disorders.

3. FACTORS AFFECTING MENTAL HEALTH:

- Inherited characteristic
- Development during childhood
- Life circumstances

In 2015 a survey was conducted by WHO as per the National Mental Health Survey, 1 in 20 people in India suffer from depression. The prevalence of mental disorders is high in the 13-17 age group was 7.3%. Progress in mental health service delivery has been slow in most low- and middle-income countries.

4. BARRIERS IN DELIVERING MENTAL HEALTH SERVICES:

- I. The Existing Public-Health Priorities and Its Influence on Funding.
- II. Challenges to Delivery of Mental Health Care in Primary-Care Settings.
- III. The Low Numbers Of Those Trained In Mental Health Care;
- IV. And The Lack of Mental Health Perspective In Public-Health Leadership.

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School is one of the most effective places for each educators and students to become more and more tuned in to psychological state, psychological state issues and mental disorders. This truth file highlights the vital aspects of psychological state and disorders.

School psychological state services are essential to make safe faculties. Psychological state services in faculties are important to raising the physical and psychological safety of our students and faculties, additionally as educational performance and problem-solving skills.

5. MENTAL HEALTH DISORDERS IN CHILDREN:

Mental health disorders affecting children and adolescents can range

- Temper Tantrum
- Sleep Disorders
- School Phobia
- Thumb Sucking Or Finger Sucking
- Tick Disorder
- Attention Deficit Hyperactivity Disorder (ADHD) To Autism,
- Depression,
- Eating Disorders,
- Schizophrenia, And Others.

Students suffering from these mental health disorders faces barriers to learning and are less likely to graduate from high school. Main responsibilities of faculty, lecturers relating to this issue is embody a secure and healthy school setting, supporting the physical and psychological state of kids, fostering their social and emotional well-being, and being ready to send word teen aged suicide through effective communication and support.

6. COMPONENTS OF MENTAL HEALTH CURRICULUM IN SCHOOLS:

Three components is needed in a Mental Health Curriculum in Schools –

The first component is very important to create awareness about the importance of emotional well-being, remove the taboo related to mental illness and sensitize students to individuals who may be in distress.

The idea is, to understand that mental health related problems are real, that they are not due a person's character flaw or weakness, and that many people around us may be in suffering.

The second components encouraging help seeking behavior in students.

The feelings of isolation, hopelessness and helplessness people experience, which may lead them to take drastic steps, can in fact be ameliorated if students know where and how they can reach out for help. Students need to have a safe space in the form of teachers and counselors with whom they can share **Taking on from this; the second component** of the curriculum should be around encouraging help seeking behavior.

The third component of the curriculum, and perhaps the most important, is the preventive aspect -- educating students on enhancing self and emotional awareness, improving communication skills such as empathy and assertiveness, thinking critically and taking effective decisions, and coping effectively with stress, with a positive attitude and mindset.

A mental health curriculum is not adding more syllabuses. We need a more open, interactive approach, by the school counselors of every school.

Rather than waiting for students to come to us in distress, we need to go out there into classrooms - to engage in dialogue in a controlled classroom environment, to conduct group interactions to get an idea of students' understanding of mental health, to use teaching moments to talk about the things that impact us, as they occur in our everyday lives.

7. WHY IS MENTAL HEALTH IMPORTANT?

According to WHO, by the year 2020, depression will be the second largest disease burden worldwide (Murray & Lopez, 1996). Global burden of mental health will be beyond the treatment of developed and developing countries. The social and economic costs associated with increased burden of mental ill health focused for promoting mental health

as well as preventing and treating mental illness. Thus the Mental Health is linked to behaviour and seen as physical health and quality of life.

- **Physical health and mental health** are closely associated and it is proved beyond doubt that depression leads to heart and vascular diseases
- **Mental disorders have affect health behaviour of an individual like** uptake in manners, regular exercise, adequate sleep, partaking in safe sexual practices, alcohol and tobacco use, medical therapies therefore increasing the chance of physical sickness.
- **Mental unhealthiest conjointly ends up in social issues like** state, broken families, poverty, habit, and connected crime.
- Penurious psychological state occupies an important role in declined immunologic response.
- **Medically ill patients with depression** have worse outcome than those without.
- **Chronic illnesses like diabetes, cancer,** heart disease increases the risk of depression

The World Health Organization (WHO) advocates SMH (School Mental Health) to be an integral part of school health systems, having components of promotion of psychosocial competence, mental health education, and provision of services for needing mental health interventions (Hendren, Weisen, & Orley, 1994).

In India there is a growing realization about the need for implementation of SMH (Agarwal, 2004; Malhotra, 2004). For example, the Central Board of Secondary Education (CBSE) has emphasized on the importance of reducing stress in children and inculcating positive attitude through programs in schools (CBSE, 2008). In fact, the CBSE has started life-skills training in curriculum as it helps the learner to face life with a sense of confidence and conviction (CBSE, 2004). Child and adolescent psychological state issues additionally underscore the requirement of SMH programs. Numerous medical specialty studies implicate a higher prevalence rate of psychological state issues problems in youngsters and adolescents in Bharat.

8. REQUIREMENT OF MENTAL HEALTH EDUCATION IN SCHOOL

India has the largest population of adolescents in the world, home to 243 million individuals, which is a significant number accounting for one-fifth of the world's adolescents. Mental health assessment in India will in turn affect global health. Mental health problems affect a significant number of children and adolescents and continue to be on the rise worldwide.

Recently, a meta-analysis of 41 studies conducted in 27 countries between 1985 and 2012 estimated a global prevalence of mental disorders in children and adolescents of 13%. The prevalence of child psychiatric disorders in India has been found to be high 23% in schools and 7% in the community.

In 2015 by WHO As per the National Mental Health Survey, conducted 1 in 20 people in India suffer from depression. Mental Health Issues remain a taboo in India especially among students. Indian adolescence in the age group of 13-17 years suffers from psychological state problems. The proportion is homogeneous for adolescent male and female.

India does have a National Mental Health Policy which not just seeks to reduce mental health issues but also seeks to dissipate the stigma attached to mental health problems. There is a need for additional steps and awareness In national health policy to be created among school children to weed the problem out at an earlier stage.

According to a statistics released by National Crime Records Bureau (NCRB) for the year 2015, almost 8952 students committed suicide in India. One of the common reasons for students to commit suicide is the pressure to do well in examination or failure in exam.

Young Indians in the age group 13-17 were in need of active intervention. The prevalence of mental disorder was almost twice in urban areas (13.5%) in comparison to rural areas (6.9%). the number of depression cases among students in India.

Some of the most common prevalent problems were Depressive Episode and Recurrent Depressive Disorder (2.6%), Agoraphobia (2.3%), Intellectual Disability (1.7%), Autism Spectrum Disorder (1.6%), Phobic anxiety disorder (1.3%) and Psychotic disorder (1.3%).

The data is not only revealing but also alarming. According to the Indian education system, 13-17 age group undergo some major milestones of their academic career during this time. The standard age for a 10 board student is 14-15 and that of a student who takes class 12 board exams is 16-17. The board exams can trigger immense stress and anxiety among students. The data is not only revealing but also alarming. The board exams can trigger immense stress and anxiety among students. Although, many schools and boards have begun to incorporate guidance counselors in their system to help students relieve their stress at the time of boards but is the effort enough?

In an article published by the Guardian, mental health well-being should be incorporated in the school curriculum and students, from a young age, should be equipped with knowledge and skills to make them aware of their

mental well-being. E data is not only revealing but also alarming. As per the Indian education system, kids in the age group 13-17 undergo some major milestones of their academic career during this time. The standard age for a student who takes class 10 board exams is 14-15 and that of a student who takes class 12 board exam is 16-17. The board exams can trigger immense stress and anxiety among students. Although, many schools and boards have begun to incorporate guidance counselors in their system to help students relieve their stress at the time of boards but is the effort enough?

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9. CHILD MENTAL HEALTH IN INDIA:

Child Mental Health Services is at a nascent stage in India currently. In India, the adolescent population constitutes a quarter of the country's population which is approximately 243 million which in turn constituted 20% of the world's 1.2 billion adolescents. Children and adolescents in Developing countries constitute 35–50% of the population. About half of all lifetime mental disorders begin before the age of 14 years .We can improve the mental health status of child in these following sub areas.

- **Awareness of childhood mental health issues** and child developmental issues is low but increasing.
- **Non Governmental Organizations** play an important role in providing services especially to school children **as Career Counseling and Counseling for emotional problems.**
- **Nutritional, and medical developmental aspects.** Adolescent Girls are provided services often under the Adolescent Reproductive and Sexuality Health Program of the NGOs and INGOs.
- **Awareness regarding the psychological issues of children and adolescents was meager and school mental health program**
- **School Mental Health Program** in the major metropolitan cities like Mumbai, Delhi and Bangalore. Most initiatives have focused on increasing the awareness of the teachers and/or parents about child mental health issues.
- **What many people are not aware of is that psychiatric disorders are medical illnesses** just like any other illness that afflicts the body.

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