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The Impact of Mental Health Literacy (MHL) in a College Reading Enhancement Course

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Abstract

The article describes the results of Mental Health Literacy (MHL) embedded in an undergraduate college reading enhancement course. Post-secondary institutions are aware of today's mental health epidemic and are creating strategies to help students gain awareness of mental health. MHL has been defined as the knowledge and beliefs individuals have about mental conditions that lead to "recognition, management, or prevention" (Jorm et al.,1997, p. 182). In this study, students enrolled in the academic course rated the effectiveness and quality of the MHL sessions using a Qualtrics survey, an online surveying tool. The college reading enhancement course is designed to provide students with instruction and practice in enhancing their vocabulary and comprehension skills. The results of the study indicated that the participants perceived the MHL sessions as beneficial. Participants provided optimistic ratings and views on the MHL guest lecture, the content presented, and their overall experience. Based on the positive results of this study, the researcher concluded that embedding MHL sessions into post-secondary classrooms could be a valuable strategy to enhance mental awareness on post-secondary campuses.

Keywords: mental health literacy (MHL), college reading enhancement course

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Mental health is not a new issue among students on a post-secondary campus. In past years, Wyatt and Oswalt (2013) stated that "Stress and other mental health challenges (i.e., depression and anxiety) pose a major problem for many undergraduate and graduate college students, and both their health and academic performance are affected negatively" (p. 96). More recent studies have conveyed that due to the 2020 global Coronavirus pandemic, there has been a renewed focus on higher education students experiencing mental health issues. Son et al. (2020) explained that mental health concerns among students enrolled in higher education institutions have increased due to COVID-19. More specifically, the Healthy Minds Survey (as cited in Flannery, 2023) included responses from more than 90,000 students varying from multiple United States higher education campuses revealing that more than 60% of college students meet the criteria for at least one mental health challenge (the survey showed 44% of students stated signs of depression; 37% stated that they experienced anxiety; and 15% said they were contemplating suicide). According to Moghimi et al. (2023), the increased pervasiveness of mental health challenges, mainly after COVID-19, can lead to factors such as unsatisfactory academic performance, distress, and challenges finding employment after graduation.

The pandemic has been a major factor that contributed to the increase in mental health issues; however, college students are faced with other challenges that affect their mental health. Abrams (2022) argued that college students are juggling innumerable challenges, such as personal relationships, adjusting to the campus environment, financial issues, social injustice, violence, and several forms of loss. Liang et al. (2023) emphasized that psychological distress is prevalent in universities, and there are mental health services available on campuses; however, students seek help from family and friends rather than mental health professionals because of mental health stigma or a professed lack of need. Meanwhile, educational practitioners must work proactively to focus on the well-being of others (Johnson & Lester, 2022) to help students have a successful academic journey and matriculate towards graduation. To accomplish this goal, university leaders are strategizing approaches to bring awareness to mental health and support students who face mental health challenges. As educational practitioners think creatively to support mental health concerns, Jaworska et al. (2016) noted, "While the goal of postsecondary institutions is not necessarily to provide psychiatric interventions per se, most strive towards creating a mental health strategy that supports students" (p. 767). To help students utilize services on campus, Ketchen Lipson et al. (2019) stressed that universities and colleges can integrate and promote mental health services through awareness programs, creative partnerships with on and off-campus entities, curriculum-based initiatives, and other campuswide tactics.

Jorm et al. (1997) introduced the term Mental Health Literacy (MHL), defining it MHL as the knowledge and beliefs about mental disorders that aid their recognition, management, or prevention; the ability to recognize specific disorders; knowing how to seek mental health information; knowledge of risk factors and causes, of self-treatments, and professional help available; and attitudes that promote recognition and appropriate help-seeking" (p.182). Research has shown that different elements of Mental Health Literacy (MHL) are associated with better mental health, improved knowledge and attitudes toward poor mental health, and greater intentions to seek support from mental health services (Gorczynski & Sims-Schouten, 2022). Kitzrow (2003) mentioned that the campus counseling center personnel can collaborate with faculty to make a special effort to schedule times for guest lectures on mental health and bring awareness about the resources and services that are readily accessible.

The current study aimed to evaluate the impact of embedding bi-weekly Mental Health Literacy (MHL) sessions (facilitated by a guest lecturer from the campus counseling center personnel) in one college reading enhancement course at a four-year Historically Black College University (HBCU) in the southeastern region. The college reading enhancement course is designed to provide students with instruction and practice in enhancing their vocabulary and comprehension skills to prepare them for college-level work. Students are placed in the reading enhancement course based on their reading scores on the ACT, SAT, or Accuplacer placement test. In higher education learning environments, this type of academic enhancement course is also referred to as learning support, basic skills, and/or developmental education (Davis & Palmer, 2010). Academic support courses are in 2-year and 4-year institutions to enhance students' basic skills (Chen, 2016), if required. The reading enhancement course was chosen because the researcher teaches the course and wanted to determine how undergraduate students enrolled in the course perceived MHL being incorporated to enhance awareness of mental health and the support/services offered by the campus counseling center. Coles et al. (as cited in Revealy et al., 2012) emphasized that few research studies have evaluated MHL with students enrolled in academic courses not related to health. Many colleges/universities support faculty by embedding counselors within academic units (Abrams, 2022).

Literature Review

Abrams (2022) specified that before the COVID-19 pandemic, institutions observed an increase in mental health challenges, and the traditional counseling center model needed to be improved. Zhu et al. (2021) emphasized that due to the pandemic, there has been an increase in mental health challenges (i.e. depression, and anxiety) among post-secondary students which led to concern for learners' well-being. In the COVID-19 era, the pandemic had a significant impact on young adults' (ages 18-25) mental health (Campbell et al., 2022; Salimi et al., 2023). Additional research has shown that students enrolled in post-secondary institutions are faced with other trials that affect their mental health. According to Gallagher et al. (as cited in Kitzrow, 2003), "A variety of social and cultural factors such as divorce, family dysfunction, instability, poor parenting skills, poor frustration tolerance, violence, early experimentation with drugs, alcohol, and sex, and poor interpersonal attachments may account for some of the increase" (p. 170-171). Research indicates mental health issues, such as depression, anxiety, and suicide are increasing on campuses, and students are not utilizing the mental health services that are available (Ketchen Lipson et al., 2019; Oswalt et al., 2020). There are reasons why students do not utilize mental health support services on college/university campuses. Kitzrow (2003) suggested that some students are unaware of the campus mental health support services. Additionally, other students have negative connotations or perceptions about mental health issues and counseling (Kitzrow, 2003). In addition to cultural factors and the pandemic, young adults who transition to the higher education milieu are in a challenging period since many are leaving a familiar environment to an unfamiliar environment (Wei et al., 2022).

Johnson and Lester (2022) highlighted that to aid in mitigating the prevalent mental health issues, stakeholders can create prevention strategies that coincide with the mental health services provided internally by the university and/or by external professional service entities. From a practitioner's viewpoint, post-secondary institutions should be a culture that addresses and supports the occurrences of factors that contribute to mental health challenges that are prevalent on campus (Oswalt et al., 2022). Furthermore, institutional leaders can show faculty

and staff that they understand the need for MHL by collaborating and strategizing ways to implement and support policies, programs, and practices to increase understanding of mental health (Centers for Disease Control and Prevention, 2023).

Early research demonstrates students' mental health should not solely be the counseling center's responsibility, but higher education personnel (i.e., administrators, faculty, and staff) who work closely with students can implement strategies to support students' mental health (Kitzrow, 2003). Currently, Salimi et al. (2023) noted that mental health and academics are interconnected; therefore, instructors can play a pivotal role in proactively humanizing the learning milieu that brings awareness to mental health concerns and supports learners' well-being. When institutions provide effective mental health services/support, there is a positive retention outcome (Kitzrow, 2003).

Since mental health resources are no longer limited to the university's counseling center, institutions need other ways to connect students to mental health resources (Abrams, 2022). Meanwhile, targeted strategies rooted in MHL are essential for students' well-being when faced with mental health challenges; these strategies consist of providing students with essential information about symptoms and disorders of mental health; addressing negative connotations and/or myths toward poor mental health; and providing awareness and access to mental health resources and service (Gorczynski & Sims-Schouten, 2022). Mental Health Literacy (MHL) is one strategy that education practitioners can add to their mental health awareness toolkit to lead discussions to address the negative beliefs and attitudes toward poor mental health and to provide information on how to access mental health support services on and off campus (Gorczynski & Sims-Schouten, 2022). The Centers for Disease Control and Prevention (2023) stated that MHL not only provides the knowledge and understanding of mental health, but also the skills individuals need to seek help when needed.

Methods

Study Design, Population & Setting

The study explored the impact of Mental Health Literacy (MHL) being embedded bi-weekly into one of the researcher's college reading enhancement courses at a four-year Historically Black College and University (HBCU) in the southeastern region. The study was approved by the University's Institutional Review Board (IRB) before the study commenced. This study applied a descriptive, quantitative design that included 17 undergraduates who signed the consent form, ages ranging from 18 and above, who were enrolled in the course during the time of the study. The research was conducted in an established or commonly accepted educational setting, involving normal educational practices; the MHL sessions were held in the assigned classroom of the course.

Participants were provided with an overview of the study during one of the face-to-face class meetings before the study began. Subsequently, participants were provided a copy of a written informed consent form. The form was read aloud while students read silently. Participants were allowed to ask questions before signing the form. If any subject changed their mind about participating in the study, they could have withdrawn from the study via email correspondence. It was clearly stated on the consent form that participation in the study was

voluntary, and if someone chose not to participate or withdrew from the study, there would be no penalty to their grade. No students opted out or dropped out of the study.

This study enabled the researcher to seek how students would respond to a guest lecturer from the campus counseling center's bi-weekly visits to the class to provide mental health information. Participants received firsthand information about the University's counseling center services and resources, topics related to mental health, and strategies to combat mental health issues through MHL sessions. Each session focused on different topics, such as anxiety, depression, stress, and financial issues. During the sessions, the guest lecturer discussed each topic using a PowerPoint presentation that included definitions, examples, and images related to the topic. To complement the lecture, the facilitator engaged the students in the discussions by asking them questions and allowing them to ask questions. Additionally, the participants in the study elaborated on experiences regarding the topic being discussed in a way they were comfortable sharing.

Survey & Data Analysis

This study did not include a pre- or post-survey. The researcher constructed an original brief survey using the anonymous Qualtrics surveying tool to explore how students perceived several aspects of the 45-minute Mental Health Literacy (MHL) sessions Participants used a Likert-scale format with five sentiment options (Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree) to rate the presenter and the discussion topics (anxiety, depression, stress, and financial issues); their overall experience was measured with three options (Exceeded My Expectations, Met My Expectations, and Did Not Meet My Expectations). The survey also included one open-ended question that allowed the respondents to express what information they perceived as useful or valuable without predefined choices. The responses to the open-ended question were colored-coded (data visualization) to identify reoccurring comments.

The Qualtrics survey link was available in Canvas, the Learning Management System (LMS) for participants to access. All data obtained in connection with this study remained anonymous. The survey data were kept on an encrypted server and accessed by the researcher. Once students submitted the anonymous data, it could not be withdrawn since it was unidentifiable. The analysis of the data was conducted in a private office with little to no chance of being overheard or seen.

Results

Table 1 *The Effectiveness of the Lecturer Conveying the Information*

Knowledge of Content	Rating
Knowledgeable about the content presented Engaged the audience. Allotted Time for Questions	90% 90% 94%

Table 1 illustrates how participants rated the effectiveness of the information conveyed by the guest lecturer. Participants used a five-point Likert scale to rate the lecturer's

effectiveness in conveying the information. The scale ranged from "Strongly Disagree" to "Strongly Agree." The analysis of the Likert scale responses focused on three key areas: the presenter's knowledge of the content, participant engagement, and the allotted time for questions. The survey results indicate high satisfaction with the presenter's delivery and engagement across all categories.

 Table 2

 The Effectiveness of the Content

Perception of the Content	Rating
Learned something that I did not know before	70%
Information I could use in the future	88%
Interactive and captured my attention.	80%

Table 2 shows perceptions of the information and utilization. Participants used a five-point Likert scale to rate how they perceived the information. The scale ranged from "Strongly Disagree" to "Strongly Agree." The analysis of the Likert scale responses focused on three key areas: New insights acquired, future utilization of the content, and interest in the content lectures. The ratings provided valued insights into any new knowledge on mental health obtained by the respondents, the impact the lectures had on participants' interests, and their utilization of the information in the future. The findings suggest that while some participants attained knowledge, a vast majority of participants will utilize the information in the future and voiced interest in the discussion. topics.

 Table 3

 Quality of Meeting Participants' Needs

Expectations	Rating
Exceeded my Expectations	56%
Met my Expectations	38%
Did not meet my expectations	0%

Participants also rated their overall experience of the MHL sessions, using the Likert-Scale format to select the sentiment levels as follows, Exceeded My Expectations, Met My Expectations, or Did Not Meet My Expectations. Table 3 specifies the response ratings of the participants' overall experience of the MHL guest lectures, which showed quality ratings. These percentages provided insights into how the participants perceived the sessions as meeting their needs. The findings conveyed that the respondents' needs were met. The response ratings

indicated that a vast majority of the participants expressed that the session surpassed their expectations, and others demonstrated that their expectations were met.

Participants were also asked to respond to an open-ended question that asked participants to express what information they found most useful and valuable. After analyzing the participants' responses, a few recurrent themes emerged: (1) Saving money to relieve financial stress, (2) Strategies to help with mental health issues, and (3) Appreciation of the sessions with comments such as "Great session," "Great stuff to learn," and "It made me feel good." The recurring themes demonstrated that participants found the practical strategies presented during the sessions useful and appreciated the lectures.

Discussion

In providing learners with opportunities to strengthen their mental health and resources that will minimize mental health issues, students will be more supported on their academic journey. This is a descriptive, quantitative study exploring students' perception of Mental Health Literacy (MHL) being embedded in their college reading enhancement course. This study did not seek to find how many students suffered or were diagnosed with a mental health illness. This study was more aligned with descriptive data to explore if students benefited from the MHL sessions embedded in the academic course with lectures provided by the campus counseling center. Although this study was not considered diagnostic research, the MHL sessions were beneficial and had a positive impact on the participants. The guest lecturer's effectiveness in conveying mental health information obtained a 90% rating. As a combined total, over 90% of respondents acknowledged that the sessions either met or surpassed their expectations. The high ratings demonstrated that participants benefited from the guest lecturer and the content discussed. However, rates of the quality of the sessions' content were below 90%; with 70% of participants reporting that they attained new knowledge, 88% revealing that they would utilize the information in the future, and 80% voicing interest in the discussion topics. The session content quality rating below 90% signifies the need for additional research into mental health topics that post-secondary students may find more engaging and relevant to their needs. An open-ended question was included in the survey to invite participants to share their thoughts on the mental health guest lectures. They were asked to describe what they found most useful, valuable, or anything else they would like to comment on. The analysis revealed several recurring themes: (1) strategies for managing mental health concerns, (2) financial stress reduction tips, and (3) general appreciation ("Great session," "Great stuff to learn," "It made me feel good"). These responses suggest that integrating mental health literacy into the academic curriculum can expose learners to relevant information effectively. However, future research could benefit from prompting students to be more specific in their feedback. Asking how they might use the information beyond the classroom could provide a clearer picture of how these mental health awareness sessions impact student engagement with mental health campus resources.

The results suggest that embedding MHL sessions in an academic course that is not related to the health field can be beneficial in bringing awareness and addressing mental health strategies to students whom we, as faculty, work closely with. Ketchen Lipson et al. (2019) concluded that higher education institutions should integrate and promote mental health services through varied awareness initiatives, innovative partnerships with on-campus entities, curriculum-based programs, and other proactive campus-wide mental health/well-being services.

Implications

For college students, MHL can be an essential area of focus. Based on both the literature and the results from this study, higher education personnel who work closely with students can be creative in implementing strategies to expose students to mental health knowledge, campus resources, and services. The findings from this study revealed that faculty can integrate Mental Health Literacy (MHL) sessions into their academic curricula by partnering with their institution's counseling center personnel to schedule time for guest lectures. As a result, students will receive direct information and strategies to enhance mental health awareness and first-hand information regarding the campus counseling center for any support and timely intervention. Additionally, embedding MHL in courses demonstrates how instructors can foster mental awareness on a college campus and measure the impact to help identify areas of improvement to enhance the mental health awareness initiative through regular assessments.

Limitations

This study has some limitations that could be addressed during future studies to enhance the validity of research on integrating Mental Health Literacy (MHL) in academic courses at higher education institutions. One limitation is the fact that MHL sessions were embedded within one semester. This short period provided limited exposure to additional mental health topics that students could have benefited from. The study focused on specific topics, such as anxiety, depression, stress, and financial issues; other critical mental health challenges that students encounter may have been overlooked. Future studies could include a question on a pre-survey that asked students to identify what mental health topics they are most interested in learning more about. Based on the results, the MHL sessions can be selected on the topics with the highest ratings. Another limitation is related to the bias of the sampling. The study focused only on students enrolled in one of the researchers' college reading enhancement courses. As a result, the study does not represent students enrolled in similar courses or students enrolled in other academic courses across the institution. A broader implementation of integrating MHL in more than one academic course could permit greater exploration and potentially meet the needs of a diverse student cohort. Lastly, findings from one Historically Black College & University (HBCU) may not apply unanimously to all HBCUs in the southeastern region due to differences in the campus counseling center, the campus culture, readily accessible resources and services, and the scholar demographics; the distinctiveness of each university/college must be considered. Implementation of guest lectures on mental health from the campus counseling center provides valuable information to bring forth mental health awareness for students in higher education academic settings. Recognizing and acknowledging these limitations will inform future educational researchers to augment the effectiveness of MHL initiatives they may consider exploring at their institution.

Conclusion

As educational practitioners, we should not ignore the fact that mental illness is real, and some students may be suffering in silence. Based on the survey feedback, participants valued the mental health guest lectures. Embedding Mental Health Literacy (MHL) in an academic course provides a tool that could be utilized as an evidence-based solution to campus mental health

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trepidations. The findings indicate that faculty can support mental health by integrating MHL into their academic classes where students can easily have access to mental health information and gain essential knowledge to help bring awareness.

Furthermore, there is a call for further research to establish the prevalence of embedding mental health literacy in post-secondary academic classes not related to health to mitigate any mental health issues that may be already in existence and/or potentially occurring amongst post-secondary students. The need for mental health interventions is prevalent, and we, as higher education practitioners, can be creative by initiating innovative strategies that bring awareness to mental health and the campus resources/services that are available. Whether one is a faculty member or someone who works closely with students in the higher education sector, there are opportunities to equip students with firsthand knowledge needed to strengthen their mental awareness as they matriculate on their educational path.

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