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Mental Help-Seeking Behavior in Sub-Saharan African College Students in the US

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How do beliefs about mental health care differ for Sub-Saharan African College Students in the US according to whether they are an undergraduate or graduate student?^[P]_[SEP]

•By: Mabintu Donzo, Heather Edelblute, & Zeinab Baba

Background

Students from sub-Saharan Africa (SSA) struggle with adjusting to a new climate, communication problems with Americans, racial discrimination, homesickness, depression, fatigue, and a lack of comfort with U.S. culture.

African students reported significantly greater acculturative stress issues than other international students.

African college students also reported significantly greater depression than did Asian and Latin American students



Objectives

To assess differences in mental health care beliefs according to whether a SSA student is an undergraduate or graduate student

To assess what other factors influence mental health beliefs



Data and Methods

Data on students from SSA (n=916) was obtained for academic years 2016-2019 of the Healthy Minds Network (HMN), a yearly web-based survey conducted on US university campuses. Students were divided into two groups:

Undergraduate

Graduate

Differences were examined between undergraduate and graduate students using chi-square tests.

Logistic regression analysis was conducted using SAS to identify differences in mental health care help-seeking knowledge

Table 1: Bivariate Analysis of Healthy Minds Network Data according to Student Status (n=916)

| | | Student Status N (%) | |
|---|------------------------------|-------------------------|--------------|
| | | Undergraduate | Graduate |
| Sex at birth | Female | 256 (44.1) | 98 (38.9) |
| | Male | 325 (55.9) | 154 (61.1) |
| Current Financial Situation | Stressful | 471 (81.7) | 190 (75.0)** |
| | Not stressful | 106 (18.3) | 63 (25.0) |
| Mental health care knowledge | Agree | 377 (79.0) | 162 (70.9)* |
| | Disagree | 100 (21.0) | 66 (29.1) |
| Sought mental health care? | Yes | 117 (23.1) | 43 (18.6) |
| | No | 390 (76.9) | 190 (81.1) |
| Perceived Stigma of Mental Health Treatment | Yes | 267 (57.6) | 151 (69.1)** |
| | No | 196 (42.4) | 68 (30.9) |
| Number of mentally unhealthy days | None | 151 (26.8) | 102 (40.3) |
| | 1-2 days | 196 (34.8) | 69 (27.5) |
| | 3-5 days | 122 (21.6) | 46 (18.4) |
| | 6 or more days | 95 (16.9) | 35 (13.9)** |
| Depression levels | Minimal depression | 115 (27.7) | 62 (39.7)** |
| | Mild depression | 144 (34.7) | 53 (33.9) |
| | Moderate depression | 97 (23.4) | 19 (12.0) |
| | Moderately severe depression | 38 (9.2) | 19 (12.2) |
| | Severe depression | 21 (5.0) | 4 (2.3) |
| In the past year did you ever seriously think about attempting suicide? | Yes | 48 (9.4) | 10 (4.0) |
| | No | 463 (90.6) | 231 (96.1)** |
| Perceptions of mental health care: Medication | Very helpful | 83 (17.7) | 44 (20.2) |
| | Helpful | 161 (34.5) | 88 (39.9) |
| | Somewhat helpful | 172 (36.7) | 70 (31.9) |
| | Not helpful | 52 (11.1) | 17 (8.0) |
| Perceptions of mental health care: Therapy | Very helpful | 166 (35.9) | 108 (49.1) |
| | Helpful | 188 (40.9) | 77 (34.8)** |
| | Somewhat helpful | 84 (18.3) | 30 (13.7)** |
| | Not helpful | 23 (4.9) | 5 (2.4) |

*** p<0.001, ** p<0.01, * p<0.05, + p<0.10

Table 2: Logistic Regression Analysis of Mental Health Related Outcomes reporting odd ratios for Graduate Students (undergraduates are the excluded group) (n=473)

| | OR (95% CI) | |
|--|------------------------------|----------------------------|
| Number of mentally unhealthy days | None | Reference |
| | 1-2 days | 0.51 (0.28, 0.93)* |
| | 3-5 days | 0.58 (0.31, 1.10) |
| | 6 or more days | 0.77 (0.36, 1.66) |
| Depression levels: | Minimal depression | Reference |
| | Mild depression | 0.68 (0.39, 1.66) |
| | Moderate depression | 0.34 (0.17, 0.68)** |
| | Moderately severe depression | 1.16 (0.49, 2.74) |
| Severe depression | 0.38 (0.10, 1.45) | |
| Suicidality | Yes | 0.34 (0.11, 1.02)+ |
| | No | Reference |
| Sought mental health care? | Yes | Reference |
| | No | 0.40 (0.15, 1.06)+ |
| Mental health care knowledge | Agree | 0.50 (0.30, 0.83)** |
| | Disagree | Reference |
| Perceptions of mental health care: Therapy | Very helpful | Reference |
| | Helpful | 0.55 (0.31, 0.90)* |
| | Somewhat helpful | 0.41 (0.21, 0.77)** |
| | Not helpful | 0.31 (0.09, 1.01) |

*** p<0.001, ** p<0.01, * p<0.05, + p<0.10
Only significant results are presented.
Controlling for perceived stigma of mental health treatment, sex, health insurance status, and current and past financial situation.

Measures

Measures

Mental health care knowledge: measured in response to “If I needed to seek professional help for my mental or emotional health, I would know where to go on my campus.” (agree/disagree)

Sought mental health care?: measured in response to “Have you ever received counseling or therapy for mental health concerns?”

Perceived Stigma of Mental Health Treatment: was determined through agreement with the statement: “Most people think less of a person who has received mental health treatment.”

Number of mentally unhealthy days: “In the past 4 weeks, how many days have you felt that emotional or mental difficulties have hurt your academic performance?”

Depression levels: measured through the Patient-Health Questionnaire-9 (PHQ-9)

Suicidality was determined through agreement with the following question: “In the past year did you ever seriously think about attempting suicide?”

Perceptions of mental health care

- **Medication:** How helpful on average do you think medication is, when provided competently, for people your age who are clinically depressed?
- **Therapy:** How helpful on average do you think therapy or counseling is, when provided competently, for people your age who are clinically depressed? (very helpful, helpful, somewhat helpful, not helpful)

Control variables: sex at birth, health insurance status, past financial situation (stressful or not stressful), current financial situation (stressful or not stressful)

Key Results

Compared to undergraduate students, graduate students:

- Have an almost 50% reduced odds of 1-2 mentally unhealthy days in the past 4 weeks
 - Have a 65% reduced odds of moderate depressive levels and serious thinking about suicide.
 - Have a 60% reduced odds of seeking mental health care for mental health concerns.
 - Have a 50% reduced odds of knowing where to go to seek mental health care if they needed it.
 - Have a reduced odds of perceiving that therapy would be helpful for people with clinical depression.
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Discussion

- Although undergraduate students are more likely to report mental health outcomes such as depression, graduate students lack an awareness of mental health services on campus. In addition, they are less likely to have sought counseling or therapy for mental health concerns and to perceive therapy to be helpful for people with mental health concerns.
- Future research should examine beliefs surrounding mental health care for immigrant students who may come to the US with different frames of reference for mental health. In addition, this study points out a need to assess whether university mental health services are appropriately targeted for graduate students .

Citations

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