What mental health promotion do university students need?

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Abstract:
Our aim was to find out what university students expect of mental health promotion. 610 young people were asked a few open questions. 81% of respondents expressed an interest in mental health promotion activities. They associated promotional activities with physical, social and/or emotional health care. Basically, these positive expectations are in agreement with the biopsychosocial model of mental health formulated by the WHO (2005). No interest in the idea of promotion (11%) is caused by the erroneous assumption that mental health promotion is targeted at people with mental disorders; therefore, a mentally healthy person does not benefit from participating in such a programme.

Keywords
mental health promotion, students, expectations, qualitative research

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Streszczenie:
W celu poznania oczekiwań studentów uczelni wyższych względem promocji zdrowia psychicznego, przeprowadzono ankietę składającą się z pytań otwartych. Do analiz przyjęto odpowiedzi 610 młodych osób studiujących na 8 warszawskich państwowych uczelniach o różnym profilu. 89% ankietowanych wyraziło zainteresowanie wobec promocji zdrowia psychicznego. Działania promocyjne wiązały z dbałością o zdrowie fizyczne, zdrowie społeczne i/lub zdrowie emocjonalne. Zasadniczo można owe oczekiwania wpisać w model biopsychospołeczny zdrowia psychicznego sformułowany przez WHO (2005). Odrzucanie idei promocji (11% ankietowanych) zazwyczaj argumentowane było nieuprawomocnionym założeniem, iż odbiorcami promocji zdrowia psychicznego są jedynie osoby z zaburzeniami psychicznymi, stąd zdrowy psychicznie człowiek niczego nie zyska z udziału w tego typu programie.

Słowa kluczowe
promocja zdrowia psychicznego, studenci, oczekiwania, badania jakościowe

Introduction
According to the WHO definition (2001), mental health is a state of well-being in which an individual makes full use of his or her abilities, successfully copes with stress in daily life, works efficiently and fruitfully, and is capable of making a positive contribution to society. Mental health is an inseparable part of one’s general health, reflecting a balance between an individual and the environment. Mental, emotional, social and somatic well-being enable an individual to act effectively in his or her environment, achieve goals and develop his or her personality (WHO, 2005). All these areas are listed as important aspects, worth caring about if one wants to build and improve one’s mental health (WHO, 2001; Keyes, 2005; Lehtinen, 2008; Saving and Empowering Young Lives in Europe, 2013). Mental health promotion has a lot in common with the prevention of mental health disorders. Promotion basically concentrates on protective factors (see Verhaeghe et al. 2012; Weare and Nind, 2011). The aim of prevention is primarily to prevent behavior that may be risky or the development of mental disorders by concentrating on risk factors (see Bolier et al. 2013; Kelly et al. 2011; Kieling et al. 2011; Rosenberg, 2011).

Over the years, governments as well as other European and international institutions have issued dozens of documents listing recommendations and regulations that stipulate how mental health promotion programs should be established and implemented5. Follow-

5 Recommendations as to the need for mental health promotion can be found in the WHO resolution of 2002 (Strengthening Mental Health, Resolution of the Executive Board of the WHO, see: http://apps.who.int/gb/archive/pdf_files/EB109/eeb109r8.pdf) and the EU proposals of 2005 (Green Book. Improvements in mental health. Mental health strategies for the European Union, European Commission, Brussels 2005, see: http://www.ec.europa.eu/health/archive/ph_determinants/life.../mental_gp_pl.pdf). In Poland mental health promotion is one of the mission statements of universities (Minis-
ing the WHO recommendations, mental health protection and developing one’s true potential should be taken as seriously as medical treatment. There are different groups of people who benefit from such programs, including university students (Białkowska et al. 2014; Ghodasara et al. 2011; O’ Brien et al., 2008; Ostaszewski, 2014; Reavley et al. 2012; Stallman, 2010). The reason why this particular group should be given special attention and care is because of the responsibility which lies with educated people and general expectations of their important contribution to social, intellectual and cultural life and to technological progress. Admittedly, higher education is no longer elitist and the number of university graduates is growing rapidly, but it is still hoped that educated people will live up, at least partly, to these expectations. Promoting and protecting students’ mental health gives young people the chance to progress and undertake new developmental tasks. At the same time it prevents them from developing mental disorders. Young adults starting university are exposed to a variety of psychological problems. It seems that the major problem facing students is their inability to cope with stress. In fact, students are a high risk group for mental disorders, which include depressive, anxiety, emotional and personality disorders (Farrer et al., 2016; Hunt and Eisenberg, 2010; Ibrahim et al., 2013; Leahy et al., 2010; Stallman, 2010; Szafraniec, 2011). Feelings of depression (26.4%), general anxiety disorder (21.1%), and anxiety attacks (13.9%) are the problems most often declared by young Polish adults (Moskalewicz and Boguszewska, 2012). Mental health and emotional problems as well as a difficulty in coping with stress result in missing classes as well as failing to meet academic requirements such as getting credit for classes or passing exams (Storrie et al., 2010). Thus, it is essential that we promote mental health and design such programs that will be in line with students’ expectations and needs.

Many universities in the world carry out programs promoting mental health (see Doctor’s Mental Health Program; Health Promoting Universities; Keeping Your Grass Greener; Open Mind Project; Suicide Prevention Grant from the Substance Abuse and Mental Health Service; following AMSA, 2014; Fowler and Lebel, 2013; Garraway, 2011; Mitchella et al. 2012; Morris, 2011; Tsouros et al. 1998). These programs are preceded by research into the needs of the students and the academic community. In Poland there is no recommended health promotion program (or programs) which would be carried out at all the universities and planned in such a way as to involve mental health indices. Few universities launch programs or undertake activities aiming at mental health promotion or mental disorder prevention (see Czarnecka, 2011; Sokołowska et al., 2015; Uniwersytet Jagielloński, 2014; Uniwersytet Śląski, 2014). Large universities in Poland
run mental health centres, which offer workshops or other forms of mental health empowerment. However, schemes based on research into students’ current mental state are not common practice. What is more, the initiatives that are introduced are not always evaluated and, unfortunately, are not long-term in character.

**Description of the research**

**Reasons for undertaking the research.**

Firstly, promotional activities targeted at students should be based on existing models of mental health – mainly those which emphasize their positive aspects, such as the ability to cope with problems, emotional well-being, full personal development and the successful realization of developmental tasks (Keyes and Lopez, 2002; Keyes, 2005; Lehtinen, 2008; Peterson and Seligman, 2004). In this case, the aim (of a promotion) is not merely preventing mental disorders (negative aspects of mental health). Secondly, new programs should refer to the contents of existing ones that have proved effective. They should also make use of practical suggestions included in empirical reports which point to factors promoting mental health (positive aspects of mental health). For example, it is reported that mental health promotion has a positive influence on educational achievements (Dix et al. 2012). Our study is based on a third rule which stipulates that before a program for promotion is implemented, initial diagnosis should be made as to what the community at which such a program is to be directed actually needs (Greacen et al. 2012). A program – even if it is theoretically well-grounded and draws on empirical research results - seems to be fully useful only when it meets its addressees’ expectations. The findings presented here come from research project BSTP 25/13-1/, funded by a grant from the Ministry of Science and Higher Education in order to maintain the research potential of The Maria Grzegorzewska University in 2013. It was accepted by the ethics committee.

**Participants**

The research was conducted among over 610 students from state universities in Warsaw. The universities which took part in the study were: Uniwersytet Warszawski (UW), Uniwersytet Kardynała Stefana Wyszyńskiego (UKSW) and Warszawski Uniwersytet Medyczny (WUM); the academies and colleges were: Akademia Pedagogiki Specjalnej (APS); Szkoła Główna Gospodarstwa Wiejskiego (SGGW); Akademia Wychowania Fizycznego (AWF); Wojskowa Akademia Techniczna (WAT); Szkoła Główna Służby Pożarniczej (SGSP). In total we accepted 610 written statements including 14 sheets which had not been completed and which were hence rejected.
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Table 1.
Shows the percentage share of students from the aforementioned universities who took part in the study.

<table>
<thead>
<tr>
<th>University</th>
<th>Number of respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Akademia Pedagogiki Specjalnej (APS)</td>
<td>166</td>
<td>27</td>
</tr>
<tr>
<td>Akademia Wychowania Fizycznego (AWF)</td>
<td>34</td>
<td>6</td>
</tr>
<tr>
<td>Szkoła Główna Gospodarstwa Wiejskiego (SGGW)</td>
<td>119</td>
<td>19</td>
</tr>
<tr>
<td>Szkoła Główna Służby Pożarniczej (SGSP)</td>
<td>47</td>
<td>8</td>
</tr>
<tr>
<td>Uniwersytet Kardynała Stefana Wyszyńskiego (UKSW)</td>
<td>20</td>
<td>3</td>
</tr>
<tr>
<td>Uniwersytet Warszawski (UW)</td>
<td>89</td>
<td>15</td>
</tr>
<tr>
<td>Wojskowa Akademia Techniczna (WAT)</td>
<td>91</td>
<td>15</td>
</tr>
<tr>
<td>Warszawski Uniwersytet Medyczny (WUM);</td>
<td>44</td>
<td>7</td>
</tr>
</tbody>
</table>

The following tables present the percentage and number share of students with reference to their gender (Table 2.) and the year of studies they were in (Table 3.). The differences in the number of people in the tables result from the fact that not all the respondents specified their gender (606 out of 610 people did so).

Table 2.
Percentage and number tabulation of students with reference to their gender

<table>
<thead>
<tr>
<th>Gender</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women</td>
<td>401</td>
<td>65.7</td>
</tr>
<tr>
<td>Men</td>
<td>205</td>
<td>33.6</td>
</tr>
<tr>
<td>Not disclosed</td>
<td>4</td>
<td>0.7</td>
</tr>
</tbody>
</table>

Table 3.
Percentage and number tabulation of students with reference to the year of studies.

<table>
<thead>
<tr>
<th>Year of studies</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>86</td>
<td>14</td>
</tr>
<tr>
<td>2</td>
<td>105</td>
<td>17</td>
</tr>
<tr>
<td>3</td>
<td>290</td>
<td>48</td>
</tr>
<tr>
<td>4</td>
<td>96</td>
<td>16</td>
</tr>
<tr>
<td>5</td>
<td>33</td>
<td>5</td>
</tr>
</tbody>
</table>
Figure 1 presents the students’ age. They were people in early adulthood; the average age of the respondents was 22 (the median age was 21).

Figure 1. Tabulating the number of students with reference to their age.

Method

The students who participated in the study had to complete a questionnaire by answering two open questions. The questions were formulated in such a way as to enable the participants to use their own words and create their own personal space. These kind of questions constitute an act of respect and give a sense of control. Also, they may initiate the restoration of a student’s sense of competence.

1. What would you expect of a program for mental health promotion?
2. What would be the optimal time, intensity and methods of realizing work within a program for mental health promotion?

The respondents were told that the questionnaire had been specially prepared to provide a basis for such a mental health promotion program that would satisfy all their expectations.
Procedure for analyzing responses

We analysed the students’ responses in several stages:

First, we examined whether a student formed positive expectations of a mental health promotion program and considered it useful. We determined that a lack of positive expectations means that a respondent either might not have any expectations of such a program, or has only negative expectations; in other words he or she has doubts as to the benefits of such a program or its effectiveness.

The next step was to determine (a) whether positive expectations concern the way a promotion program is to be carried out and/or (b) what its subject matter should be and/or (c) who is to participate in it. We chose the following one-sentence statement as an example of a response which concerns merely the organization of a promotion program: ‘[I expect] an in-depth and thorough realization of the subject, the right attitude and commitment on the part of the trainer.’ Another example is a statement which concentrates on the type of subject to be dealt with: ‘[I expect] Workshops, training sessions which would enable participants to acquire skills useful in everyday life, such as assertiveness, auto-presentation, communication, time management, relaxation and negotiation techniques, achieving goals, and motivation. Instructions on how to fare effectively in my environment.’

Next, we analyzed the students’ responses in terms of the subject matter they expected from a mental health promotion program. We selected the answers in which the subject matter related to: (a) somatic health, with the stress on promoting physical well-being and/or (b) psychological health, identified as optimizing emotional well-being and developing cognitive skills and/or (c) social health, defined as an area of interaction which helps students to improve their interpersonal relationships. Also, we determined that the subject matter of a promotion program might be merely signalled by using an appropriate synonym. Then an expectation is formulated in a very general way. Here is an example of such a statement: ‘[I expect] Meetings/email messages/a Fan Page on Facebook with useful information on how to look after one’s mental health.’ In their statements the students brought up the question of what the subject matter of a mental health promotion program should be. They found it synonymous with looking after or improving mental health, but they did not expand on it.

Finally, we analyzed whether activities proposed by the students as a way of promoting mental health were presented as beneficial to the whole academic community and concerned the whole university. One of the respondents wrote: ‘A university should treat their students as adult people who must be responsible for themselves. Additionally, all the rules which are applicable should be straightforward and clear. They should be readily available for inspection. University staff members whose responsibility it is to attend to student matters, for example, people working in the dean’s office, should be com-
petent and helpful. If any of the aforementioned aspects is neglected, it is highly likely that such a university will degrade its students’ mental health. That’s what the program should deal with.’ We also selected the statements where the addressee of a promotional program was explicitly a student himself/herself or a student community as such, as well as those where the addressees were both a student/students and university staff. The final target group of a promotional program was young adults. The anticipated program addressee was a young person, but there was no requirement that he or she must be a student. In the respondents’ opinion, young non-students also need support and specific competences. The following statement is an example of the last type: [I expect] A consideration of the real problems a young adult has to tackle, for example the problem of finding a job, supporting themselves, choosing the right career path, coping with the pressures of their social roles, satisfying social expectations, and so on. [I expect] proper standards of behavior and possible solutions would be shown. Creating places where young adults can acquire and develop competencies which will boost their confidence (flexibility, assertiveness, auto-motivation, time management, enterprise, obtaining EU funds, taxes, self-employment, etc.).’ All the four categories of promotion addressees which have been singled out and highlighted can be directly related to the respondents, who were students, young people or members of a narrower or broadly defined academic community.

Results

Expectations about introducing a mental health promotion program.
The vast majority of respondents (89%) formulated positive expectations, even if at the same time they made objections to the choice of activities, the target group or the goals to be pursued. At the same time, a small percentage of students (11%) did not hold any expectations of mental health promotion, or even emphasized their disapproval of the very idea of promotion. It should be noted that they naturally assumed that if a person is mentally healthy, he or she does not need such a program at all. Below are a few examples illustrating this sceptical or negative attitude:

I do not need psychological help, so I do not have any expectations [SGSP, 3rd year, M – a man].
I do not know, because actually it is the first time I have come across something like this. I do not feel I have any problems with my mental health, so I have never thought about it. I do not think I need mental health promotion because I look after my health myself [SGGW, 3rd year, M].
I do not think my mental health needs improving [SGSP, 3rd year, M].
Expectations concerning the organization, subject matter and addressees of such a promotion

The students’ positive expectations of a mental health promotion refer to the way a promotion should be carried out and/or the subject matter and anticipated beneficiaries of promotional activities. These issues were not always presented separately – a lot of participants discussed a few questions simultaneously – which we illustrated in Figure 2:

Figure 2. Share of students’ expectations with reference to comments on: the method of organizing a promotion (A: 52%), the subject matter (B: 69%), the group of future beneficiaries (C: 19%).

We selected the following statement as an example in which a number of issues are addressed at the same time: ‘Attaining a sense of mental well-being during my studies (especially psychological studies). Learning through active participation in workshops which should teach how to maintain or improve mental health, for example workshops on coping with stress, on assertiveness, communication, and so on. Gaining not only factual knowledge but also some ‘hands-on’ experience. Receiving help in choosing my educational and professional path.’

52 per cent of respondents expressed expectations concerning the organization of a promotion. The most constructive suggestions related to the type of people who should be in charge of a promotion. Namely, these people should have relevant experience, professional competence and desirable personal qualities. Many expectations referring to the organizational aspect of a promotion were formulated in a way that was not specific to mental health promotion as such. They might as well apply to activities of a different
type, as hardly anyone would dispute that a meeting should be interesting, well-organized and nicely illustrated. Here are some examples of such non-specific expectations:

Instructions, should be provided in an attractive way, for example at workshops. There should be a balance between simplicity and professionalism. Feedback is essential. Additional materials for self-use should be distributed. [APS, 5th year (psych.), W – a woman].

It should be readily accessible and free of charge. It should be able to correctly identify people who require treatment or diagnosis. The waiting time should be short. The program should be widely advertised in the media. It should propagate prophylaxis. [WUM, 3rd year, M].

I would expect the following: a short film, an interesting and energetic presenter, well-chosen information and slogans, possibly a presentation on a given subject. This program should be implemented not only in schools (especially lower secondary schools) but also in the media, for example on radio and television. [SGSP, 3rd year, M].

A programme should consist of a theoretical and practical part (for example a workshop) as well as individual consultation whenever possible [UKSW, 3rd year (psych.), W].

Only some students (19%) directly identified the people at whom a mental health promotion program should be aimed. The expectations formulated by the respondents usually concentrated on a group of students as a program’s addressee (7.7%), or they mentioned both students and university staff as beneficiaries (1%), or young adults who are not students (2.3%). It can be reasonably assumed that students perceive themselves as part of a larger community and therefore do not have to specially ‘dedicate’ a promotion to their group, namely a group of young adults who study at university. Most probably this means that they are acknowledging the fact that, like other people, they need every aspect of mental health promotion.

In this context the most valuable suggestion seems to be a call for the systemic implementation of a promotional program at a university by involving academic staff and other employees as programme beneficiaries. The students who participated in the study did not focus exclusively on themselves, or on a group they could be directly identified with, but they also considered interactions with people who are outside academic circles. The respondents also pointed to the value of working outside the university through social campaigns which raise public awareness about the importance of mental health care. This broad outlook is reflected in the following statement:

It should advise students, and freshmen in particular, on how to cope with stress and overwork. It should help students build up their self-esteem and self-confidence [WUM, 3rd year, W].
It is noteworthy that the question of who should benefit from participating in a program was always discussed in connection with the question of what subjects should be dealt with and what methods should be employed. None of the respondents referred exclusively to program addressees – their statements were more elaborate and thus more useful to people who would like to develop a mental health promotion program by following the guidelines that were obtained. It is also interesting to note what proportion of students chose which specific pro-health activities to be promoted.

**Expectations about methods of somatic, psychological and social health care**

Students’ expectations concerning the subject matter of a promotional program were raised most frequently (69%). Respondents voiced the need to receive guidelines, advice and knowledge as well as to acquire competence in (a) looking after one’s physical well-being (b) looking after one’s mental well-being, with particular emphasis being placed on effective learning strategies and coping with examination stress as issues of the utmost importance (c) developing close relationships and effective cooperation with others as well as receiving care. Figure 3 presents the percentage of the subject matter which the students expected of a mental health promotion with reference to these three types of activities.

Figure 3. Students’ expectations with reference to the subject matter about looking after physical health SOMA (I: 9%), mental health PSYCHE (II: 57%) and social well-being POLIS (III: 14%).
Mental health understood as mental well-being and intellectual ability

Sometimes the students discussed all three categories of the subject matter important to a mental health promotion at the same time; promoting not only mental but also physical and social well-being (2%). The respondents found it the easier to indicate taking care of emotional, cognitive or social health as the primary aim of a promotion. Apparently, this category was an obvious choice, or of the utmost importance. As has already been stressed, evident concentration on two areas of activity or even a single area of activity is not surprising; it is unrealistic to expect a statement that would cover all possibilities.

The majority of positive expectations which focused primarily on the subject matter of a program related to promoting emotional well-being, a good state of mind, creativity, the ability to solve problems and achieve personal goals, and so on (57%). The students mostly raised the question of handling emotions and strongly emphasized a chance to receive guidance on how to cope with stress and stress-related illnesses as well as how to solve problems. The respondents also stressed the importance of being able to study effectively and cope with examination stress. The statements about the need for promoting psychological health are very precise:

I would expect to learn how to fare in everyday life, how to deal with daily stress, how to develop and use my abilities. How can I discover my talents? How can I improve my physical and mental state so as to be efficient, full of energy and feel good all day? Besides, I would like to find out how to get rid of persistent headaches, which I think are related to my poor mental state [APS, 3rd year, W].

It should teach methods of coping with school-related stress or, more precisely, fear of failure. Still more precisely, it is related to the fear that I don’t have enough competence and motivation to master the required material within the appointed time [UW, 1st year, M].

Physical health

Only a small minority of students (9%) explicitly mentioned physical health care. They emphasized looking after their bodies and physical well-being, somatic health, physical fitness, and a healthy lifestyle, as well as following a balanced diet, having a good night’s sleep and taking enough rest. This aspect was not considered a top priority and was mainly brought up together with other dimensions of mental health. Few people (1.1%) raised this aspect without referring to at least one of the remaining two categories of health. The following statements indicate that students attach real importance to taking care of the proper functioning of the human body:

A program should raise young people’s awareness of how important it is to care about one’s health, for example having a regular medical check-up. Therefore, var-
ious health awareness campaigns should be launched, for example mammography. Besides, in order to promote sport, free physical activities could be organized, such as fitness and aerobics classes. Vending machines and canteens should offer discounts on healthy dishes and snacks, which would encourage students to buy more healthy food [APS, 3rd year, W].

Physical health is connected with mental health so it would be worthwhile involving students in sporting activities, maybe by opening new gyms and organizing fitness classes [APS, 3rd year, W].

Social health

As in the case of somatic health, young people did not seem to regard the following as questions of the utmost importance: social well-being, close relationships and effective cooperation with others, taking care of others (14%). When writing about their expectations of a mental health promotion, the respondents did not omit the question of social interaction or the character of communication. However, few people mentioned the aspect of social well-being exclusively without referring to the remaining two categories of health (1.5%). The following expectations clearly indicate the need to build meaningful relationships and to go beyond looking solely after oneself. They recommend caring about others (also in the context of caring about oneself) and combining non-personal and personal perspectives:

I would like to learn how to deal effectively with people in my immediate environment, and how to overcome my shyness. What should I do in the situation when I would like to get involved in some activities but I can’t pluck up enough courage (I am inhibited by the thought: I won’t manage) [APS, 3rd year, W].

I would like to acquire some techniques for establishing friendly relations with people, making a good impression, feeling comfortable when talking with strangers, which is crucially important in medical practice and functioning in medical circles [WUM, 3rd year, W].

There should be classes in creativity, training in effective verbal and non-verbal communication – how to talk and understand each other [AWF, 1st year, W].

Expectations which go beyond mental health promotion.

Some suggestions formulated by the respondents went far beyond the confines of a promotional program and concerned necessary reforms in higher education. They stressed the necessity to change the structure of the university and some established rules and regulations, which could positively influence students’ mental health (7.5%).
Discussion

This study belongs to the type of research which aims at finding out the expectations of students as a group of mental health promotion addressees (Fish and Nies 1996; Dunne and Somerset 2004). The respondents highly valued the very idea of implementing a mental health promotion. They appreciated its content and form.

Our review of the responses points to the need for activities concerning three areas: physical, emotional and social. We can safely propose that students’ expectations of mental health promotion at the most general level are in agreement with the classical biopsychosocial model of mental health (already specified in the WHO documents). It also shows the classic Aristotelian division into soma-psyche-polis. Among the skills mentioned by the students in the study were:

- in the social area: interpersonal skills, solving problems;
- in the emotional area: coping with stress, among others. The students also emphasised their expectations that memorizing strategies and effective methods of learning would be presented;
- in the physical area: among other expectations, the students stressed the need for caring about their physical health.

Developing young people’s skills is crucial to realizing their developmental tasks. An analysis of eighty three interventions made in the United States and directed to student groups indicated that the most effective programs are those designed to teach skills (Cleary et al. 2008; Conley et al. 2013). Also, Burris et al. (2009) emphasize developing students’ individual traits and skills as part of mental health promotion. Here we would like to point to a question which will be elaborated on in another article, namely the need to determine what it means when respondents raise the problem of gaining certain competencies. The fact that such expectations are formulated might reflect a real lack of a competence/ the need to learn it, or something that has not been discussed in this article, namely it might signify inner doubt as to the value of the competences already achieved/the need to recover a sense of competence.

Apart from the subject matter, the participants also stressed how important it is to choose the right form in which a mental health promotion is to be realized. Young people expect interesting and engaging activities, illustrated with examples, which offer opportunities for discussion and getting feedback. This is important information for those who draw up mental health promotion programs: they should be implemented in accordance with young people’s expectations and possibilities (Greacen et al. 2012; Morris, 2011; Sokołowska, 2010).

The participants also voiced the need to address promotional activities to university staff and to organize awareness campaigns outside the university. This need is in agree-
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ment with the concept of the overall environmental impact on an individual’s mental health, as presented by Lehtinen (2008). The author postulates that mental health determinants include not only factors and experiences of an individual nature, but also cultural factors as well as social interactions, structures and resources. Cultural factors embrace social values, the rules of social life, a social definition of health, illness and diversity as well as the tolerance level for diversity and contrast which is acceptable in a given culture. Social interactions understood as mental health determinants are relationships built up within one’s immediate sphere: personal, family and professional, in the school or academic environment and the local community an individual belongs to. The final group of mental health determinants, namely social resources, is understood as social policy or a structure connected with the areas of education, work and level of economic functioning. According to the author, the ability to make use of individual and institutional support provides a basis for building mental health.

The impact of mental health promotion programs realized in other European countries indicates the importance of mental health psycho education, including physical health promotion (see Health Promoting Universities, after Tsouros et al. 1998). Similar areas were pointed highlighted by the Polish students who participated in our study. The programs which have been launched and applied to students in Poland so far seem to respond to only some aspects of students’ needs as described in the article. Existing mental health programs are usually directed to students who are already suffering from mental disorders or are at risk of mental illness. Their goal is, among others, to help young people experiencing a mental crisis to continue studies, develop and gain experience (cf. ‘The Constellation of Lion’ and its modified version, ‘Leo’, implemented by the Bureau for People with Disabilities after: Czarnecka, 2011, Uniwersytet Jagielloński, 2014). This corresponds to important topics reported by the respondents such as developing the ability to cope with daily stress, effective interpersonal communication and problem-solving skills. Actually, these are abilities that are useful to everyone at any time, not only to those who are experiencing a mental crisis. An interesting example of a mental health promotion program responding to the needs of the students who were surveyed is the campaign ‘What drives us up the wall? Students, take care of your mental health!’ (Uniwersytet Śląski, 2014). The campaign involves film shows, psychology workshops, psychological counseling and art workshops which all aim at promoting mental health. To make the campaign more effective, an educational platform has been launched where students can find a lot of materials and articles on mental health as well as current information about free psychology workshops for students. Also, the need for attractive and diverse forms of activities was identified by the respondents as being important.

The mental health promotion program which takes account of the needs mentioned by the respondents to the greatest extent is the programme „PsychoŻak”, implemented
“Psychożak” is realized in the form of workshops, in different forms, during which students can gain new information and practice new skills. The topics discussed at ten 3-hour meetings refer to social, emotional and physical areas. These topics are in order: (1) Mental health – what is it? what determines it? (2) How to speak, listen, talk and build closeness with others? (3) How to study to learn things? (4) In a healthy body there lives a healthy mind... (5) What are mental disorders? Where to find help? (6) Feelings and me. How to relax and rest? (7) Stress and me. (8) How to deal with stress? How to deal with difficult situations? (9) I take care of my mental health. My strengths and weaknesses; (10) A summary of mental health promotional activities. What’s next after the workshop? Program evaluation (see: Description of a mental health promotion program, Sokołowska et al., 2015 p. 6).

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References


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