

Strategies used by Students to Cope with Mental Health Issues in Secondary Schools in Kisii County, Kenya.

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ABSTRACT

Mental health issues are becoming increasingly common among students worldwide, Kenya has not been spared. Studies have shown that approximately 20% of school students are now affected by diagnosable mental illnesses, with half of all mental issues developing by 14 years. It is further indicated that mental health problems are the leading cause of behavioral adjustment difficulties among adolescents in schools. A survey carried out in Kisii County in the year 2017, and published in the East African Medical Journal showed that 23% of the students had symptoms of depression. Despite this not much had been done to establish the coping strategies students use to manage their mental health issues. The objective of this study therefore was to establish the strategies used by students to cope with mental health issues in secondary schools in Kisii County, Kenya. The study was based on Social Control Theory by Ivan Nye (1958), which emphasizes the importance of the learning environment. When the learning environment is not conducive it will trigger mental health issues. Descriptive survey research design was used. The target population was 30,955 form two students. Yamane's formula was employed to determine the sample size of 395 students. A questionnaire was used to collect data. A pilot study was carried out among 40 students using test-retest method of reliability. Reliability coefficient index of the instruments was determined at .78. Face and content validity of the instruments were ascertained by experts. Quantitative data was analyzed using descriptive statistics in form of frequencies and percentages. Findings indicated that the key strategy students use to address their mental health issues is reaching out to parents (89.1%), followed by seeing teachers for advice/help (86.8%), and distancing oneself from friends as well as reading the word of God/praying (77.2%), avoiding assignments that are difficult (67.3%). The least strategy used by students was seeing the school counsellor (19.2%). It was concluded that students mostly prefer seeing parents. The study therefore recommends that schools should engage parents when dealing with students' mental health issues. The study further recommends that there is need for the schools and the ministry to establish why students avoid seeing school counselors for their mental health issues yet they are the professionals trained in handling students' issues. This finding is useful to the school managers and the Ministry of Education in shedding light on the importance of engaging parents in handling students' mental health issues.

Key Words: Coping strategies, Depression, Mental Health.

INTRODUCTION

Mental health issues are a growing concern among high school students. As mental health gains global priority to health and development agenda, efforts have intensified to focus on the mental health of adolescents. This is imperative as adolescence is characterized by extensive physical and social development whereby capabilities essential for successful progression into adulthood are established (Dray, Bowman, Campbell, Freund, Hodder, Wolfendon, 2017). According to the National Alliance on Mental Illness (NAMI), one in five young people aged 13-18 have a serious mental illness (NAMI, 2021). Social pressures, academic stress, and hormonal changes can aggravate mental health issues among students such

as anxiety and depression as stated by Eisenberg et al., (2009). Studies globally have shown that 10-20% of school going adolescents experience mental health challenges with a high prevalence of depression among students in high schools which presents a high- risk of mental disorders (Wesselhoeft, Serensen, Heilervang, & Bilenberg, 2013; Schofield, et al., 2016).

Depression is a serious mental health issue among adolescents which often affect family relationships, social functioning, behavior and academic performance (Kovacs, Obrosky & George, 2016). It has been associated with risk of mood disorder, poor dietary habits, violent behavior, drugs and substance abuse, alcohol consumption, unprotected sex, and suicidal ideation among students (Adlina, Suthahar & Ramli, 2007). A study done by Modabber & shodjai (2007) that involved 4,020 students conducted in Rasht-Northern Iran to determine the prevalence of depression among high school students, revealed that depressive symptoms among students was high. The findings indicated that 34% of the participants suffered from depression. This was mainly attributed to several stressors found in the school environment. This therefore necessitates the need for students to find ways, means and strategies of coping and managing such situations so as to thrive within the school environment.

Coping strategies are the cognitive, psychological and behavioral efforts of managing or lessening stressful events and external sources. They refer to the specific efforts, both behavioral and psychological, that people employ to master, tolerate, reduce, or minimize stressful events (Taylor, 1998). Research indicates that some coping strategies help to reduce stress and promote positive psychological behavior, whereas others exacerbate stress and promote a negative psychological impact (Parker, 1999). Coping strategies for tackling mental health difficulties is of great importance (Steiner-Hofbauer, & Holzinger, 2020) because the students' ability to meet the school requirements and to handle challenging situations can affect their academic achievement as well as their health (Schiller, Stansfield, Belmonte, Purkiss, Reddy, House, & Santen, 2018). Folkman (2013), defines coping as 'the constant cognitive change and behavioral adaptation when handling specific external and internal demands that are evaluated as something that exceeds the person's resources.

Various studies have recommended different instruments for coping, for example, the COPE, (*Coping Orientation for Problem Experiences*) Styles of coping and Ways of Coping Scales that have been used to assess coping strategies. These instruments have been found to be appropriate measures of coping strategies (Taylor, 1998), and also provided quantitative data to work on. However, such instruments can be limiting in that not all individuals' perspective on the issues are captured. Depending on the types of strategies used, coping is a vital factor of psychological well-being of individuals (Jahan et al., 2016; Somaiya, et al., 2015).

In a study carried out on coping strategies for mental health difficulties among college students in 14 countries (5 in the United States; 4 in India; 2 in the United Kingdom; 1 in Pakistan; 1 in Germany and 1 each in Hong Kong, Nepal, Austria, Iran, Romania, Malaysia, Turkey, Iraq and Saudi Arabia), it was established that support seeking (60%), active coping (40%), acceptance (40%), avoidance/denial (40%), substance abuse (35%), faith/religion (25%), and sports (25%) were the most common mechanism students used to cope with mental health challenges (Sattar, Yusoff, Arifin, Yasin, & Nor, 2022).

In another study conducted by Wang in China, on mental health of high school students and their coping strategies, it was revealed that high school students employed various methods of coping with mental health difficulties such as appealing for help, avoiding the issues, fantasy, rationalization, retreat, self-blame and practicing endurance. The findings of the study which engaged 320 students, showed that senior high school students tend to adopt positive and mature coping styles such as problem solving or asking for help while middle school students chose negative and immature coping styles such as retreat and self-blame (Wang, 2013). A mixed- method study done in Ghana by Dufie (2021) on school-going adolescents' mental difficulties and coping mechanisms showed that over half (58.5%) of the students experienced mental health difficulties. This was attributed to financial challenges, academic stress, peer victimization, intimate

relationships as well as spiritual challenges. The findings of the study targeting a population of 405 students indicated that isolation, spiritual/religious assistance, and substance abuse were among the strategies students employed so as to cope with their mental health issues.

Studies have been conducted on strategies used to overcome stress in schools. Ogalo, Odera & Ogogo in their study (2020), found out that principals in secondary schools were able to cope with stress by socializing with their staff and family members, delegating duties, having a positive attitude towards themselves and others, managing time and seeking support from other stakeholders (Ogalo, Odera & Ogogo, 2020). Further, findings from a study by Kalungwa (2014) on management related occupational stress and coping strategies among secondary school principals in Mwingi West district, Kitui County, showed that principals coped with stress by practicing good time management, attending social gatherings, taking time to rest, doing light duties and taking time to read the bible and pray. In another study conducted by Kabiru, Orango, & Wanjiru (2016), on coping strategies for mental health, findings showed that social support was a significant factor in managing stress and depression among university students. According to Giamus, Suleiman, Stuart & Chen (2017), students adopt various mechanisms and strategies to deal with mental health issues which vary from religious support, planning, positive reinterpretation, breathing exercises, regular visits to the school counselor, talking to someone, and social networking.

In Kenya, the prevalence of the different mental health problems of children and adolescents in schools has been shown to vary between 10% and 50.5% (Magai, Malik, & Koot, 2018). According to the Government of Kenya [GoK] (2013), youths attending general health facilities and those in secondary schools have a high prevalence rate of depressive disorder. Children and adolescents spend considerable amount of time in school where mental health problems can interfere with learning and result in low academic achievement (Rothi & Leavey, 2006). While teachers strive to meet the academic needs of their students, they may not be trained to understand the impediments to learning caused by student mental health problems. Thus, the students resort to other means of coping with mental health difficulties, such as withdrawal and isolation, alcohol and substance use and abuse, riots which culminates to unrest, while others may take extreme measures like suicide (Magai et al., 2018). Further studies conducted among students in Kenyan schools, have shown a high prevalence of mental health issues with depression, anxiety, and stress being the most commonly reported issues (Mutiso et al., 2018; Ayalon et al., 2020; Munguti et al., 2021). These problems can negatively influence students' academic performance, social relationships, and overall well-being.

A study carried out on the coping strategies and mental health issues among secondary school students in Kenya by Othieno, Othieno, & Njenga (2018), found out that many students used adaptive coping strategies such as seeking social support, engaging in physical activities, and practicing relaxation techniques, while others used maladaptive coping strategies such as substance abuse and withdrawal. The study identified both effective and ineffective strategies. This was further supported by Mwenda (2019), who established that seeking support from family and friends, engaging in physical activities, and practicing relaxation techniques were some of the strategies students used to cope with academic stress which was a significant predictor to mental health issues.

In the mentioned studies, no study has looked at the strategies students use to cope with their mental health issues in Kisii County, yet a survey carried out in 2017 by Ontiri, Nyangena, & Gachohi which was published in the East African Medical Journal showed that 23% of the students in Kisii County, had symptoms of depression. Findings from the study conducted by Mokaya, Kaaria & Kivanguli (2017), indicated that most of the students in Kisii County schools experienced mood disturbance, borderline clinical depression and moderate depression that required professional intervention. The study will enrich the existing body of research by providing helpful information on the strategies students use to cope with mental health issues in secondary schools. It is on this ground that the current study therefore resorted to establish coping strategies students use to manage mental health issues in secondary schools in Kisii

County, Kenya. The specific objective of the study was:

To establish the strategies students, use to cope with mental health issues in school.

The research question was as follows:

What are the strategies students use to cope with mental health issues in school?

Limitations

1. The study will cover secondary schools in Kisii county, therefore the study's findings may not be generalized to other counties in Kenya.
2. Some of the respondents may be reluctant to give information as required due to the sensitivity of the issue and thus may affect the results.

RESEARCH METHODOLOGY

The study was anchored on the Social Control theory by Ivan Nye (1958) which puts emphasis on the importance of the learning environment. The theory explains that when the learning environment is not conducive, mental health issues will be triggered. Descriptive survey research design was adopted. Mugenda (2008) asserts that descriptive survey allows for facts to be gathered as they exist without being manipulated. This formed the basis for choosing the design.

Population of the study included 30,955 form two students from public secondary schools in Kisii County, Kenya. Form two students were targeted because they are adolescents who experience significant changes in their emotional, cognitive and physical development. These changes can trigger mental health issues such as depression and anxiety. By studying coping strategies used by form two students to manage mental health issues, one can gain understanding of the challenges they face and thus help develop targeted interventions. Stratified random sampling technique was used. According to Sekeran (2009) stratified random sampling technique involves a process of stratification followed by random selection of subjects from each stratum. In the study, schools were stratified into purely boys boarding schools, girls boarding schools and mixed boarding and mixed day schools. From the 350 secondary schools, 105 schools representing 30% schools in Kisii County were proportionately selected for the study as follows: 24 boys boarding schools, 24 girls boarding schools, 23 mixed boarding and 34 mixed day schools thus having a ratio of 24:24:23:34. Yamane's formula was used to sample 395 form two students.

Data was collected using a questionnaire. Piloting of the instruments was carried out among 40 students using test-retest method of reliability and its reliability coefficient index was determined at .78. Face and content validity of the data collection instruments were ascertained by experts. Quantitative data was analyzed using descriptive statistics in the form of frequencies and percentages.

RESULTS AND DISCUSSION

The researchers set out to establish strategies used by students to cope with mental health issues in secondary schools in Kisii County, Kenya. To achieve this, a questionnaire in the form of Likert four point scale was used where the respondents were required to indicate their responses based on their level of agreement or disagreement as follows: strongly agree (4), agree (3), disagree (2) strongly disagree (1) on the coping strategies that were provided. Response of the students were analyzed using descriptive statistics in the form of frequency counts and percentages. Results are presented on table 1

Table 1: Strategies used by students to cope with mental health issues

Statements	N	Agree		Disagree	
		f	%	f	%
Seeing the school counselor	395	76	19.2	319	80.8
Reading books more and more	395	176	44.6	219	55.4
Seeing my teachers for advice/help	395	343	86.8	52	13.2
Taking enough rest	395	176	44.6	219	54.4
Eating well	395	129	32.7	266	67.3
Reaching out to my classmates and talking out my issues	395	90	22.8	305	77.2
Distancing myself from friends	395	305	77.2	90	22.8
Reaching out to my parents	395	352	89.1	43	10.9
Exercising regularly	395	129	32.7	266	67.3
Planning my work well	395	219	55.4	176	44.6
Praying	395	305	77.2	90	22.8
Resorting to taking drugs to make me forget those issues	395	90	22.8	305	77.2
Seeing the school nurse	395	265	67.1	130	32.9
Avoiding assignments that are difficult	395	266	67.3	129	32.7
Reading the word of God	395	305	77.2	90	22.8

The findings in Table 1 show that 352 (89.1%) of the students indicated that they reach out to their parents when they have mental health issues, 343 (86.8%) of the students indicated that they seek advice/help from their teachers and 305 (77.2%) of the students resorted to reading the word of God/ praying. The least strategy used by students to cope with mental health issues was seeing the school counselor 76 (19.2%).

The current study indicate that praying and reading the word of God (both sharing 77.2%) are among the key strategies used by students in coping with their mental health issues. This is in agreement with Kalungwas` study in 2014, which also established that praying and reading the word of God were the key strategies in managing occupational stress. The current study further concurs with Sattar, Yusoff, Arifin, Yasin, & Nor (2022) who found out that 25% of the students resorted to religion/faith as a mechanism in coping with mental health issues.

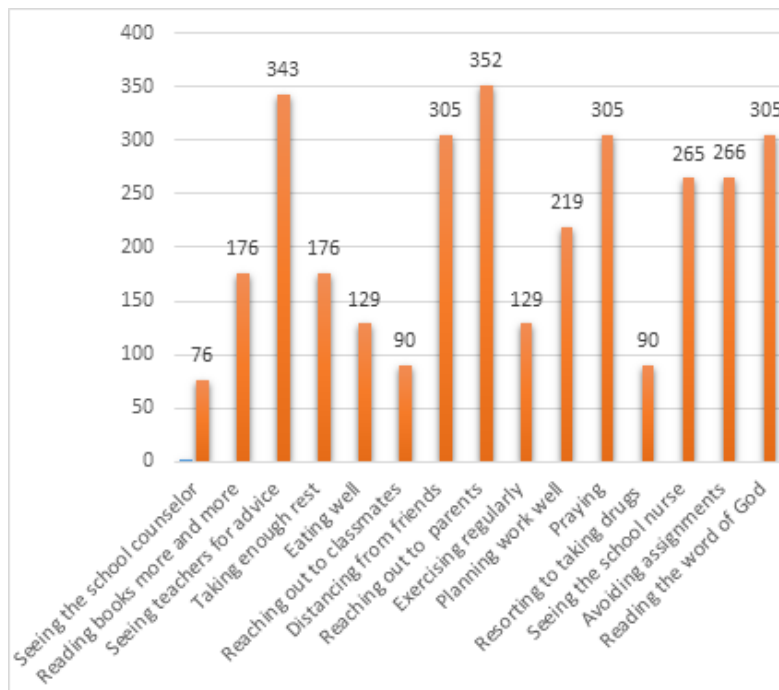
Results from the current study also indicate that 32.7% of the students exercised regularly to help them manage their mental health issues. This is in agreement with Othieno et.al., (2018) who indicated that physical activities helped the students cope with their mental health issues. Further, Othieno et.al., (2018), indicated that some students used maladaptive coping strategies such as substance abuse and withdrawal. This is also in agreement with the current study`s finding that 22.8% of the students resorted to taking drugs to help forget their mental issues.

Further, whereas Kalungwa in his study on the management of occupational stress revealed that talking to someone, seeing a counselor and taking time for lesisure and rest are key strategies in managing stress related issues (Kalungwa, 2014). Giamus, Suleiman, Stuart & Chen (2017), in their study, also indicated that students visited the school counselor regularly whenever they had mental health issues. However, in the current study, it is clear that, seeing a school counselor (19.2%), taking enough rest (44.6%) and

reaching out to classmates to talk about mental health issues (22.8%) are not key strategies that students use in the management of their mental health issues.

Results for the current study are further presented in figure 1 for more clarity.

Figure 1: Strategies students use to cope with mental health issues



CONCLUSION AND RECOMMENDATION

From the study's findings, it can be concluded that students prefer reaching out to their parents when experiencing mental health issues. Further, it is concluded that the school counselors are the least to be seen by students on mental health issues.

The study therefore recommends that schools and the Ministry of Education should involve parents more when handling students' mental health issues. It is further recommended that a study be conducted to establish why school counselors are least preferred by students in addressing their mental health issues, yet they are the right professionals in addressing students' mental health issues.

Further the study recommends that students should be taught on the need to consult the school counselors whenever they have challenges.

REFERENCES

1. Adlina, S., Suthahar, A., Ramli, M., Edariah A. B., Soe, S. A., Mohd Ariff, F., Narimah, A. H., Nuraliza, A. S., Karuthan, C. (2007). Pilot study on depression among secondary school students in Selangor. *Med J Malaysia*, 62 (3) :218-22. PMID: 18246911.
2. Ayalon, L., Levkovich, I., & Shira, A. (2020). Coping strategies and perceptions of control as moderators of the association between COVID-19-related stress and mental health outcomes among American and Israeli older adults. *Aging & Mental Health*, 1-8. doi:10.1080/13607863.2020.1815526
3. Babiss, L. A., & Gangwisch, J. E. (2009). Sports participation as a protective factor against depression and suicidal ideation in adolescents as mediated by self-esteem and social support. *J Dev Behav Pediatr*, 30(5), 376-384.

4. Eisenberg, D., Golberstein, E., & Hunt, J. B. (2009). Mental health and academic success in college. *The B.E. Journal of Economic Analysis & Policy*, 9(1).
5. Dufie, M. A. (2021). School-going adolescents' mental difficulties and coping mechanisms: A mixed-method study in Ghana. *Children and Youth Services Review*, 120, 105828.
6. Giamus, G., Suleiman, K. H., Stuart, J., & Chen, F. (2017). Coping mechanisms and strategies among college students with mental health issues. *Journal of College Counseling*, 20(3), 201-215. doi: 10.1002/jocc.12052
7. Government of Kenya. (2013). *Mental Health Policy 2013-2020*. Nairobi: Ministry of Health.
8. Jahan, F., Siddiqui, S., Mitwally, A., Al Zubidi, N., & Al Zubidi, M. (2016). Prevalence and risk factors of depression among female medical students in Jeddah, Saudi Arabia. *Journal of Pakistan Medical Association*, 66(11), 1455-1459.
9. Kabiru, C. W., Orango, V. O., & Wanjiru, P. W. (2016). Coping strategies for mental health among university students in Kenya. *International Journal of Education and Research*, 4(1), 57-66.
10. Kovacs M., Obrosky S., George, C. (2016). The course of major depressive disorder from childhood to young adulthood: Recovery and recurrence in a longitudinal observational study, *Journal of Affective Disorders*, 203, pp. 374-381.
11. Magai, C., Malik, W., & Koot, H. M. (2018). Emotional functioning and its implications for daily life in adolescents. *Child Development Perspectives*, 12(2), 102-107.
12. Modabber, N., & Shodjai, R. (2007). Prevalence of depression in high school students in Rasht-Iran and its relationship with demographic characteristics. *Journal of Guilan University of Medical Sciences*, 16(63), 105-114.
13. Mugenda, O. M. (2008). *Social science research: Theory and principles*. Applied Research and Training Services.
14. Mutiso, V. N., Musyimi, C. W., Tomita, A., Loeffen, L. A., Burns, J. K., & Ndeti, D. M. (2018). Prevalence of depression and anxiety among secondary school students in Nairobi County, Kenya. *Depress Res Treat*, 2018, 2946829.
15. Munguti, J. K., Nkulu, F. K., & Otiende, P. (2021). Exploring the Mental Health Status and Coping Strategies of Secondary School Students in a Rural Area of Kenya. *Journal of Adolescent Health*, 68(2), 248-254.
16. Strategies students use to cope with mental health issues National Alliance on Mental Illness, (NAMI). (2021). Mental health conditions in children and teens. Retrieved from <https://www.nami.org/Get-Involved/Raise-Awareness/Awareness-Events/Children-s-Mental-Health-Awareness-Day>
17. Nye, F. I. (1958). *Family relationships and delinquent behavior*. John Wiley & Sons.
18. Ogalo, J., Odera, D., & Ogogo, T. (2020). Strategies used by secondary school principals to overcome stress. *Journal of Education and Practice*, 11(5), 12-19.
19. Othieno, C. J., Othieno, D. R., & Njenga, F. K. (2018). Coping strategies and mental health among secondary school students in Kenya. *East African Medical Journal*, 95(1), 47-56.
20. Parker, G. B. (1999). *Coping: How to survive life's stressors*. Sydney, Australia: ABC Books.
21. Rotenstein, L. S., Ramos, M. A., Torre, M., Segal, J. B., Peluso, M. J., Guille, C., & Sen, S. (2016). Prevalence of depression, depressive symptoms, and suicidal ideation among medical students: a systematic review and meta-analysis. *Jama*, 316(21), 2214-2236.
22. Rothi, D., & Leavey, G. (2006). Mental health help-seeking patterns in young adults: An overview. *British Journal of General Practice*, 56(533), 95-100.
23. Sattar, K., Yusoff, M. S. B., Arifin, W. N., Yasin, M. A. M., & Nor, M. Z. M. (2022). Effective coping strategies utilised by medical students for mental health disorders during undergraduate medical education-a scoping review. *BMC medical education*, 22(1), 1-13.
24. Sekeran, U. (2009). *Research methods for business: A skill-building approach*. John Wiley & Sons.
25. Schiller, J. H., Stansfield, R. B., Belmonte, D. C., Purkiss, J. A., Reddy, R. M., House, J. B., & Santen, S. A. (2018). Medical students' use of different coping strategies and relationship with academic performance in preclinical and clinical years. *Teaching and learning in medicine*, 30(1), 15-

- 21.
26. Schofield, K., Undieh, A., & Zulu, E. (2016). Mental health service utilization and pathways to care among adolescents with depression in a Nigerian tertiary health institution. *Child and Adolescent Psychiatry and Mental Health*, 10(1), 44. <https://doi.org/10.1186/s13034-016-0130-6>
27. Steiner-Hofbauer, V., & Holzinger, A. (2020). How to cope with the challenges of medical education? Stress, depression, and coping in undergraduate medical students. *Academic psychiatry*, 44(4), 380-387.
28. Somaiya, M. Swapnil Kolpakwar, S. Faye, A. & Kamath, R. (2015). Study of Mechanisms of Coping, Resilience and Quality of Life in Medical Undergraduate *Indian Journal of Social Psychiatry*, 31, 19-28. Retrieved from <http://www.indjsp.org>
29. Taylor, S (1998). Coping Strategies. Retrieved from <https://macses.ucsf.edu/research/psychosocial/coping.php>
30. Thapar A, Collishaw S, Pine DS, Thapar AK. Depression in adolescence. (2012). *Lancet*. Mar 17;379(9820):1056-67. doi: 10.1016/S0140-6736(11)60871-4. Epub 2012 Feb 2. PMID: 22305766; PMCID: PMC3488279.
31. Wang, X. (2013). Mental health problems and coping strategies of Chinese high school students. *Health*, 5(7A2), 30-37. doi:10.4236/health.2013.57A2005
32. Wesselhoeft, R., Sørensen, M. J., Heiervang, E. R., & Bilenberg, N. (2013). Subthreshold depression in children and adolescents—A systematic review. *Journal of affective disorders*, 151(1), 7-22.
33. World Health Organization, (2013). Mental health policy development and implementation in South Africa: A situation analysis. Geneva. Available from: <http://r4d.dfid.gov.uk/Output/177419/>