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Mental health first aid embedment within undergraduate psychology curriculums: an opportunity of applied experience for psychology students and for enhancing mental health care in higher education institutions

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The Mental Health First Aid (MHFA) course was developed almost fifteen years ago to train community members in supporting people with mental health difficulties (Kitchener & Jorm, 2002). In this opinion manuscript, we propose the embedment of MHFA training into the undergraduate Psychology curriculum as a method of enhancing benefits for both students who receive the training, as well as students who are receiving support while at university from students who have been trained in MHFA. You may ask at this point, why should psychology students be involved in the training that was designed for members of the public? In this short communication, we will aim to explore the benefits of training psychology students in MHFA not only for themselves, but also for Higher Education institutions. First, however, we will explore the effectiveness of MHFA in prior research.

The MHFA course is an adaptation of the standard physical first aid training – which is in place for physiological health emergencies – and proposes a first point of contact to help people with a mental health problem or crisis. The guidance and signposting that can be provided through MHFA is very easily summarized through an *action plan* that is descriptive of the programme (known as 'ALGEE'): Approach the person, assess and assist with any crisis; Listen and communicate non-judgmentally; Give support and information; Encourage the person to get appropriate professional help; Encourage other supports (see Kitchener & Jorm, 2008).

The MHFA course comprises evidence-based content, and shares expert consensus on new and applicable material that can be used to enhance and support MHFA in various settings (Armstong et al., 2017; Kitchener & Jorm, 2008; Langlands, Jorm, Kelly, & Kitchener, 2008). A meta-analysis showed that MHFA training enhanced mental health knowledge and helping behaviours, while decreasing stigma around mental health (Hadlaczky, Hökby, Mkrtchian, Carli, & Wasserman, 2014). More recently, a systematic review and meta-analysis revealed small to moderate effects after the training on recognizing, helping, and providing first aid for mental health difficulties

(Morgan, Ross, & Reavley, 2018). Therefore, MHFA training is a course that enhances mental health awareness, supports people with a mental health crisis at the first instance, and provides a mechanism for signposting individuals who are suffering towards the right direction to seek further support.

The MHFA course is consistent with the core content and knowledge of undergraduate curriculums, including interventions, therapies and mental health disorders. Typically, undergraduate psychology students must demonstrate competency in several core domains such as biological, cognitive, developmental and social psychology, individual differences, research methods, conceptual/historical issues and an empirical project to be eligible for graduate chartered membership of the British Psychological Society. After the satisfactory completion of those core areas they are able to progress onto more applied and practice-based and/or clinical postgraduate programmes that entail one-to-one counselling, support and advice. Instead of awaiting graduate studies, embedment of MHFA training within undergraduate curriculums may form a prototype of applied psychological practice, and the opportunity for personal development of the student at an undergraduate level.

Training psychology undergraduates in MHFA could provide them with applied experiences of mental health support and guidance, especially if there are opportunities to support other students within the institution or volunteer internships to support the local community and businesses; all of which are elements not necessarily taught in undergraduate psychology programmes. There are no specific requirements for undergraduate psychology students to practice any of the elements that they have been taught. While undergraduate students are not in a position to conduct any therapy, or suggest any interventions with authority on any psychological matters during their studies, they are certainly able to assist others who are struggling with their mental health and wellbeing. However, this has not been the case in UK higher education institutions and psychology curriculums, despite the notion that they may make ideal candidates in helping others with mental health difficulties with the enhanced theoretical knowledge-base that psychology students acquire during their studies.

Assisting people in a therapeutic context entails more practice and expertise than currently being delivered in undergraduate Psychology programmes, but practicing in controlled setting MHFA may be a first step of enabling theory to become practice. With MHFA, psychology students can start from undergraduate programmes in practicing basic counselling skills (such as appropriate body posture, eye-contact, etc.), active listening, displaying empathy and compassion, and provide basic support and signposting. It would be advantageous to use MHFA training as a first step to enable undergraduate psychology students to practice elements with which they are already familiar in an applied- and practice-based context to support others. Overall, there is a case for enhancing the knowledge and experience of psychology students, with a method that may be suitable for the university to monitor and enhance learning (for psychology students) and mental health (for the recipients).

Furthermore, providing training and placements for student through MHFA is one approach that can be used to tackle the rise in mental health difficulties among students (Bewick, Gill, Mulhern, Barkham, & Hill, 2008; Eisenberg, Hunt, Speer, & Zivin, 2011) and support the need for further and enhanced signposting to counselling services in Higher Education institutions. The lack of well-staffed counselling services in the

United Kingdom (Storrie, Ahern, & Tuckett, 2010) and across the globe (Rückert, 2015) has become problematic in resolving the mental health crisis, reducing opportunities for timely and effective signposting. By informing, supporting and raising awareness of mental health through MHFA training, higher education institutions may become places where mental health can be talked about more openly, without fear of stigmatisation. In an environment that is open and accepting of mental health and mental illness, students may feel rapport and ease in communicating difficulties with students who have been trained in MHFA, as there is a common student experience. This in turn leads to being able to readily understand and empathise with the student experience in a peer-to-peer setting, and provide appropriate, sensitive and timely signposting to selfcare material and/or professional care services through face-to-face and/or through social media, or a nightline. In recent literature, Mantzios (2019) proposed that there is an opportunity to influence public health through MHFA training in universities, while other proposals suggested that all health professionals should benefit through their undergraduate educational programmes from knowing what to do and where to refer patients with mental health difficulties (Mantzios, Cook, & Egan, 2019).

Central regulating bodies could stipulate that all Universities across the United Kingdom (or even internationally) should adopt a model of embedding MHFA training into their Psychology curriculums. This may lead to a national and international impact upon perceptions and signposting around mental health in HE institutions, and psychology students are well-placed to fill this need of accessing mental health resources for prevention and treatment. In essence, the impact on perceptions of mental health through appropriate policies and interventions in Higher Education may create healthier students and healthier graduates, as well as impact local communities and public health if adopted by all institutions.

Disclosure statement

No potential conflict of interest was reported by the authors.

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