

Scaling the Mental Health Literacy Amongst Undergraduate Students: A Road Towards Sustainable Development

By Sonali Sharma¹, Upma Gautam², Deeksha Bajpai Tewari³

Abstract

Thesis Statement: In spite of being globally prevalent, mental illness faces apathy from the community as well as policymakers and is a point of grave social concern. Health—including mental health—and education are an imperative precondition of achieving the Sustainable Development Goals (SDGs). Education plays a crucial role in inculcating a positive attitude towards mental illness hence high mental health literacy would benefit the society at large. The present research aims to decipher the knowledge and attitude of undergraduate college students towards mental illness. **Method:** Students of medicine, law and engineering from different colleges in Delhi, India were cross-sectionally surveyed to fathom their attitudinal differences towards mental illness using the CAMI Scale. **Results:** An affirmative response was observed on Benevolence as well as Community Mental Health Ideology Sub-Scales and a dissenting opinion was identified on the Authoritarian and Social Restrictive Sub-Scales, howbeit significant differences were discerned on the basis of faculty of education. **Conclusions and Implications:** Results suggested that to accomplish the aspirations of the SDGs there is an ardent need to improve mental health literacy of students. The course curriculum of students needs to be revisited to integrate informative sessions on mental illness.

Keywords: Sustainable Development, Education, Mental Health Literacy, CAMI Scale, Undergraduate Students

1. Introduction

The primary goal of a civilized society is to improve the standard of living through development. The quality of life enjoyed by the society in the present times is far better than what our ancestors had howbeit, one mustn't overlook its uneven nature. Over the period of time it is dawning upon nations that such an uneven course is not sustainable hence, with the aim of ensuring more equitable development our leaders have pledged to achieve seventeen Sustainable Development Goals (SDGs) by 2030. Within this universal framework, Good Health and Well-Being (SDG-3) and Quality Education (SDG-4) are two of the most important SDGs where maximum synergy is possible with potentially no trade-offs.

Epistemology of health is no longer limited to physical health alone but includes mental health as well. Mental health doesn't mean a mere absence of mental disorders rather it has become an important component of the overall well being of a person so that he can work productively, realise his abilities and cope with the stresses of his daily life (World Health Organisation, 2018). It is estimated that about ten percent of the human

¹Research Scholar, University School of Law and Legal Studies, Guru Gobind Singh Indraprastha University, Delhi, India

²Assistant Professor, University School of Law and Legal Studies, Guru Gobind Singh Indraprastha University, Delhi, India. *Corresponding Author

³Assistant Professor, Dyal Singh College, University of Delhi, India

population is suffering from mental disorders. Poor mental health is the major factor behind thirty percent of the non-fatal and ten percent of the overall disease burden (The World Bank, 2020). The harsh reality of the present times is that while health literacy has garnered an immense amount of research (Wickstead & Furnham, 2017) however the same can't be said for mental health literacy. Mental Health Literacy encompasses not only taking treatment but also requisite knowledge about specific disorders (Jorm et al. 1997). It lays the foundation for greater awareness about mental and emotional health and results in better evaluation as well as communication. It is therefore imperative that we strive towards increasing the mental health literacy to ensure a society which is more sensitive towards the mentally ill.

It is trite to state that students of today create tomorrow's future. To prognosticate the mental health literacy of the society that is being shaped, it is therefore important to understand the mental health literacy of students of today. While students' attitudinal biases towards mental health start taking shape in their homes at a very nascent age—while observing the behavior of the adults around them—it is at college level when they are thrown into the whirlpool of emotions and these attitudinal biases are fortified. After completing their basic education at school level the students enters into different professions which can shape their perspective towards mental illness in a different manner. Mental health literacy of college students is a key indicator of a society which is compassionate towards the need of mentally ill hence, the present study is undertaken to understand their attitude and thereby mental health literacy of college students.

2. Area under Study

Mental well-being affects our ability as humans to emote, earn a living, interact, think and enjoy our day-to-day activities. It is a cause of concern worldwide and India is not far behind. A report by the World Health Organisation has revealed that roughly 7.5% of the population of India is undergoing some kind of mental illness; sadly there are only four thousand health care professionals to cater their needs (Birla, N., 2019). Whilst every subsection of society has its own perceptions of mental illness, but it is important to gauge the attitude of young people who being future adults would shape our modern world. The present study is therefore focused on gauging the mental health literacy of college students from three different courses—Medicine, Law and Engineering—in Delhi, India to fill the loopholes in our educational system based upon evidence.

While student of each of these streams may have a run in with a mentally ill person at a personal level being a friend, relative etc., the scope of the present study is limited to determine whether their curriculum has an impact in contouring their attitude towards mental health. The students of medicine, law and engineering play a very important part in designing a system which is sensitive towards the need of the individuals who are mentally ill. Where a student of medicine is the future caregiver to mentally ill patients, a law student may be a future Judge tasked to determine the guilt of an insane offender or a lawyer defending him. Similarly an engineering student may be a future builder, planning a township where necessary aids must be provided to mentally ill. Hence, as leaders of tomorrow, it is pertinent to understand their respective biases towards mental

illness, if any.

3. Methodology

The present study was carried out amongst the various colleges in Delhi, India from January, 2020 to February, 2020.

3.1 Materials

A structured questionnaire divided into two parts was utilised for this research. The first part was constructed to obtain the socio-demographic data of the students and the second part was a standard questionnaire: The Community Attitudes towards Mental Illness or CAMI Scale.

The CAMI Scale is a 40-item questionnaire that uses a 5-point likert scale and was prepared by Taylor and Dear in 1981. This scale denotes four specific dimensions namely: Authoritarian, Benevolence, Social Restrictiveness and Community Mental Health Ideology. Every sub-scale has ten items in total out of which 5 items are positively (pro) worded and other 5 are negatively (Anti) worded.

3.2 Procedure

The students from one medical college, two law colleges and one engineering college in Delhi, India were approached for this study. A brief session was taken to explain the students about the questionnaire. The students were also informed about the confidentiality of the data that was collected. The participants were given 20 minutes to complete the questionnaire followed by another brief session to resolve their queries regarding the study. The SPSS software for windows was used to analyse the data that was collected.

3.3 Participants

The researchers approached the undergraduate students for this study by using the purposive sampling technique. The selection criteria required the students to be enrolled in a medical, law or an engineering course in a college in Delhi. A total population of 354 students participated in the study however, 22 (12-medical students, 8-law students and 2-engineering students) questionnaires were discarded as they were incomplete ergo 332 questionnaires were considered for the present study. The participants consisted of medical students (n=122), law students (n=108) and engineering students (n=102).

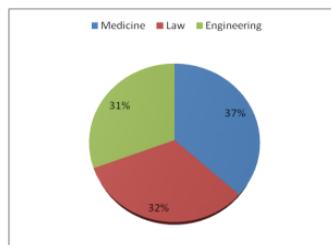


Figure 1: Respondents' Population.

4. Results

4.1 Socio-Demographic data of the Students

The data manifested that 76.8% (n=255) of the population was aged between 18-20 years, 20.5% (n=68) were in the age group of 21-23 years and this was followed by 2.1% (n=7) who were less than eighteen years of age. One student was in the age group of 24-25 years (0.3%) and one accounted for more than 25 years of age (0.3%).

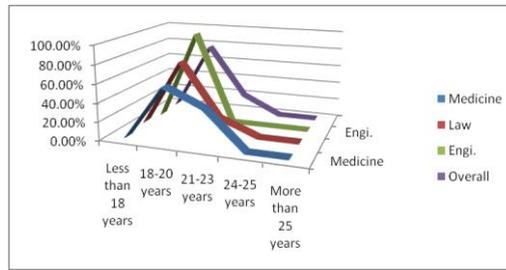


Figure 2: Respondents' Age Profile.

4.2 Gender

There were 66.6% (n=221) male respondents whereas females accounted for 33.1% (n=110) of the sample size. There was one transgender student as well (0.3%).

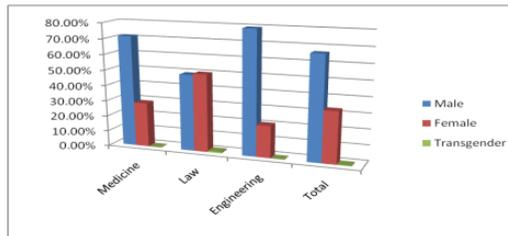


Figure 3: Respondents' Gender Profile.

4.3 Place of Residence

There were 77.4% (n=257) students who were from Delhi and only 22.5% (n=75) who were from various other states of India who were studying in the colleges in Delhi.

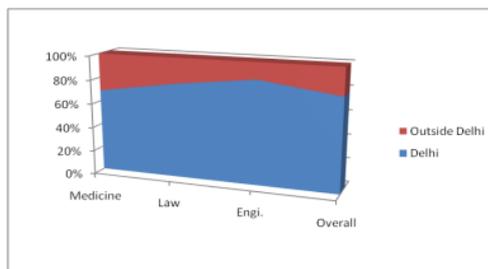


Figure 4: Respondents' Place of Residence.

4.4 Domicile

It was observed that a majority of the population was from urban areas (94.3%) whereas only a few were from rural areas (5.7%).

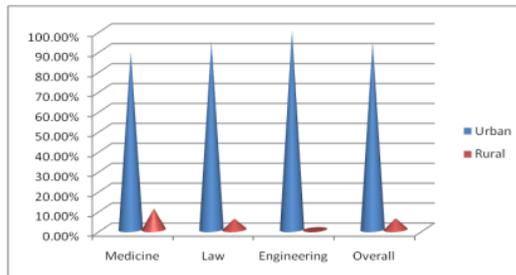


Figure 5: Respondents' Domicile.

4.5 Year of Study

It was manifested that 45.2% (n=150) of the students were in the first year of their study followed by 32.2% (n=107) in the second year along with 20.2% (n=67) in the third year. Only 2.4% (n=8) of the students were in the fourth year of their study.

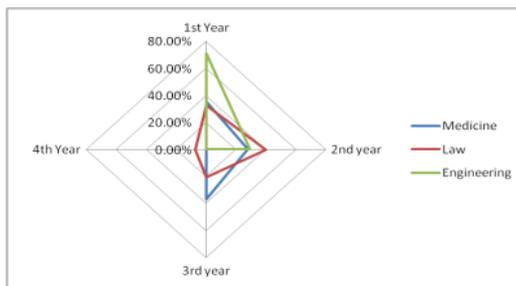


Figure 6: Respondents' Year of Study Profile.

4.6 Students' attitude towards mentally ill on Authoritarian Sub-Scale

The Authoritarian Sub-Scale reflects the view that people with mental illness should be handled in a strict and coercive manner. A higher percentage on this Scale will reflect not only a stringent but also an iron-fisted approach towards mentally ill individuals. This Sub-Scale has ten statements out of which statements a, i, q, y and gg are positively worded whereas statements e, m, u, cc and kk are negatively worded.

It was observed that 70.7% of the respondents agreed with the statement 'Mental patients need the same kind of control and discipline as a young child' (Statement q). In the similar manner majority of the respondents (total-56%) agreed on the statement 'As soon as a person shows signs of mental disturbance, he should be hospitalised' (Statement a).

On the basis of the comparative analysis of the responses it was observed that while answering most of the statements, law students reflected a more authoritative approach as compared with the students of the other two faculties. On the statement 'As soon as a person shows sign of mental disturbance, he should be hospitalised' (Statement a)

majority of the law students agreed (63.9%). Similarly on the statement ‘Mental hospitals are an outdated means of treating the mentally ill’ (Statement cc) where 36.1% of the law students disagreed; only 27.1% of the medical students and 21.5% of the engineering students disagreed. On statement such as ‘There is something about the mentally ill that makes it easy to tell them from normal people’ (Statement i) a higher percentage of law students (50.9%) were found to be agreeing with it but only 45.1% of the engineering students and 38.5% of the medical students had the same approach. 12.1% of the law students agreed with the statement that ‘The best way to handle the mentally ill is to keep them behind locked doors’ (Statement y) but only 10.8% of the engineering students and 6.5% of the medical students agreed with this statement. On the statement ‘Virtually anyone can become mentally ill’ (Statement kk) 15.8% of the law students disagreed whereas 12.7% of the engineering and only 8.2% of the medical students held a similar view.

Although a more authoritative outlook was observed in law students, while responding to the statement ‘One of the main causes of mental illness is a lack of self-discipline and will power’ (Statement gg) it was found that 50.8% of the medical students agreed with it whereas only 41.6% of the law students and merely 30.4% of the engineering students had the same opinion. Similarly on the statement ‘Less emphasis should be placed on protecting the public from mentally ill’ (Statement m) again the responses reflected that 56.5% of the medical students disagreed with it whereas 45.4% of the law students and 41.2% of the engineering students had that outlook.

Table 1: Respondents’ attitude on the Authoritarian Sub-Scale profile

Statement Number	Course of Study						Sub-Total	
	Medicine		Law		Engineering			
	N(122)	%	N(108)	%	N (102)	%	N(332)	%
Statement a	65	53.3%	69	63.9%	52	51%	186	56%
Statement e	49	40.2%	41	38%	44	43.2%	134	40.3%
Statement i	47	38.5%	55	50.9%	46	45.1%	148	44.5%
Statement m	69	56.5%	49	45.4%	42	41.2%	160	48.1%
Statement q	86	70.5%	75	69.5%	74	72.6%	235	70.7%
Statement u	14	11.4%	12	11.1%	13	12.7%	39	11.7%
Statement y	8	6.5%	13	12.1%	11	10.8%	32	9.6%
Statement cc	33	27.1%	39	36.1%	22	21.5%	94	28.3%
Statement gg	62	50.8%	45	41.6%	31	30.4%	138	41.5%
Statement kk	10	8.2%	17	15.8%	13	12.7%	40	12%

4.7 Students’ attitude towards mentally ill on Benevolence Sub-Scale

The Benevolence Sub-Scale is based on humanistic and religious principles. A higher percentage on this Scale will reflect not only an empathetic but also a pitying attitude towards the people with mental illness. This Sub-Scale has ten statements out of which statements b, j, r, z and hh are positively worded whereas statements f, n, v, dd and ll are negatively worded.

It was observed that a majority of the respondents showed a high percentage in maximum number of statements. 83.7% of the respondents agreed with the statement ‘We have the responsibility to provide the best possible care for the mentally ill’

(Statement hh). Similarly it was observed that a majority of the respondents (81.3%) agreed on the statement 'We need to adopt a far more tolerant attitude towards the mentally ill our society' (Statement r). Majority of the students (67.1%) did not agree with the Statement 'It is best to avoid anyone who has mental problem' (Statement ll).

On the basis of a comparative analysis of the responses it was observed that while answering most of the statements the medical students reflected a more benevolence attitude towards the people with mental illness as compared with the other two faculties. A vast majority of medical students (93.4%) vehemently disagreed with the statement 'Increased spending on mental health services is a waste of tax money' (Statement n) whereas only 77.5% engineering students followed by 75% of the law students were of this opinion. A similar attitude can be inferred from the statement 'There are sufficient existing services for the mentally ill' (Statement v). On one hand 64.8% of the medical students disagreed with this statement on the other hand only 48.1% engineering students and 46.7% of the law students had the same notion. On the statement 'The mentally ill do not deserve our sympathy' (Statement dd) wherein 84.5% of the medical students disagreed with it, 75.5% of the engineering students as well as 74.1% of the law students had this view point. A relatively higher percentage of medical students (86.9%) agreed on the statement 'We have the responsibility to provide the best possible care for the mentally ill' (Statement hh) although 83.3% of law students followed by 80.4% of the engineering students agreed it.

Although medical students showed a more benevolence attitude towards the mentally ill individuals it was observed in the responses to the statement 'More tax money should be spent on the care and treatment of the mentally ill' (Statement b) 78.5% of the engineering students agreed with it whereas 68% of the medical students and 63% of the law students agreed on the statement.

Table 2: Respondents' attitude on the Benevolence Sub-Scale profile

Statement Number	Course of Study						Sub-Total	
	Medicine		Law		Engineering			
	N(122)	%	N(108)	%	N (102)	%	N(332)	%
Statement b	83	68%	68	63%	80	78.5%	231	69.5%
Statement f	82	67.3%	80	74.1%	79	77.5%	241	72.5%
Statement j	67	58.2%	69	63.9%	54	52.9%	190	57.2%
Statement n	114	93.4%	81	75%	79	77.5%	274	82.5%
Statement r	100	82%	84	77.8%	86	84.4%	270	81.3%
Statement v	79	64.8%	50	46.7%	49	48.1%	178	53.6%
Statement z	82	67.2%	77	71.3%	68	66.7%	227	68.3%
Statement dd	103	84.5%	80	74.1%	77	75.5%	260	78.3%
Statement hh	106	86.9%	90	83.3%	82	80.4%	278	83.7%
Statement ll	83	68%	69	63.9%	71	69.6%	223	67.1%

4.8 Students' attitude towards mentally ill on Social Restrictiveness Scale

Social Restrictiveness Sub-Scale reflects an attitude of social expulsion of the people who are mentally unstable. This Sub-Scale highlights a belief that mentally ill individuals are a menace to others but also a danger to the society at large. This Sub-Scale has ten statements out of which Statements c, k, s, aa and ii are positively worded

whereas Statements g, o, w, ee and mm are negatively worded.

It was observed that the majority of the respondents do not manifest a socially restrictive attitude towards the people with mental illness; still there exists a significant population who thinks otherwise. 36.7% of the respondents disagreed with the statement ‘Most women who were once patients in a mental hospital can be trusted as baby sitters’ (Statement mm). Similarly 31.0% of the respondents agreed with the statement ‘The mentally ill should not be given any responsibility’ (Statement ii) as well as 29.5% agreed on the statement ‘I would not want to live next door to someone who has been mentally ill’ (Statement s). 28.9% of the respondents disagreed with the statement ‘The mentally ill are far less of a danger than most people suppose’ (Statement g).

Although the difference in the answers of the students of the three faculties is relatively less, on the basis of a comparative analysis of the responses given by 332 undergraduate students it was observed that the students of law showed a higher percentage as compared to the students of the other two faculties. On the statement ‘A woman would be foolish to marry a man who has suffered from mental illness, even though he seems fully recovered’ (Statement k), 17.6% of the law students agreed with it whereas only 11.8% of the engineering students and 11.4% of the medical students agreed with this statement. 13.9% of the law students disagreed with the statement ‘No one has a right to exclude the mentally ill from their neighbourhood’ (Statement o) but only 8.2% of the medical students and 5.9% of the engineering students were against it. A significant percentage of law students (28.7%) agreed on the statement ‘Anyone with a history of mental problem should be excluded from taking public office’ (Statement aa) whereas only 25.4% of the medical students and only 18.6% of the engineering students agreed with this statement. On the statement ‘The mentally ill should not be given any responsibility’ (Statement ee) 38% of the law students answered positively however only 31.1% of the medical students and 23.5% of the engineering students were in its favour.

Even though law students showed a socially restrictive attitude towards persons with mental disorders it was seen that 40.2% medical students—as compared to 33.3% law students and 36.2% engineering students—disagreed on the statement ‘Most women who were once patients in a mental hospital can be trusted as baby sitters’ (Statement mm). Similarly from the statement ‘The mentally ill should not be denied their individual rights’ (Statement ee) 22.5% of the engineering students disagreed on the statement whereas only 18.5% of the law students and 15.6% of the medical students were of this opinion.

Table 3: Respondents’ attitude on the Social Restrictiveness Sub-Scale profile

Statement Number	Course of Study						Sub-Total	
	Medicine		Law		Engineering			
	N(122)	%	N(108)	%	N (102)	%	N(332)	%
Statement c	15	12.3%	17	15.7%	17	16.7%	49	14.7%
Statement g	41	33.6%	33	30.5%	22	21.6%	96	28.9%
Statement k	14	11.4%	19	17.6	12	11.8%	45	13.5%
Statement o	10	8.2%	15	13.9%	6	5.9%	31	9.3%
Statement s	42	34.4%	35	32.4%	21	20.6%	98	29.5%
Statement w	19	15.6%	14	13%	17	16.7%	50	15%

Statement Number	Course of Study						Sub-Total	
	Medicine		Law		Engineering			
	N(122)	%	N(108)	%	N (102)	%	N(332)	%
Statement aa	31	25.4%	31	28.7%	19	18.6%	81	24.3%
Statement ee	19	15.6%	20	18.5%	23	22.5%	62	18.6%
Statement ii	38	31.1%	41	38%	24	23.5%	103	31.0%
Statement mm	49	40.2%	36	33.3%	37	36.2%	122	36.7%

4.9 Students' attitude towards mentally ill on Community Mental Health Scale

The Community Mental Health Ideology Sub-Scale reflects an attitude of acceptance of the mentally ill individuals in the society. This Sub-Scale evaluates how far the respondents are willing to welcome mental health services in their community. This Sub-Scale has ten statements out of which Statements d, l, t, bb and jj are positively worded whereas Statements h, p, x, ff and nn are negatively worded.

It was observed that most of the respondents appreciated the existence of mental health facilities in their community. Moreover, they agreed that the social acceptance will help the individuals who are mentally ill. 79.5% of the respondents agreed with the statement 'As far as possible mental health services should be provided through community-based facilities' (Statement l) and similarly 78.6% agreed on the statement 'Residents should accept the location of mental health facilities in their neighbourhood to serve the needs of the local community' (Statement t). It was observed that 72.5% of the respondents agree that 'The best therapy for many mental patients is to be part of a normal community' (Statement d).

Although the difference in the answers of the students of the three faculties is relatively less, on the basis of a comparative analysis it was observed that the outlook of the law students was rebuffing as compared with the other two faculties. It was observed that 77.5% of the engineering students and 73.7% of the medical students agreed on the statement 'The best therapy for many mental patients is to be part of a normal community' (Statement d) whereas only 66.6% of the law students agreed with this statement, rest either disagreed (12%) or were neutral (21.3%). Similarly on the statement 'As far as possible mental health services should be provided through community-based facilities' (Statement l) 86.9% of the medical students and 80.4% of the engineering students agreed with it and only 70.4% of the law students had the same opinion. There were still 16.6% of the respondents who did not agree and 13% were neutral on this statement. On the other hand medical students appeared to be more accepting towards the needs of the mentally ill individuals. On statements such as 'Locating mental health services in residential neighbourhoods does not endanger local residents' (Statement bb) as compared with the other faculties medical students appeared to have a higher percentage (medical students-62.3%, law students-51.9% and engineering students-54.9%). Similarly more than half of the medical students (57.4%) did not agree with the statement 'Local residents have good reason to resist the location of mental health services in their neighbourhood' (Statement x). On the other hand only 42.1% of the engineering students and 31.4% of the law students were of the same opinion.

Table 4: Respondents' attitude on the Community Mental Health Sub-Scale profile

Statement Number	Course of Study						Sub-Total	
	Medicine		Law		Engineering			
	N(122)	%	N (108)	%	N (102)	%	N (332)	%
Statement d	90	73.7%	72	66.6%	79	77.5%	241	72.5%
Statement h	80	65.6%	70	64.8%	67	65.7%	217	65.3%
Statement L	106	86.9%	76	70.4%	82	80.4%	264	79.5%
Statement p	29	23.8%	16	14.9%	19	18.7%	64	19.2%
Statement t	98	80.4%	86	79.7%	77	75.5%	261	78.6%
Statement x	70	57.4%	34	31.4%	43	42.1%	147	44.2%
Statement bb	76	62.3%	56	51.9%	56	54.9%	188	56.6%
Statement ff	70	57.4%	63	58.3%	62	60.8%	195	56.7%
Statement jj	74	60.7%	63	58.3%	65	63.7%	202	60.8%
Statement nn	67	54.9%	48	44.5%	70	68.7%	185	55.7%

5. Discussion

A comparative analysis of the responses of the students from all the three courses has shown some pleasant results. In general, it is seen that the students of all the three streams have a positive attitude towards the mentally ill. This surely is appreciable; however, it is important not to gloss over the details. While it is important not to miss the wood for the trees but it is equally necessary to focus on the details. Many a times it is seen that the devil lies in the minute details.

In this study a regrettable figure was observed when a massive number of students held an authoritative approach while agreeing that mentally ill should not only be controlled but also disciplined like a young child. This figure demonstrated that deep down mentally ill people are still considered as sub-standard individuals who require to be subjected to coercive as well as stringent attitude. Additionally more than half of the students agreed that mentally ill should be hospitalised and a near majority of students still believe that the society needs a protection from mentally ill individuals. An analysis of all these statements reveals that reality cannot be masked behind the lies. There still exist some misconceptions as well as an apathetic attitude towards mental illness amongst the student community.

The study manifested a tremendous figure on the Benevolence Sub-Scale thereby displaying that a vast majority of students held a paternalistic attitude towards the mentally ill. Unfortunately a very sombre figure was discovered when it was observed that there were still quite a few students who held the notion that mentally ill are not the subject of ridicule.

This study revealed that most of the students did not rank higher on the Social Restrictiveness Sub-Scale however it was discouraging to observe that nearly half of the students believe that women who have been a patient in a mental hospital must not be trusted as a baby sitter. There were many students who did not want to live next door to someone who was mentally ill and neither did they want to give them the responsibility of a public office. It is a well accepted fact that the treatment of a mentally ill individual requires that he should not only be assimilated but also ameliorated by the society and the best way for someone to start afresh is by taking up the responsibilities like any other

individual. However, the responses to some of these statements proved to be opposite to the notion that our society is compassionate towards the mentally ill individuals. Through this study it was discerned that most of the students had a welcoming attitude towards mentally ill individuals howbeit, it was appalling to observe that a vast majority of the students agreed that having a mental health facility in a residential area poses a grave danger to the residents of that area therefore residents have a good reason to resist the location of mental health services in their neighbourhood. In this era where mental health is given far more importance; these responses display that there still exist an urgent need to enhance the mental health literacy of the community.

Conclusion

This study has displayed major gaps in the mental health literacy of the students. These results are of the students studying at college level in premier universities of India. If students at these institutions do have such bias, we can very well imagine the magnitude of stigma being faced by a mentally ill person in a society where literacy is merely determined on the basis of ability to read and write one's own name. Therefore it is imperative that the biases are nipped in the bud if we are to move towards a more egalitarian and empathetic society. Education plays a crucial role in this regard. Plethora of universities across the globe are taking an initiative to promote mental health awareness amongst the students (Conley, Durlak, & Dickson, 2013; O'Reilly, Bell, Kelly, & Chen, 2011; Warwic, Maxwell, Statham, Aggleton, & Simon, 2008). It has been noted that individuals who are trained and sensitised towards the needs of mental illness are more likely to show a positive attitude than those who are misinformed or under a false belief (Corrigan, & Penn 1999). The education system needs to take steps by organizing mental health awareness programmes so that the student community can not only be educated but also develop a civic responsibility towards the needs of mentally ill. Various discussions, talks as well as awareness session either during a class or through tutorials can increase the mental health literacy of the students (Conley, Durlak, & Dickson, 2013). Studies have shown that an association with mentally ill can have a positive effect on the mindset towards mental illness (Corrigan et al., 2001) hence education system can initiate a direct interaction between the students and those who have mental illness.

The purpose of this paper is not to ring bells of doom rather to draw attention to the fact that we have a window of opportunity here. It is common knowledge that increasingly there is cut throat competition for opportunities, which is leading to a lot of pressure on students. The students of today would be leaders of tomorrow. A society where leaders ignore mental health of its population won't be a sustainable and equitable place to live. Hence it is imperative that mental health literacy is incorporated into curriculum of future leaders if we are to realize the SDGs.

References

- Birla, N. (2019, October 10). Mental health in India: 7.5% of country affected; less than 4,000 experts available. Retrieved from <https://economictimes.indiatimes.com/magazines/panache/mental-health-in-india-7-5-of-country-affected-less-than-4000-experts-available/articleshow/71500130.cms?from=mdr>.

- Conley, C. S., Durlak, J. A., & Dickson, D. A. (2013). An evaluative review of outcome research on universal mental health promotion and prevention programs for higher education students. *Journal of American College Health*, 61, 286-301. <https://doi.org/10.1080/07448481.2013.802237>.
- Conley, C. S., Durlak, J. A., & Dickson, D. A. (2013). An evaluative review of outcome research on universal mental health promotion and prevention programs for higher education students. *Journal of American College Health*, 61, 286-301. <https://doi.org/10.1080/07448481.2013.802237>.
- Corrigan, P. W., & Penn, D. L. (1999). Lessons from social psychology on discrediting psychiatric stigma. *American Psychologist*, 54(9), 765-776. <https://doi.org/10.1037/0003-066X.54.9.765>.
- Corrigan, P. W., River, L. P., Lundin R. K., Penn, D. L., Uphoffwasowski, K., Campion, J., Mathisen, J., Gagnon, C., Bergman, M., Goldstein, H., & Kubiak, M. A. (2001). Three strategies for changing attributions about severe mental illness. *Schizophrenia Bulletin*, 27(2), 187-195. doi: 10.1093/oxfordjournals.schbul.a006865.
- Dear, M. J., & Taylor, M. S. (1981). Scaling community attitudes toward mentally ill. *Schizophrenia Bulletin*, 7, 225-240.
- Jorm, A. F., Korten, A. E., Jacomb, P. A., Christensen, H., Rodgers, B., Pollitt, P. (1997). Mental health literacy: A survey of the public's ability to recognize mental disorders and their beliefs about the effectiveness of treatment. *Medical Journal of Australia*, 166, 182-186.
- O'Reilly, C. L., Bell, J. S., Kelly, P. J., & Chen, T. F. (2011). Impact of mental health first aid training on pharmacy students' knowledge, attitudes and self-reported behaviour: A controlled trial. *Australian & New Zealand Journal of Psychiatry*, 45, 549-557.
- The World Bank. (2020). Mental Health. Retrieved from <https://www.worldbank.org/en/topic/mental-health>.
- United Nations. (2015). Envision 2030: 17 goals to transform the world for persons with disabilities. Retrieved from <https://www.un.org/development/desa/disabilities/envision2030.html>.
- Warwic, L., Maxwell, C., Statham, J., Aggleton, P., & Simon, A. (2008). Supporting mental health and emotional well being among younger students in further education. *Journal of Further and Higher Education*, 32, 1-13. <https://doi.org/10.1080/03098770701560331>.
- Wickstead, R., & Furnham, A. (2017). Comparing Mental Health Literacy and Physical Health Literacy: An Exploratory Study. *Journal of Mental Health*, 26, 449-456.
- World Health Organization. (2018). Mental health: strengthening our response. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response>.