

Mental Health Education Issues in Colleges and Universities in China

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Abstract

The aim of this paper is to discuss the problems of mental health education in Chinese universities. Based on the literature review, this paper will discuss the following three modules: the teachers, the teaching staff, and the management system. In particular, the faculty consists of the structure, the expertise, and the training problems; the teaching of the course includes the methodology of teaching, the theory of the course; the management system includes reference, department coordination, and supervision and assessment. Mental health education in China has developed rapidly at the beginning, and now it is in the stage of qualitative development. In this phase, it is necessary to deal with the problems existing in mental health education in China, and to meet the needs of the students.

Keywords: Mental health education; Teaching staff; Course teaching; Management system

1. Introduction

Mental health education is a kind of educational activity, according to studying this course which help the students to deal with all kinds of psychological problems in their study and growth, to improve their personality, to improve their mental health, to develop their psychological potential, to help them develop their moral, intellectual, physical, artistic, and physical abilities, and to improve their moral, intellectual, physical, and artistic qualities (Hu Kai, 2008; Chen Xianjian, 2005).

In college, the students are in the transitional phase from adolescent stage to adulthood. For one thing, they have different knowledge about mental health education, and they do not have a systematic knowledge system. In middle school, the majority of the students are not actively participating in the class, and they are used to being passive. Even when they discover problems in a new college environment, they have no idea how to deal with them effectively. On the other hand, they are at a new stage of self-awareness. As a result, university students are anxious to solve their adaptation problems, but they are also in a state of deep confusion (Lu Aixin, 2007).

In Zhang Zengjie's view (1984), all these conflicts are not accidental, but a common phenomenon in university students' growth and development, a special inner condition in their psychological development. According to Fang Hongzhi and other scholars, the mental health education of university students is gradually becoming more and more important (Fang Hongzhi & Pan Siyua, 2019). Therefore, this paper probes into the mental health problems of Chinese universities. In particular, the discussion included the study of mental health teachers, the teaching of mental health curriculum, and the problems in the management system of mental health.

By examining past related studies, the author probes into the problems of teachers, courses, and

management of the mental health education in universities. Based on a lot of research materials and data, we find that the mental health problems of Chinese university students have become common problems during their growing period. These problems not only influence their learning, living and growing, but also influence the training quality of higher education (Wang Youzhi & Fan Chao, 2015).

2. Problem

2.1 Insufficient teaching staff and varying levels of consultation

Based on the literature, we find that there are two kinds of problems in the shortage of mental health education teachers in our country. Firstly, there are not enough mental health education teachers in some universities, and the professional level of teachers is low. Mental health teachers are usually made up of mental health teachers. It is made up of teachers, administrators and counselors (Wang Ting & Ma Yansheng, 2007). Secondly, the majority of university teachers are relatively young. Though most of the teachers in mental health centers have psychological and educational background, they are short of practical experience. In conclusion, the lack of theoretical knowledge of psychology and the lack of practical experience in the field of mental health education, which results in the failure of the university's mental health education to achieve its objectives. This is reflected in the lack of real service for the students' growth and success, and the difficulty in conducting mental health education (Wang Zhixue, 2011; Wang Xiaoxia, 2009).

Meanwhile, there is a lack of regular training for mental health teachers in universities. University mental health educators are confronted with students who are active and receptive. Therefore, in addition to necessary professional skills, they should also regularly participate in relevant training, pay attention to social hot spots and development trends, understand students' ideological and psychological dynamics, and learn and master the latest mental health education concepts, educational technologies, and educational methods (Yu Qiumei, 2012). However, some colleges and universities cannot provide timely training for mental health educators, nor can they provide relevant psychological knowledge training for relevant moral education workers in schools. As a result, mental health educators cannot adapt to the current mental health status of college students, and deviations are inevitable in work concepts and methods (Xie Chunling, 2006).

In addition, mental health education and counseling have very high requirements on the professional and technical level of practitioners. It is difficult to achieve the effect of professional psychological counseling only by relying on my many years of student work experience and perceptual knowledge of student psychology to "talk". Foreign personnel engaged in this work must have a doctoral degree or above in educational psychology, clinical psychology, counseling psychology, and social work, as well as certain practical experience (Huang Ping, 2016; Ma Pei, 2018). The professionalization of the mental health education team has seriously affected the smooth progress of mental health education. Guo Xiaoxia (2019) believes that mental health education teachers need to strengthen relevant professional training and training, which affects the effect of mental health education. You Sitao (2021) believes that mental health teachers pay special attention to practical training. Through investigation and analysis, Lei Qiaohua (2010) concluded that the American Psychological Association requires mental health education teachers to have a doctorate and pass the qualification certification examination; the British mental health practitioners must have 1-2 years of work experience. Therefore, it is very important to carry out strict qualification certification, professional training, and practical training for mental health education teachers, and building a professional team is an important support for doing this work well (Wang Tao, 2006).

2.2 The teaching method is singular, and the main courses focus on theory

Last few years, the development of educational technology has triggered a revolution in classroom teaching, which has changed the time and space constraints of classroom teaching, and changed the roles of teachers and students. Teachers' teaching has changed from subject to dominant, and students' learning has changed from passive to active. Technologies such as MOOCs, flipped classrooms, micro-classes, and micro-videos have been skillfully introduced into classroom teaching, but only in form, and teachers have not changed their educational concepts. The traditional teacher-centered teaching mode, that is, the teaching-based teaching method is still dominant (Li Yuhong, 2003). As mankind enters the information age, the disadvantages of the teaching-centered classroom teaching mode have become increasingly prominent, such as the difficulty of mobilizing the enthusiasm of students, students are unwilling to learn or do not want to learn, resulting in distraction in class. There are many problems in the general course of mental health education for college students, such as too much content, less class hours, large class teaching, and teaching space restrictions (Zhao Juming, 2016). In the new era, post-100s college students tend to have diversified value orientations and individualized behavior choices, and are generally troubled by problems in learning, employment, interpersonal relationships, love, and self-development (Tang Jiliang & Yao Benxian, 2014). In order to complete the teaching tasks, most teachers can only conduct "one-word classroom" teaching, and many experiential activities cannot be carried out, which fails to fully stimulate students' initiative and enthusiasm, and fails to enable students to truly form a sense of self-exploration (Zhang Jinhua & Ye Lei, 2010).

In the course of mental health education, it is regarded as a course in some universities. In my opinion, mental health education should be based on the teaching of mental health. The teacher prepares lessons like other subjects, and in class, carefully explains the concepts and principles of psychology, and allows students to read, draw, and endorse. In addition, since this course is included in the schedule, it is necessary to pass the exam to supervise and check the effect of students' learning and teachers' teaching. Teachers tell, students remember, from concept to concept, from theory to theory. This method of using test scores to force students to attend lectures and memorize not only makes students' curiosity and good expectations for mental health education disappear, but also creates disgust (Zhang Jinhua & Ye Lei, 2010). In addition, such an overly curricular approach, although the weekly fixed class time guarantees the time for mental health education and has a stable position for disseminating knowledge, but there are many knowledge and contents in mental health education that can only be obtained through activities and training. Moreover, this kind of over-curricular method, which ensures the time for mental health education, has a stable position to spread knowledge, but there is still a lot of knowledge and content which can only be acquired through activities and training. What's more, it is not able to solve the mental problems of the special and individual students, nor can it be flexible and timely to deal with the students' psychological problems (Xie Chunling, 2006). Through investigation, Song Liqun (2019) found that many colleges and universities regard college students' mental health education as a task, and carry out mental health education activities passively. Formal education cannot really play its role.

2.3 Focus on learning and reference, and the management system has not yet been formed

Incorrect learning from reference. College mental health education began relatively late. Many times, the university adopts the method of mental health education. Private colleges learn from public universities, and slow ones learn from rapidly growing ones. Learning from experience is a prerequisite for writing, but Rote Reference is copying. It does not take appropriate measures according to the actual conditions of

the school and the students (Tang Jiliang & Yao Benxian, 2014). As the level of higher education continues to improve, a series of documents have been published, and more and more institutions have started to look for self-innovation (Li Huaigong, 2003). However, because of the different educational concepts and the complicated psychology of the students, it is difficult to set up an integrated management system (Si xiang, 2018). At present, Zhang Lian (2018) proposes to put students first and infiltrate psychological education into daily work. We must adhere to the concept of taking students as the center, start from the individuality of students, and do a good job in the education of students' mental health in a targeted manner. Therefore, the school mental health education work is based on service, adheres to the combination of school conditions and students' needs, and combines the combination of school development and students' problems to form school-based characteristics.

There is no coordination among the departments. Mental health education has a close relationship with every aspect of students' development. It is important not only to help the students to solve the problem of learning, to improve their social relations, and to enhance their thinking, but also to build a solid foundation for their personality development. Mental health education has relative independence and can not be replaced in every aspect of school work. It also has extensive cross-cutting and infiltration relations with all aspects of the school's work. Clearly, it is not sufficient to rely solely on a full-time mental health education professional. It is not possible to achieve the desired objectives by relying on specialized mental health education institutions (Wang Xiaoxia, 2009). But in actual work, the departments avoid each other from time to time, and there is no uniform deployment among the departments, which makes the mental health education of university students impossible to carry out, and the whole education power has not been brought into full play (Chen Xianjian, 2005). Through research, Du Juan (2021) found that the main reason why the joint force of psychological education has not been formed is that the relevant responsible persons in colleges and universities have not done a good job in top-level design and decision-making. Next, the meaning of mental health education must be further clarified from the fundamental ideological understanding.

Effective monitoring and assessment is lacking. Nowadays, mental health education is still being carried out, but there is no satisfactory solution to the problem of supervising and evaluating. At present, the mental health education in higher learning institutions has been carried out comprehensively, but the results are not satisfactory. The main problems in this area are: on one hand, lack of supervision and assessment; Because of the lack of knowledge about mental health education, many schools have no supervision and evaluation, or no need for supervision and assessment. On the other hand, it can be simplified or even unilateral. Currently, there is no uniform assessment criterion on the methods, methods and contents of the supervision and assessment of mental health education, and the evaluation indicators are unitary. There are some schools that only take the mental health education as an assessment criterion, others only assess the occurrence rate or the detection rate of the students' mental health problems, while others only use the establishment of a psychological consultation room or a psychological consultation activity as an assessment criterion, which leads to a lack of scientific and instructive results (Ma Yanxiu, Yang Zhenbin, and Li Yan, 2013). The assessment of mental health education is to collect objective data on mental health education in schools by means of science and technology, and to evaluate its impact and problems objectively and appropriately (Wang Tao, 2006). Through the assessment, the higher administrative authorities can get a better understanding of the practical effect of mental health education, which will be helpful to determine the next move. Through the assessment, we can get a clear understanding of the achievements and shortcomings of mental health education, which can be used as a

model and guide. Meanwhile, the results of the objective assessment can promote the importance and effect of mental health education to higher authorities, students' parents and society, so as to get more understanding and support.

3. Conclusion

In this paper, the author probes into the problems existing in mental health education in Chinese universities. Though there are still some gaps in the data collection, I found that China's higher education institutions have started to attach great importance to the mental health of university students. Many institutions of higher learning have set up mental health education centers, and they have conducted all kinds of mental health education for students. Health status played a positive role. In my opinion, there are two reasons. One is that the government pays much attention to it. Along with social development and educational reform, the state and local governments have issued a series of papers to strengthen mental health education (Chen Xu & Zhang Dajun, 2002). Students must be aware of the problems they face in university and can effectively resolve them. Students will be strongly supported by mental health education (Li Jinzhen, Shi Jiannong and Wang Wenzhong, 2003). The mental health education of university students should be based on the actual conditions of the university and the students' growth model (Zhao Jialu & An Zhefeng, 2020). The shortcoming of this thesis lies in the fact that it depends on the information provided in the previous research, which might not be complete or different from the actual survey. In addition, this review covers only national studies. But there is little research on mental health education abroad, and there is no field survey, which leads to the incomplete conclusion. Nevertheless, this article can offer some strategy and practice ideas for the teachers of mental health education in colleges and universities, so as to better satisfy the needs of university students.

It is highly suggested that future research studies should do something as follows: Firstly, make a questionnaire, interview and discuss the staff of the psychological Health Education Research Institute, which includes teachers, students, administrators, and parents. Second, design study procedures and take into account practical input. Third, the status quo and developing tendency of mental health education abroad (for example, Europe, America, Japan, etc.), in order to lay a solid foundation for further study (Chen Tianqi, 2017, Yang Zhiying, 2012). Because of the difference in the level of China's universities and the present situation, we can also discuss the differences and demands of the domestic universities.

Hopefully, this article contributed to the ongoing discussion on mental health education in China and will lay the foundation for future research.

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