Let’s Talk about Mental Illness and Study Abroad

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“…[T]his life-changing experience is also challenging and a lot of work” (Lucas, 2009).

Introduction

Over 20% of people between the ages of 18 and 24 are struggling with a mental illness of some kind, according to the National Institute of Mental Health (2015). For students between these ages, studying abroad can seem too stressful to try and tackle on top of everyday school work. How can professionals in the field of international education create positive study abroad opportunities for these students who may feel that the experience is not meant for them? Additionally, how should scholar-practitioners approach a topic that is still stigmatized on many campuses, and sensitive to many students?

According to Karen Leggett, a leading scholar and freelance writer on international education, “planning and preparation must include students from the moment they first begin contemplating an overseas adventure” (2011, p. 11). International education practitioners must work with students to discover their specific needs for a study abroad program, and let students know that having a mental illness is not equal to an inability to go abroad. I was diagnosed with anxiety and depression when I was seven years old and have lived with both ever since, and I still had an incredibly fulfilling experience abroad that has led me to my current studies. Because of this, I am interested in studying how practitioners can help more students with anxiety and depression get abroad. I am also interested in researching further support methods that practitioners can begin to offer students with these problems.

What are the Challenges?

One of the biggest challenges that international education faces regarding students with mental illness studying abroad is lack of research. There is very little discussion in the field on how studying abroad impacts students with mental health concerns, and even less research on the subject. This makes it difficult to provide recommendations to professionals in the field.

Similarly, many offices and programs have a lack of resources. Study abroad offices are often small, which means there isn’t enough funding or staff to spend a sufficient amount of time finding solutions for mentally ill participants. A limited staff can only focus on so much, and one student’s concerns about mental health may not be put to the top of the list when every staff member, and the budget, is stretched thin. Depending on the university’s values, the international office may only have enough money in their budget to pay program providers and faculty members, with maybe some set aside for marketing materials and events. Hiring a new staff member, or even delegating an existing staff member to spend more of their time researching ways to better assist students with mental health, may be out of the question when that person is needed elsewhere.

Additionally, students rarely disclose all mental health information before leaving for their program. Amber Bathke and Ryoka Kim (2016) found that over 50% of students with mental illness that participated in their survey did not disclose any mental health issue to their office or program. The professionals that work with these students can only help guide the students to the right program if they have all necessary information. Unfortunately, for legal reasons, study abroad providers cannot require students to report their mental health issue. The laws and stigma that surround mental health are another obstacle study abroad offices must face.
So, What Can I Do?

Because of my experience as a student with mental illness who is now entering the field of international education, I have a unique opportunity to understand the problems and find solutions first-hand. I’m also in a unique position because of my age; undergraduate students preparing to study abroad are only a few years younger than me, and I can relate to them in many ways. Because of these things, I would ideally like to interview a random pool of students preparing to study abroad. I would ask if they have ever experienced depression or anxiety, and considering the data on how many college students do, expect roughly 20% to say yes. However, because this is a sensitive subject and students don’t always disclose this information, I would settle for a survey.

While Bathke and Kim (2016) did survey students in their study, mine would be different because it would not be about how a student’s mental illness affected his or her time abroad—it would be about what students who have mental illness and have not studied abroad, and furthermore, deem it too stressful or daunting, want out of study abroad offices and providers to help them undergo the process.

What Else Can Be Done?

Speaking from personal experience, it is important for any students with mental health concerns to speak with their study abroad office or provider about mental health before planning their experience abroad. However, for the sake of my argument, I’m going to specify what would be most helpful for students suffering from depression and anxiety, as these are very common diagnoses with which I have first-hand experience.

As seen in the literature, study abroad programs typically have “limited prescreening”; meaning, programs accept students with little to no knowledge about their mental health (McCabe, 2005). Disclosing this information makes it possible for the professionals to gauge whether a student is a good fit for the program they are choosing; for example, major depression is a serious thing to take into account when planning an academic year exchange. Though no professional in the field wants to turn a student away from a program, it can sometimes be in the best interest of the student.

As a student in this situation, I was able to attend my preferred program—however, my Study Abroad Advisor did recommend a shorter program due to my mental health. I was then able to consider her recommendation and make a well-rounded decision about which program I would prefer, and what I was able to handle. When students do not disclose this information, however, there are obvious obstacles around helping them plan the right program. Practitioners cannot give adequate advice without the necessary information, so students must feel that their mental health problems will be confidential between them and the study abroad professional with whom they meet.

In order to know what recommendations to give to students in this situation, professionals need some sort of professional training or certification to assess a student’s mental health. It can be a simple online course; one example is the Massive Open Online Course, or MOOC, in Integrative Mental Health. Though this course is not specific to international education, study abroad professionals need a basic understanding of mental health before assessing whether a student is fit for a program abroad. They should also be able to recognize warning signs in a student’s behavior that may signify mental illness. Though binge drinking, excessive sleeping, and overwhelming stress are things many college students experience, together they are a sign of depression. It is important for study abroad offices to recognize these symptoms. At the very least, if a student is attending therapy at home, they should need a recommendation from their therapist before studying abroad.

It is also important to note that sometimes, studying abroad improves a student’s mental health, as Bathke and Ryoka (2016) learned through their analysis of students’ mental health abroad. In these cases, international educators need to focus on providing a smooth re-entry transition when the student returns home, to ensure their mental state remains positive.

Overall, studying abroad is a beneficial experience for any student. However, there are challenges, both on the side of the student, and the professional, that may hinder their ability to participate. The question I will
leave you with is—what can professionals in the field of international higher education do to alleviate the stigma of mental illness and get everyone in the field thinking about solutions?

REFERENCES