

The Integration of Experiential Teaching into College Students' Mental Health Education Empirical Research

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Abstract

The psychological health problems of college students have attracted more and more attention. The psychological health education courses offered by colleges are the main channel to improve the psychological quality of college students. This study aims to explore a more effective practical model of psychological health education courses for college students with experimental methods. This study randomly selected two classes of College Students' mental health education, one is the experimental class, the other is the control class, a total of 100 students. Before and after the course, SCL-90 symptom checklist was used to investigate the mental health status, SPSS22.0 software was used to manage, store and analyze the data, and T-test was used to compare the pre-test and post test data. The results show that the course "College Students' mental health education" is helpful to improve college students' mental health, and the effect of the experiential teaching mode is better than the traditional teaching method. This study explores the effectiveness of integrating experiential teaching into college students' mental health education curriculum, and provides methods and ideas for effectively carrying out college students' mental health education curriculum.

Keywords: *college students'; mental health education; Experiential teaching; T-test*

1 INTRODUCTION

With more and more college students' suspension, running away, suicide and other malignant events caused by various psychological problems, college students' mental health has gradually become the focus of social attention. In order to enable college students to master basic mental health knowledge, learn certain psychological debugging methods, and improve their mental health level, many colleges and universities have set up the course "College Students' mental health education" among college students, which is the main channel of psychological quality education for college students and an important course to improve their mental health level.

The Ministry of education has put forward clear requirements for the nature, teaching objectives, teaching contents and teaching methods of the course. It points out that college students' mental health education course is a public course integrating knowledge teaching, psychological experience and behavior training; The course aims to enable students to enhance their awareness of self mental health care and psychological crisis prevention, master mental health knowledge, and cultivate their self cognitive ability, communication ability and self-regulation ability, so as to effectively improve the psychological quality of college students and promote their all-round development. The overall purpose is to give full play to the role of the main channel

of classroom teaching, help students master mental health knowledge and skills, establish a sense of self-help and mutual help, and learn to face setbacks and difficulties rationally [7].

Generally speaking, there are three levels of purposes for setting up mental health education courses in Colleges and Universities: first, popularize mental health knowledge, which is the requirement of knowledge transfer; Second, on the basis of mastering certain mental health knowledge, students can make self psychological adjustment, which is the requirement of practical application; Third, in addition to being able to mediate their own mentality, students can also use the learned psychological adjustment methods to help their classmates when they need psychological help. This is the level of mutual help. However, the existing research on mental health education curriculum has more discussions on curriculum setting and content system, but less on teaching methods and teaching reform; Speculative and descriptive studies are in the majority, while empirical and intervention studies are rare [1].

However, the course of College Students' mental health education is designed and launched based on the healthy growth and potential development of college students. Its course objectives are not "pre-set", but constantly generated and independently constructed. Its course content is based on direct experience. Only students participate in the construction and operation of

the course content. The main feature of its teaching mode is that it is student-centered, Students can start from their own needs, interests and motivations, actively participate in the course content and build their own mental health adjustment mode. Only when students become the main body of the classroom, can mental health education be truly implemented.

Constructivist psychology holds that knowledge is not passively and mechanically absorbed, but actively and flexibly constructed by the subject [2]. Experiential teaching is an educational model that creates some real or simulated situations in the form of situational games or activities according to people's different cognitive characteristics and laws, so that people can explore, grow, find problems and solve problems in activities. It has the functions of reshaping personality, understanding themselves or others, improving ability, adjusting or venting emotions [5]. It is a good complement to the traditional cognitive education model.

At present, experiential education mainly exists in the mode of group education, which attempts to optimize the psychological ability of participants through "group counseling" and "psychological growth workshop", and with the help of the strength of the group and various psychological counseling technologies, participants can observe, learn and experience through interpersonal interaction within the group, so as to know themselves, explore the self, accept the self, adjust and improve the relationship with others, learn new attitudes and behavior, so as to improve the ability to cope with stress and defend against psychological problems [3] [4]. Therefore, this study integrates the group education model of experiential teaching into the teaching practice of College Students' mental health education, and evaluates its actual effect, aiming to improve the effectiveness of College Students' mental health education curriculum.

2 RESEARCH METHOD

2.1 Research object

Using random cluster sampling method, two classes were selected from the elective course of College Students' mental health education, which were divided into an experimental class and a control class. There were 50 students in the experimental class, including 26 boys (24 girls), aged from 18 to 21, with an average age of 20.5 years; There are 50 students in the control class, including 23 boys (27 girls), aged from 18 to 22, with an average age of 20.8 years.

2.2 Research tool

Use SCL-90 symptom checklist which has 90 questions, including 9 factors reflecting psychological problems: somatization, compulsion, interpersonal

sensitivity, depression, anxiety, hostility, terror, paranoia and psychoticism [6].

2.3 Program

In the first class, SCL-90 was used to test the students' psychological status. The students in the experimental class conducted experiential teaching, mainly in the form of group counseling. A total of 16 times of group psychological counseling were conducted, each time for 90 minutes. The control class does not set up any activities and is conducted in the way of traditional classroom teaching. At the end of the semester, SCL-90 will be used to conduct a post test on the students of the two classes.

2.4 Activity design

Group psychological counseling was adopted. A total of 4 activity themes that are very relevant to the course objectives are designed, namely "self-awareness", "stress management", "interpersonal communication" and "emotion regulation", each theme is conducted 4 times. After the training, all participants were asked to fill in the SCL-90 questionnaire for the second time, and the results of the questionnaire were taken as the post test results.

2.5 Data processing

Spss22.0 processes all data.

3 RESULT

3.1 Comparison SCL-90 factor scores between experimental class and control class before the course

The results showed that there was no significant difference in the scores of each factor between the experimental class and the control class in the SCL-90 test. It shows that the mental health status of the experimental class and the control class is the same before the course. See Table 1 for specific results.

Table 1: comparison of pre-test results of SCL-90 factor scores of experimental class and control class ($\bar{X} \pm S$)

| Factor | Experimental | Control | t |
|---------------|--------------|----------|-------|
| Somatization | 1.42±.23 | 1.42±.25 | -0.13 |
| compulsive | 1.65±.40 | 1.61±.35 | -0.58 |
| Interpersonal | 1.66±.51 | 1.65±.52 | 0.04 |
| Depressed | 1.53±.37 | 1.54±.32 | -0.17 |
| Anxious | 1.47±.38 | 1.48±.34 | -0.06 |
| Hostile | 1.48±.43 | 1.50±.38 | -0.27 |
| Terror | 1.45±.45 | 1.42±.62 | 0.23 |
| Paranoia | 1.49±.45 | 1.52±.43 | -0.35 |
| Psychotic | 1.36±.21 | 1.44±.23 | -1.74 |

3.2 Comparison SCL-90 factor scores between experimental class and control class after the course

The results showed that after a semester of College Students' mental health education courses in different teaching forms, the experimental class and the control class have significant differences in SCL-90 factors. Specifically, there are significant differences in the scores of somatization, obsessive-compulsive symptoms, interpersonal sensitivity depression and anxiety, and the scores of the experimental group in these five factors are significantly lower than those of the control group. See Table 2 for specific results.

Table 2: comparison of post-test results of SCL-90 factor scores of experimental class and control class (X±S)

| Factor | Experimental | Control | t |
|---------------|--------------|----------|---------|
| Somatization | 1.23±.15 | 1.32±.24 | -2.3** |
| compulsive | 1.39±.26 | 1.57±.39 | -2.64** |
| Interpersonal | 1.31±.20 | 1.46±.42 | -2.15** |
| Depressed | 1.21±.16 | 1.31±.24 | -2.41** |
| Anxious | 1.32±.23 | 1.43±.36 | -2.21** |
| Hostile | 1.36±.37 | 1.43±.36 | -1.1 |
| Terror | 1.38±.37 | 1.45±.44 | 0.58 |
| Paranoia | 1.29±.26 | 1.38±.39 | -1.39 |
| Psychotic | 1.35±.25 | 1.43±.30 | -1.38 |

Note: **Indicates significant difference at 0.01 level

3.3 Comparison SCL-90 factor scores of experimental class before and after the course

The results showed that there were significant differences ($p<0.05$) in 6 factors of somatization, obsessive-compulsive symptoms, interpersonal relationship, depression, anxiety and paranoia after the experimental class integrated the experiential teaching into the mental health education for college students. See Table 3 for details.

Table 3: comparison of SCL-90 factor results of experimental classes before and after the course

| Factor | Before | After | t |
|---------------|----------|----------|--------|
| Somatization | 1.42±.23 | 1.23±.15 | 4.89** |
| compulsive | 1.65±.40 | 1.39±.26 | 3.61** |
| Interpersonal | 1.66±.51 | 1.31±.20 | 4.21** |
| Depressed | 1.53±.37 | 1.21±.16 | 5.52** |
| Anxious | 1.47±.38 | 1.32±.23 | 3.76** |
| Hostile | 1.48±.43 | 1.36±.37 | 1.31 |

| | | | |
|-----------|----------|----------|--------|
| Terror | 1.45±.45 | 1.38±.37 | 0.69 |
| Paranoia | 1.49±.45 | 1.29±.26 | 2.46** |
| Psychotic | 1.36±.21 | 1.35±.25 | 0.15 |

Note: **Indicates significant difference at 0.01 level

3.4 Comparison SCL-90 factor scores of control class before and after the course

The results showed that there were significant differences ($p<0.05$) in 3 factors of somatization, interpersonal relationship and depression in the control class after the traditional methods were used in the teaching of mental health education for college students. See Table 4 for details.

Table 4: comparison of SCL-90 factor results of control classes before and after the course (X±S)

| Factor | Before | After | t |
|---------------|----------|----------|------|
| Somatization | 1.42±.25 | 1.32±.24 | 2.01 |
| compulsive | 1.61±.35 | 1.57±.39 | 0.54 |
| Interpersonal | 1.65±.52 | 1.46±.42 | 2.55 |
| Depressed | 1.54±.32 | 1.31±.24 | 4.23 |
| Anxious | 1.48±.34 | 1.43±.36 | 1.79 |
| Hostile | 1.50±.38 | 1.43±.36 | 0.71 |
| Terror | 1.42±.62 | 1.45±.44 | 0.96 |
| Paranoia | 1.52±.43 | 1.38±.39 | 1.74 |
| Psychotic | 1.44±.23 | 1.43±.30 | 0.13 |

Note: * indicates significant difference at 0.05 level, **Indicates significant difference at 0.01 level

4 DISCUSS

4.1 The course of mental health education for college students helps to improve the mental health level

A paired sample t-test was conducted on the psychological test results of the subjects in the experimental class and the control class before and after the course of mental health education for college students. It was found that the paired sample t-test results of the subjects in the experimental class were significantly different in the six aspects of somatization, obsessive-compulsive symptoms, interpersonal relationship, depression, anxiety and paranoia, while the subjects in the control class were significantly different in somatization, interpersonal relationship. There are significant differences in t-test results of paired samples in the three aspects of depression, that is, the score of the post test is significantly lower than that of the pre-test. The score shows that no matter what method of teaching is adopted, as long as the students accept the course of

mental health education for college students, their mental health can be improved. At the same time, the results show that some aspects of the subjects have been improved, but there is no significant difference between the post-test scores and the pre-test scores in some aspects. There may be two reasons. First, because the psychological test carried out on the subjects includes many aspects, but the content of the course of mental health education for college students in one semester is limited, the course content of mental health education for college students accepted by the subjects may only have an impact on some aspects of the psychological state of the subjects, but not on others; Second, the subjects received only one semester of College Students' mental health education. However, the improvement of some aspects of mental health may require more long-term practice to produce significant results.

4.2 Integrating experiential teaching into the course is more conducive to the improvement of College Students' mental health than the traditional single teaching method.

Before receiving the experimental treatment, there was no significant difference in SCL-90 between the subjects in the experimental class and the control class. After a semester of "College Students' mental health education", the subjects in the experimental class received experiential teaching, while the subjects in the control class received traditional single form of teaching. The subjects in the experimental class experienced somatization, obsessive-compulsive symptoms, interpersonal relations, depression, anxiety. The scores of the six factors of paranoia were significantly different from those of the control class, and were significantly lower than those of the control class. The results show that the experience teaching can significantly improve the mental health level of college students than the traditional single teaching method. This may be because the characteristics and atmosphere of group activities make it easy for members to find resonance, and promote them to accept themselves and others more. At the same time, group counseling also provides each participant with the opportunity to analyze and observe others' ideas and emotional reactions from multiple perspectives, so that they can have a clearer understanding of themselves and people. More importantly, in group activities, members can learn from each other, exchange experience, and promote their self reflection, self understanding and self growth.

5 CONCLUSION

This study shows that, firstly, mental health education among college students can significantly improve the level of students' mental health; Second, the effect of integrating experiential teaching into the curriculum is

more conducive to the improvement of College Students' mental health than the general traditional teaching methods.

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REFERENCES

- [1] CaixiaShi Song, Feng Xiao.(2018). Problems and Countermeasures of College Students' mental health education. Journal of Huaihai Institute of Technology: Humanities and Social Sciences Edition, 2: 126-129
- [2] Congling Hou (2014). Exploration and practice of experiential teaching in College Ideological and political theory courses. China Electric Power Education, 2014, 14:160-161.
- [3] Huiting Zou. (2019) Using group experiential activities to improve students' mental health. Education and Teaching Forum,32:71-72
- [4] Jin Yu.(2021). Experiential Education: A Study on psychological counseling for rural high school students' learning backwardness. Basic education research,23:71-74
- [5] Wenya Luo.(2021). The influence of experiential practical teaching on improving the effect of College Students' mental health education .University. 17:125-128
- [6] Yufan. 2008.Psychological test. Wenhui press.
- [7] Yue Zhang, Zhenming Hu.(2021). Research on the Improvement of Mental Health Education Curriculum in Higher Vocational Colleges in the New Era. Industrial Technology & Vocational Education,19:90-93

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