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The Association between Mental Health and Overall Health, Safety Behavior, and Social Relationships Among University Students in Cambodia

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- Mental health is one aspect of overall health and well-being, and it is important to maintain and promote mental health for healthy adolescent development. (WHO, 2021)
- Mental illness in adolescence has been associated with an increased risk of mental disorders in later adulthood. (Johnson, et al., 2018)



 In Cambodia, after the civil war of the late 20th century, people developed mental disorders, affecting even younger generations that did not directly experience the civil war. (Mak, et al., 2021)



- A previous study reported some Cambodian university students have experienced moderate depression, anxiety, and stress symptoms. (Pan, 2017)
- Currently, Cambodia lacks adequate mental health care services for mental health problems. (Jegannathan, et al., 2015)

It is important to clarify the factors associated with mental health problems in the Cambodian context to support mental health among university students.



Introduction

Previous research shows

• Key factors associated with depressive symptoms among Cambodian university students (Ngin et al., 2018)

Low socio-economic Poor academic Consumption of Physical violence, psychological accomplishment unhealthy food Physical violence, psychological abuse during childhood

 Key factors associated with a reduced likelihood of depression (Seidler et al., 2017), (Fujiwara & Kawachi, 2008), (Fahmil et al., 2019).

High-quality social connection with friends and family members

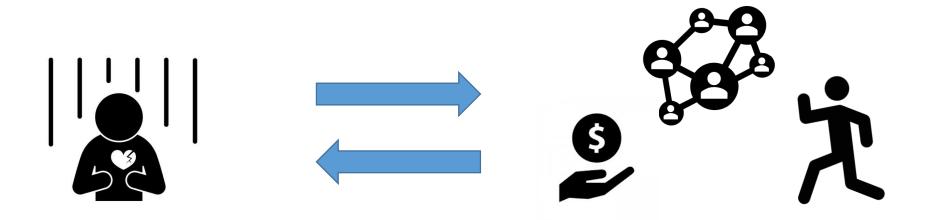
social trust (trust of neighbors)

How do university students perceive social support and trust around them? Is that related to their mental health?

Lack of research on the association between mental health and social support and trust in Cambodia

Objectives

- 1. To clarify the association between mental health and socioeconomic status, health and safety behaviors, social support, and trust among university students in Cambodia
- 1. To obtain insights into mental health support in university



Method

Study design: cross-sectional study

Self-admi	inistered questionnaire survey
Sample	4 th year university students in Phnom Penh and Battambang
Date	May to June 2022
	 Socio-demographic status (Age, Gender, Marital status, Living situation, Hometown, Self-assessment of the economic situation)
	 Mental health: Thinking too much, Self-rated mental health
Items	 Health behaviors: Consumption of fast food, Having breakfast, Physical activity habits, etc.
	 Safety behaviors: Drinking alcohol, Smoking
	Self-rated academic performance
	Social support and trust: Close people, Generalized trust, Warm and trusting relationship
*Questionn	aire was translated to Khmer language.

Method

Statistical analyses

1) Descriptive statistics

2) Multiple regression analysis

◆Dependent variable

-Thinking too much, Self-rated Mental Health

- Independent variable
 - -Socio-demographic status
 - -Health behaviors
 - -Safety behaviors
 - -Self-rated academic performance

*IBM SPSS Statistics, Version 29 *The significance level was set at 5%

*Ethical Approval of this study was obtained from Tokyo Gakugei University (registered number: 555)

Each question is scored on a scale of 1 to 5.
 Higher scale has bad mental health status.

Results

1. Characteristics of the study population

Variables	Category	n	%
	20	7	2.4
	21	46	15.9
A = -	22	99	34.1
Age	23	52	17.9
	24	35	12.1
	25 or older	51	17.6
	Male	102	35.2
Sex	Female	188	64.8
	Single	272	93.8
Marital status	Married/Cohabiting	18	6.2
	Alone	5	1.7
Living situation	Not alone	285	98.3
llemeteure	Urban	163	56.2
Hometown	Rural	127	43.8
	Quite poor	27	9.3
	Not very well-off	84	29.0
Self-assessment of	Moderate	166	57.2
economic situation	Well-off	12	4.1
	Very well-off	0	0.0
	Non-response	1	0.3

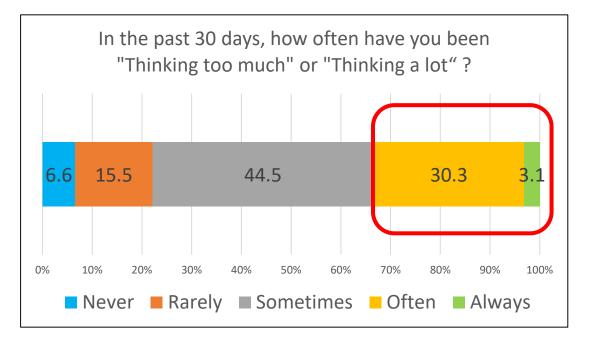
Data from 290 participants (95.1%) were obtained.

>98.3% of students live together with others (parents, friends, siblings, etc.).

>38.3% of students evaluated their economic situation as "Quite poor" or "Not very well-off".

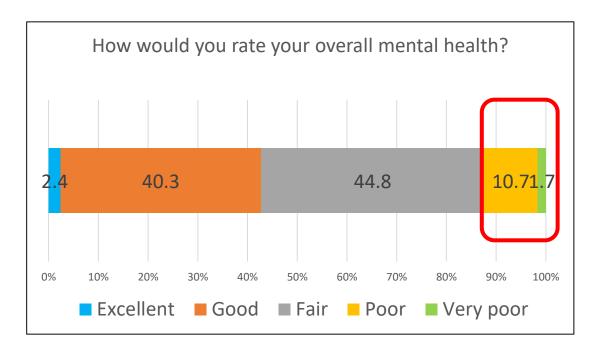
2. Mental health

1) Thinking too much



>33.4% of students were "often" or "always" thinking too much in the past 30 days.

2) Self-rated Mental Health



➤12.4% of students evaluated their mental health as "poor" or "very poor".

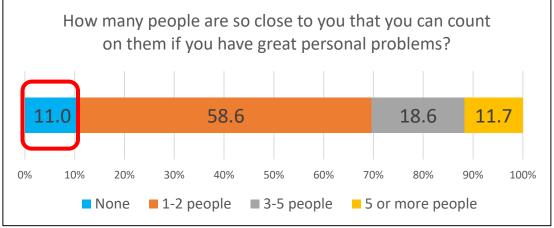
3. Health behaviors

4. Safety behaviors

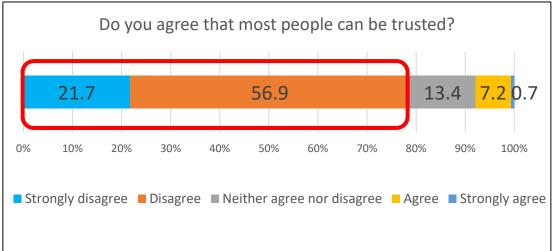
	variables	category	%		variables	category	%	-	
		Never or less than once in the past 30 days	16.6			Nondrinker 0 day	60.3 27.6	88%	
		1-3 days a month	29.7		Drinking Alcohol in the past 30 days	1-2 days per week	10.0		
		1 day per week	7.9			3-5 days per week	1.4		
	Fast food consumption	2 days per week	11.0			6-7 days per week	0.7		
	in the past 30 days	3 days per week	11.7	Cofoty		0 day	98.6]	
		4 days per week	7.9	Safety behaviors		1-2 days	0.3	-	
		5 days per week	5.9 23%	Denaviors		3-5 days	0.3		
		6 days per week	2.8		Smoking in the past 30 days	6-9 days	0.0		
		Everyday	6.6			10-19 days	0.0		
	Having breakfast in the past 30 days	Never	1.7			20-29 days	0.0		
Health		Less than once a week	^{3.4} 29%			All 30 days	0.0		
behaviors		Once a week	2.1			Non-response	0.7		
Dellaviors		2-4 days a week	21.7						
		5-6 days a week	24.8						
		Everyday	45.9		4 I I				
		Non-response	0.3	5. Self-	elf-rated academic performance				
		0 day	6.2			•			
		1 day	16.6 12 4 51%		variables	catagony	%	_	
	Physical activity days	2 days	12.4 51 /0		Variables	category			
	(a total of more than	3 days	15.9			Very poor	0.3	3%	
	60minutes per day)	4 days	10.7			Poor	2.8		
	in the past 7days	5 days	9.3	self-rated a	academic performance	Fair	52.1		
		6 days	10.0			Good	42.4		
		7 days	19.0			Excellent	2.4	_	

6. Social Support and Trust

1) Number of close people



3) Generalized trust



2) Warm and trusting relationship



≫37.2% of students have a warm and trusting relationship "never" or "less than once or twice a month".

≻78.6% of students disagree that most people can be trusted.

7. Factors associated with Mental Health

1) Health behaviors

indonondontvoriables		Thinking t	oo much ¹⁾		Self-rated mental health				
independent variables	В	95% CI		P value	В	95% CI		P value	
Fast food consumption	0.07	0.02	0.11	<0.01	0.03	-0.01	0.06	0.14	
Having breakfast	-0.12	-0.21	-0.03	0.01	-0.05	-0.12	0.03	0.23	
Physical activity days	0.01	-0.04	0.05	0.69	0.00	-0.04	0.04	0.94	

¹⁾Omnibus test X²=35.447, df=11, p<0.001

-Non significant relationships

3) Self-rated academic performance

independent variables		Thinking	too much		Self-rated mental health ¹⁾			
	В	95% CI		P value	В	95% CI		P value
Self-rated academic performance	-0.07	-0.24	0.10	0.42	-0.47	-0.60	-0.34	<.001

¹⁾Omnibus test X²=56.226, df=9, p<0.001

*Control variables: Age, Sex, Hometown, Financial Status

7. Factors associated with Mental Health

4) Social support and trust

independent variables		Thinking	too much		Self-rated mental health ¹⁾			
	В	95% CI		P value	В	95% CI		P value
Close people	-0.04	-0.18	0.10	0.57	-0.07	-0.19	0.04	0.22
Warm and trusting relationship	-0.02	-0.10	0.06	0.62	-0.09	-0.16	-0.03	0.01
Generalized trust	0.08	-0.05	0.21	0.21	0.04	-0.69	0.14	0.50

¹⁾Omnibus test X²=24.193, df=11, p=0.012

*Control variables: Age, Sex, Hometown, Financial Status

7. Factors associated with Mental Health (in the final model)

Factors asso	ciated with '	Factors associat	ted with "Se	lf-rated i	mental he	ealth"			
Variables	В	95%	% CI	P values	Variables	В	95% CI		P values
Age					Age				
20	0.30	-0.38	0.99	0.39	20	0.56	0.02	1.11	0.04
21	0.46	0.10	0.81	0.01	21	0.32	0.04	0.60	0.03
22	0.22	-0.08	0.53	0.15	22	0.16	-0.08	0.41	0.19
23	0.13	-0.21	0.48	0.45	23	0.10	-0.17	0.36	0.48
					24	0.53	0.23	0.82	<.001
24	0.11	-0.26	0.49	0.56	25 years old or older	Reference			
25 years old or older	Reference				Sex				
Sex					Male	0.03	-0.14	0.20	0.72
Male	-0.13	-0.35	0.09	0.24	Female	Reference			
Female	Reference				Hometown				
Hometown					Urban	0.08	-0.09	0.24	0.35
Urban	0.17	-0.04	0.38	0.11	Rural	Reference			
Rural	Reference	0.01	0.00	0.11	Financial status	-0.12	-0.24	-0.004	0.04
Financial status		0.20	0.00	10.01	Self-rated academic				
	-0.23	-0.38	-0.08	<0.01	performance	-0.45	-0.58	-0.32	<.001
Fast food consumption	0.06	0.02	0.11	<0.01	Warm and trusting				
Having breakfast	-0.12	-0.20	-0.03	0.01	relationship	-0.08	-0.14	-0.02	0.01
$0 + 1^{1} + 1 + 1 + 1^{2} = 20^{10}$		~~~							

Omnibus test X²=35.287, df=10, p<0.001

Omnibus test X²=63.519, df=10, p<0.001

Discussion

> Factors associated with mental health problems(thinking too much, self-rated mental health)



Same as the previous research

- ≻70% of students say they have less than 2 people who are so close to them. The 2 universities in this research do not have a lot of leisure activities such as sports and culture clubs for students.
- This may make students have less opportunities to develop relationships with others. Feeling lonely is associated with an increased risk of certain mental health problems.

≻It is important to support

-building a foundation for daily life (adequate financial situation, healthy dietary habits) -for students with poor grade

-making an opportunity for students to have social interaction each other ¹⁵

Discussion

>7.9% of students agree that most people can be trusted.

Previous research shows median of 53% of adults (18 to 29) generally believe most people can be trusted in 14 developed countries (Pew research center, 2020).

Trust in other people among Cambodian university students is relatively low.

≻Negative effect of the civil war

- -People were constantly spied day and night.
- -It was necessary to hidden one's own identity to survive.
- -Current education from the family: not to share the personal things to others.

Further studies are needed to explore the factors regarding social support and trust in order to think about how to promote mental health care services in the school.

Limitations

➤Sampling bias

Sample: 4th-year students from two universities

≻Limited variables

Mental health: thinking too much, self-rated mental health

Social support and trust:

Generalized trust, excluding the trust by category such as parents, friends, etc.

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