

Chapter 63

Mental Health, Post–Secondary Education, and Information Communications Technology

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ABSTRACT

The primary aim of this chapter is to explore the use of information and communications technology (ICT) in post-secondary education to provide opportunities for students with mental health difficulties to remain engaged in their studies during times of mental illness. Higher incompleteness rates are particularly concerning amongst this group. The authors discuss how improved outcomes can be achieved through effective use of ICT. This is particularly important from a human rights perspective so that people diagnosed with mental illness are afforded the same opportunities as other members of the community. Strategies afforded by ICT tools that are essential for supporting students with mental illness to optimise their chances of success in their post-secondary education outcomes are outlined. The authors combine mental health and human-computer interaction (HCI) to argue for the need to design appropriate instructional ICT strategies to support students experiencing mental illness to remain engaged with their studies. ICT has evolved with powerful and unique features, offering special applications such as educational software, eCommerce, and healthcare. Yet, very little is being said about how to streamline these applications as effective HCI environments to enhance mental health and wellbeing. The chapter explores the positive and negative impact of ICT tools on teaching and learning. In considering mental health and post-secondary education, it focuses on human rights issues of access and equity, disclosure, and stigma. Authors suggest that ICT can enable students to remain engaged with their learning in general, while at the same time promote a deep sense of community.

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INTRODUCTION

All persons with a mental illness, or who are being treated as such persons, shall be treated with humanity and respect for the inherent dignity of the human person... There shall be no discrimination on the grounds of mental illness. UN Principles for the Protection of Persons with Mental Illness GA Resolution 46/119 of 17 December 1991.

People with mental illness are vulnerable to human rights violations in both hospital and community settings. Around the world people experience discrimination due to mental illness that results in the curtailment of opportunities in all aspects of life; most notably in education, employment and housing. The severity and high levels of disability associated with mental illness have led to increased global efforts to address mental health problems, in particular those targeted at prevention. In recent years mental health and wellbeing have been identified as priority areas by the World Health Organisation, the World Bank and government leaders' worldwide (Knapp et al., 2007). This is within the context of a severe shortage of resources, particularly in low and middle income countries (WHO, 2009). Mental health problems have been predicted to be the largest single burden of illness globally within the next two decades (Mathers and Loncar, 2006). Mental health difficulties affect all range of people regardless of age, gender, religion or race, however first onset has been found to be most prevalent in young people. Three quarters of those who develop mental illness, do so between the ages of 16 and 25, an age when most young people are likely to embark on post-secondary education and training programs (McGivern et al. 2003; McLean & Andrews, 1999). This chapter explores the human rights of people diagnosed with mental illness in relation to access and equity issues encountered in post secondary education. A main focus is on how Information Communication Technologies can both assist and hinder

the recovery process. First mental health, post secondary education and the service delivery context are considered. This is followed by a discussion of the stigma associated with mental illness and the human rights violations that occur through discrimination and disadvantage. A case study reports on research that examined the mental health and well being of students enrolled at a university in Melbourne, Australia and the role of ICT educational tools.

MENTAL HEALTH AND HIGHER EDUCATION

Many individuals who experience mental health difficulties want to undertake postsecondary education (Shankar et al., 2009; Mansbach-Kleinfeld et al., 2007). This aspiration is supported in Conventions, legislation, standards and policies on disability, education and mental health. Australia ratified the United Nations Convention on the Rights of Persons with Disabilities on 17 July 2008. As a result Australia is now one of the 149 signatories to this Convention worldwide. The Convention establishes a legally binding standard that recognizes people with disabilities, including mental illness, as equal and active citizens. This Convention, (in particular Article 4 on Education), requires States to recognise the rights of people with a disability to 'an inclusive education and lifelong learning that will enable them to realise their potential'. Accordingly all people are to be provided with opportunities to reach their full potential, regardless of their disability. A focus of the Convention is on the protection and violation of human rights and how to support people with a disability exercise their rights. In Australia this Convention is supported in Commonwealth legislation in the Disability Discrimination Act 1992, Disability Standards for Education 2005, Australian Vice-Chancellor's Committee Guidelines for Students with a Disability 2006 as well as State mental health legislation and policy.

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