



Assessing the Influence of Mental Health Education on Students' Learning Behaviour in Public Secondary Schools in Temeke Municipality

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Abstract : The study aimed to assess provision of mental health education as an intervention influence learning behaviour among students in secondary schools in Temeke Municipality. This study was guided by the Ecological Systems Theory by Urie Bronfenbrenner in 1979. A convergent parallel research design was employed in this study, where both quantitative and qualitative data were collected through closed-ended questionnaires and an interview guide, respectively. The study sample size was 114 respondents (4 heads of school, 4 school counsellors, 19 teachers, and 87 form four students). Quantitative data collected through closed-ended questionnaires were analyzed by descriptive statistics techniques into percentages and frequency distribution and presented in charts and tables. Qualitative data collected from semi-structured interviews were thematically analyzed. Generally, heads of schools, teachers, and school counsellors reported that learners who are provided with mental health education demonstrate active participation in the class, they increase their level of confidence and show improvement in coping mechanisms for depression or stress, which is translated into classroom engagement. However, respondents uncovered challenges they experience when implementing mental health education, including the absence of sufficient training, limited access to relevant teaching materials, large class size, limited time, and negative cultural beliefs.. The study recommended that the ministry of education should incorporate mental health education into the formal curriculum as part of secondary school subjects to be taught in schools there should be an introduction of a formal subject related to mental health education, efforts should be made to reduce the level of student-teacher ratio, and in-service training should be implemented for teachers for professional development.

Keyword : Leadership styles; Teachers' professionalism; Democratic leadership; Autocratic leadership; Transformational leadership

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INTRODUCTION

Mental health among students has emerged as one of the critical global health priorities, alarming a significant public health challenges that affect tens of thousands of youth/adolescence worldwide. World Health Organization (WHO) reports that, adolescence age between 10 to 19 is a vulnerable developmental period characterized by rapid identity formation, biological change and increase social and academic demands (WHO, 2021). It is estimated that 1 in 7 among 10 - 19 age group is experiencing a mental disorder, with depression, anxiety disorder and behavioural issues (Polanczyk, 2015). Polanczyk added that, the stress associated with transition to adulthood, high-stake academic examinations, cyber bullying, peer-pressure and family conflict often rapid these conditions. Globally, the response to students' behavioural problems has been multifaceted, with several states adopting preventive measures. OECD (2021) highlights that several countries, such as Canada, the USA, and many European states, have introduced programs to promote positive behaviour in schools. These programs emphasize early interventions, mental support, and the creation of positive school culture (Troy et al, 2022). However, the widespread nature of behavioural issues in the education system suggests that many challenges remain unsolved, especially in underfunded countries that are experiencing socio-political challenges (Naqvi et al, 2025). As a result, addressing behavioural issues is now seen as a priority for policy makers seeking to ensure that every learner has an opportunity to achieve personally and academically (Freeman et al, 2019). In Europe, students' behaviour

has been an ongoing challenge, especially in countries with a diverse socio-economic landscape (Adeniyi et al, 2024). Finland, for example, is widely known for its effective education system, which places a strong emphasis on student wellbeing and behaviour management (Salmela-Aro, 2022).

Tanzania is one of the African states that experiences student misconduct practices in schools, as Nguvumali (2020) describes those improper behaviours such as truancy, absenteeism, and bullying. According to Mwakabala and Mtaita (2018), socio-economic factors like poverty and family instability are one of the contributing factors that increase the level of students' misbehaviour. Makalaba continues by asserting that learners in urban areas such as Dar es Salaam are the most vulnerable group that is affected by behavioural problems. The Ministry of Education and Vocational Training in Tanzania has made several efforts to rectify the situation; however, the problem still persists (URT, 2014).

The government of Tanzania has recognized the merits of addressing learners' behaviours through formulating policies that aim to improve the quality of teaching and learning processes (URT, 2014). Education policy emphasizes a holistic approach to education, including mental health education issues. Despite the presence of the policy, its implementation is neither consistent nor effective. However, local studies show that while the policy exists, its implementation is often inconsistent, particularly in rural areas where resources are limited (Nguvumali, 2020).

The integration of life skills and mental health education into the school curriculum remains limited, hindered by a

shortage of trained teachers, insufficient teaching resources, and minimal focus on mental health content. Many schools lack structured guidance and counselling services, leaving students vulnerable to stress, anxiety, and unresolved social issues (UNESCO, 2022). These challenges are compounded by socio-economic difficulties, family instability, and unregulated exposure to digital content, all of which contribute to declining learning behaviour among students. If left unaddressed, such issues may lead to disengagement from school, increased dropout rates, and broader implications for national development.

While existing research acknowledges the relationship between mental health and academic outcomes, there remains a significant gap in understanding how direct integration of mental health education within the school system influences students' learning behaviours. Therefore, this study aimed to examine the extent and impact of mental health education on students' learning behaviour in public secondary schools in Temeke Municipality, Dar es Salaam, Tanzania.

LITERATURE REVIEW

Ecological System Theory (EST)

This study was guided by the Ecological Systems Theory by Urie Bronfenbrenner in 1979. The theory views human development as the result of interaction between the individual and complex layers of the environment known as environmental layers. The layers, according to the theory, include micro-system, meso-system, exo-system, macro-system, and chrono-system. The theory explains that implementation of mental health education is regarded as a complex

practice; therefore, this theory helped to understand how implementation of mental health education in schools is influenced by different factors such as student-teacher relationship, cultural beliefs, school environment, teaching and learning resources, and school leadership. The theory guides the researcher to analyze the provision of mental health education within the context of relationships that form the environment. According to the theory guide, each layer has an impact on the learning behaviour of a student. The theory has dire implications for the practice of implementation of mental health education. Therefore, this theory is relevant to this study as it provides a framework to predict desirable outcomes. It helped the researcher to identify the existing relationship between mental health education and learners' behavior and understand the challenges to effective implementation of the mental health education in schools.

However, the theory has limitations since it is difficult to separate individual effects over each layer of the environmental system.

Empirical Literature Review

Dumbuya (2024) conducted a study about the integration of mental health support in secondary school curriculum in Sub-Saharan Africa. The study used a descriptive design with a sample size of 55 respondents. A survey method was used to collect data. Findings showed that there are various obstacles to the implementation of mental health education. The study identified the obstacles, including policy gaps, resource constraints, and societal stigma, which hinder integration into school curriculum despite its importance to adolescent well-being and academic

performance. However, promoting community involvement, leveraging technology, and building on successful localized interventions are among the opportunities that exist in resolving existing challenges. The study concluded that there is underutilization of strategies in enhancing students' learning and participation. It also concluded that integration of mental health in the school curriculum remains a feasible aspect. The study recommended that educators, community stakeholders, and makers should work together to establish comprehensive and applicable policy, provide training, and promote environments that prioritize mental health education among youth through integrating it into the curriculum.

Casale and Reyes (2023) assessed how an integrated model for school-based mental health is implemented within an inclusive education setting. A qualitative approach was employed to collect qualitative data from stakeholders through interviews and document review. The study examined the delivery of mental health education. The findings show that challenges emanating from mental health have a huge impact on students' academic performance, classroom behavior, and emotional regulation. It was found that students in inclusive schools, especially those with disabilities, were at great risk of suffering from mental health issues. It is concluded from the study that it is time now for the government to consider mental health education as a core aspect to be taught in schools, especially in inclusive schools, to promote learners' participation and positive learning outcomes. It is recommended that teachers in special education schools should be trained to acquire necessary mental health skills so as

to be able to assess and respond effectively when mental health issues arise. The study recommended the use of an Evidence-based intervention approach to assist learners who experienced emotional challenges. Integrating mental health education into the formal curriculum has been considered the best solution to create schools with learners who are self-aware, creative, and able to cope with different emotional situations.

In agreement with Casale and Reyes (2023), Costa (2024) conducted a study to investigate the integration of mental health education in secondary schools in Uganda. Interview and questionnaire methods were used to collect data from 54 respondents. SPSS version 22 was employed to analyze data from youth who were questioned to share their experience of mental health challenges. The study findings indicated that students' participation has increased in schools after mental health topics have been embedded into the school curriculum. Mental health conversations have improved, and students' awareness has prevailed, giving students the ability to speak and understand themselves. The partnerships between mental health professionals, teachers, parents, and students have been identified as key mechanisms that improve learners' engagement and classroom interaction. Other strategies, according to the study findings, were teacher training and student-led awareness campaigns. It was concluded that strengthening capacity building for teachers and fostering community partnerships is the best way to sustain the effective implementation of mental health education. The study recommended that education stakeholders should be effectively involved in financing and provide material support in schools for

better implementation of the program. However, the study failed to identify school environmental challenges, such as the presence of enough classrooms and overcrowded classes, and their effect on the effective implementation of mental health education.

Jabbarove *et al* (2024) recommended that schools should foster emotional regulation skills among students, self-awareness, and creativity through classroom-based mental health interventions to boost learners' engagement.

Additionally, in Pakistan, a study was conducted by Zada *et al* (2021) to explore mental health challenges and their influence on academic performance. The study involved 540 participants from Pakistan University. Questionnaires were administered to students, and data were analyzed by descriptive and inferential statistics. It was indicated that there is a positive relationship between good mental health and academic improvement. According to the findings, a mental health disorder prevents learning and participation. It was concluded that the emotional stability of students is greatly attributed to addressing mental health in society and school in particular. Recommendations based on the study findings suggested that awareness about mental health among parents, teachers, and students should be promoted. In the same vein, Wignall (2021) examined the influence of a whole-school mental health program on students' wellbeing. The study was purely qualitative, and data were collected from teaching staff through semi-structured interviews across five schools. Findings showed that when there is strong school leadership and constant support, students' well-being is improved. The

study recommended the establishment of a strong school culture that enhances leadership commitment, which will foster student emotional well-being. The study is purely qualitative, hence it is difficult to generalize the findings. This study, therefore, employed a mixed approach. The study employed only a single method of data collection, which endangered the validity of the research findings; this study used multiple methods of data collection.

Robinson (2024) conducted a study in Canada to assess increasing mental health challenges among students in secondary schools. It was found that lack of confidence, access to resources, and training are among the challenges facing mental health programs in schools. Unpreparedness of teachers led some teachers to avoid engaging in counselling students. If teachers fail to play their role in monitoring and counselling students, it limits emotional support and affects students academically, socially, and emotionally. When teachers are trained in the field of psychology, they become competent and perform better during counselling sessions. The study recommended that schools, as an institution, establish strategies that will equip teachers with the necessary psychological skills so that they can perform their duties professionally.

Similar to that, Rahmi (2024) made a comprehensive literature review to find out the significance of mental health and well-being in schools within the Indonesian education system. Teachers are facing emotional challenges such as stress, burnout, and emotional exhaustion, which directly affect teachers' ability to deal with students' emotional challenges. If teachers are emotionally affected, their performance is affected too. Shortage of funds and

inadequate training in psychological care are among the challenges addressed by the study conducted by Lymo et al (2024) exploring opportunities and challenges in providing counselling services among students in secondary schools in Tanzania. The study employed qualitative methods to collect qualitative data from school counsellors and students using interviews and focus group discussions. Study indicated that teachers experienced overwhelming due to a high counselor-student ratio, which affects teacher efficiency. Systematic limitations led to the underutilization of mental health education. Lymo et al (2024) suggested strengthening capacity-building programs for teachers and counselors and regular need assessment to support effective implementation of mental health education in schools.

Moreover, Lubawa (2021) investigated the effect of guidance and counseling services on students' academic performance in secondary schools in Tanga, Tanzania. The study sample was 423 respondents, including guidance counselors, teachers, heads of schools, and educational officers. The study used a mixed approach combining case study and correlation design; interviews and questionnaires were used to collect data from the respondents. It was revealed that there are schools to implement Circular No. 11 of 2002 about guidance and counseling practices in schools due to prevailing challenges, including a shortage of facilities and necessary resources. It was also found that school guidance and counseling have improved students' academic performance and their holistic development. The study recommended policy formulation to strengthen guidance and counseling in schools and to ensure

students are actively participating in guidance and counseling practices through integrating mental health education in school activities inside and outside classrooms. The study did little analysis of challenges facing the provision of mental health education. This study examined more challenges, including socio-cultural differences, school environment, and teachers' training.

Boitumelo & Mziwakhe (2023) put forward solutions to overcome these challenges; enough funds should be directed to the school to finance necessary inputs, and the establishment of a strong school-community relationship to support students' participation. Among the weaknesses of the study is the generalization. Since the study was conducted in South Africa, it is difficult to generalize the findings in the Tanzanian context since policy, school structure, and cultural values differ. Therefore, this study filled such a gap by conducting an investigation into the influence of mental health education on students' learning behavior in Temeke, Dar es Salaam, Tanzania.

Also, Kutcher et al (2016) investigated the effect of mental health literacy curriculum training approach on Tanzania secondary schools. A quasi-experimental design was used to find out the effectiveness of the culturally adopted African Guide curriculum (AGC) in school. Teachers and students were examined before and after the introduction of the AGC. Results from the study showed that teachers felt more confident in identifying and referring learners with mental health challenges. There is an improvement in general and curriculum-specific mental health, and students are actively seeking help. In summary, the reviewed studies

emphasize that a major challenge in implementing mental health education lies in the inadequate preparation and support of teachers. Barriers such as lack of training, limited resources, stigma, emotional burnout, and policy gaps hinder teachers' ability to confidently engage with student mental health needs. These limitations affect students' participation, learning motivation, and academic progress. To overcome these challenges, the studies recommend comprehensive mental health literacy training, institutional support, peer and professional collaboration, and policy integration, all aimed at empowering teachers to serve not only as educators but as mental health allies within the school community.

METHODOLOGY

The study employed mixed research approach, using convergent parallel design. The study was conducted in Temeke Municipality, Dar es Salaam. Simple random and purposive sampling were applied to obtain samples. Study participants included heads of schools, school counselors, teachers and form four students. Data was collected through interview, questionnaires, and documents review methods. Qualitative data collected from an interview were analyzed through thematic analysis, descriptive statistics method was employed to analyze quantitative data.

RESULTS AND DISCUSSION

The presentation, discussion, and interpretation of the research findings were presented on the basis of the research objectives.

The Integration of Mental Health Education into Students' Learning Behaviour.

Table 1.
Teachers' Results on the Integration of Mental Health Education into Students' Learning Behaviour

		Strongly Disagree		Disagree		Neutral		Agree		Strongly Agree	
		f	%	f	%	f	%	f	%	f	%
i	Mental health education is well-integrated into the current school curriculum.	-	-	-	-	-	-	1	57	0	42
								1	.9	8	.1
ii	I include mental health-related topics during my lessons when appropriate.	-	-	-	-	-	-	0	36	1	63
								7	.8	2	.2
ii	Our school provides sufficient resources to support mental health education	0	2	1	73			0	5.		
		4	1	4	.7			1	3		
iv	Mental health education has positively influenced students' participation in class.	-	-	-		0	15	9	47	0	36
						3	.8		.4	7	.9

Table 1. presents teachers' results on the contribution of integrating mental health education to students' learning behaviour. The researcher was interested in finding out if mental health education is well-integrated into the current school curriculum. It was found that 57.9 percent

of teachers agreed that mental health education is well integrated into the school curriculum. It means mental health education has become part of the teaching and learning process, and teachers use official subjects to integrate aspects related to mental health education, such as peer pressure control and coping with emotional skills.

This finding concurred with teachers who were asked how mental health education is incorporated into the lesson activities. One teacher said,

“When I am teaching life skills concepts in my Civics subject, I integrate mental health aspects. But also, during extra-curricular activities such as morning speech, some students present their topics related to self-awareness, hard work, and friendship”. (Interview with Teacher 1: July 2025)

The quote above imply that teachers recognize that mental health education is systematically incorporated into the curriculum. This suggests a structured and institutional commitment toward mental well-being, indicating that topics on emotional and psychological wellness are embedded in learning activities, particularly in extra-curricular activities such as drama, morning speech, school parade, and sports. The finding also revealed that more than half of the respondents (63.2%) agreed that they include mental health-related topics in the class. This means that when teachers are actively embedding mental health concepts into subject content, it helps in supporting students' social and academic well-being. It was also observed that there is a resource insufficiency for teachers who support mental health education, as 73.7 percent of teachers disagreed that the

school provides sufficient resources to support mental health education. This implies that a shortage of teaching resources, such as guidance and counselling books, media like computers and television, prevents teachers from improving themselves and becoming competent in the counselling process, which later can undermine effectiveness. Kutcher et al. (2015) emphasize that the successful implementation of school-based mental health programs requires adequate teacher training, instructional materials, and institutional support.

It was observed from responses in the questionnaires that there is a direct impact of mental health education on students' participation in the teaching and learning process in the classroom, as all teachers (19) agreed with the statement that mental health education has positively influenced students' participation in the classroom by 100 percent. This means that when students were exposed to mental health awareness and provided with counselling tips, the level of confidence increased, and they actively participated in academic activities. Durlak et al (2011) explain a similar argument that socio-emotional and mental health teaching in schools increases classroom engagement and academic motivation by improving learners' interpersonal skills and emotional regulation.

Table 2.
Students' Responses to the Integration of Mental Health Education into their Learning Behaviour

		Strongly Disagree		Disagree		Neutral		Agree		Strongly Agree	
		f	%	f	%	f	%	f	%	f	%
i	Our teachers include mental health topics during lessons.	-	-	0	2.2	-	-	8	92.0	0	5.7
ii	I understand how mental health affects my learning and performance at school.	-	-	-	-	-	-	0	10.9	7	89.7
ii	i I feel that learning about mental health has helped me behave better in class.	-	-	-	-	-	-	8	96.4	0	3.4
i	v I am motivated to attend school after being counselled about mental well-being.	-	-	0	4.4	-	-	6	75.6	1	19.7

Table 2 shows that mental health topics are included in the lesson during the teaching and learning process. This is shown by 92 percent of students who agreed that teachers include mental health topics during lessons. This means that there is a level of recognition among students about the integration of mental health education in the class during teaching and learning activities. Such integration supports students' engagement and emotional literacy. Mental health conversations during everyday classroom

lessons have become a normal practice, though it is not formal.

Table 2 indicated that 96.9 percent of respondents agreed that learning about mental health helps to behave better in the classroom. This implies that learning about self-regulation, emotion, and interpersonal skills enables students to control disruptive behaviour and participate more actively. This finding is aligned with Greenberg et al (2003), who purport that there is an improvement in students' behaviour, cooperation, and classroom conduct when a social-emotional and mental health education program is introduced to learners.

Moreover, it was found that 75.9 percent of students agreed that after being taught about mental health education, they feel more motivated to attend school. It is believed that when students receive mental health education, it tends to increase students' school motivation because the level of anxiety or stress related to school is minimized, resulting in an increased level of school attendance.

However, the study unveiled that there is no supportive environment that allows open discussion about mental health challenges. The study result showed that 81.6 percent of students disagreed with the statement that the school environment supports open discussion about mental health challenges. School environment, such as the size of the classroom, presence of classroom furniture, and classroom management, as well as extra-curricular activities, are very significant toward achieving the provision of mental health education (Clement et al. 2015).

In the interview with heads of schools, school counsellors, and teachers had different views concerning integrating

mental health education and its influence on students' learning behaviour. Heads of schools were asked how a school ensures that mental health education is part of the curriculum or co-curricular activities.

One of the heads of school (HoS) was quoted as saying:

Most teachers integrate mental health issues into their extra-curricular activities and life skill classes. Also, students engage in discussion during a debate or a counselling session with their guidance and counselling teacher. Teachers normally tell students about life, proper behaviour, and emotional well-being. (HoS 1, July 2025)

Moreover, heads of schools were asked whether they have seen any improvement in classroom participation among students who are aware of or engaged in mental health-related programs. One head of school (HoS) said,

Of course, changes have been observed in students, especially in the area of interaction with their peers. I have noticed an improvement in students interacting with teachers and their peers during discussion and other activities outside the classroom (Interview: HoS: July 2025)

The students' counsellors were asked to explain how mental health education is incorporated into schools' guidance and counselling programs, and one school counsellor replied:

There is good cooperation among us teachers to identify students who may need counselling support and to provide counselling to students. Also, through student-student interaction, where they share their emotional challenges and support each

other, which becomes part of their peer support group. (Students' Counsellor, July 2025)

Teachers were also interviewed by asking them, How is mental health education incorporated into the lessons or activities you teach?

One teacher was quoted responding,

"Always encourage my students to speak and share what they feel about learning, school life, and their challenges as part of the discussion. This promotes emotional awareness and motivates other students to develop confidence." (Interview Teacher 4, July 2025)

The findings imply that the integration of mental health education appears to positively influence students' academic motivation and engagement.

Teachers were also interviewed to share their views on the extent to which mental health education influences students' classroom behaviour. One teacher said,

"When students understand mental health, they become supportive and empathetic to their fellow students". (Teacher: July 2025)

These responses indicated that mental health education is partially integrated into the school curriculum, mostly through guidance and counselling programs, extra-curricular activities such as sports, and morning parade. Scholars such as Kutcher, Wei, and Coniglio (2016) and Greenberg et al. (2003) have the same arguments as they describe that mental health literacy programs integrated into school curricula improve students'

awareness and positively impact their academic engagement.

Effect of Mental Health Education on Active Learning and Participation

Table 3
Results from Questionnaires Distributed to Teachers on the Effect of Mental Health Education on Active Learning and Participation

		Strongly Disagree		Disagree		Neutral		Agree		Strongly Agree	
		f	%	f	%	f	%	f	%	f	%
i	Students participate more actively in lessons when mental health issues are openly discussed.	-	-	2	10.5	2	10.5	1	78.9	-	-
ii	Integrating mental health education has led to improved student-teacher interaction.	-	-	0	10.5	-	-	1	84.2	0	5.3
ii	Learners demonstrate more focus and engagement after receiving mental health guidance.	-	-	0	5.3	-	-	1	84.2	0	26.3

The study was interested in knowing if students participate more actively in lessons when mental health issues are openly discussed. Findings from Table 3 indicated that 78.9 percent of the respondents agreed that there is active

participation of students in classrooms when mental health issues are discussed. This indicates that students feel more comfortable and confident when mental health is treated as a normal part of education. Open dialogue reduces stigma and encourages learners to express themselves, ask questions, and interact freely, but also may promote deeper learning and classroom engagement. This finding is in line with Barry et al. (2013), who describe those open discussions about mental health as fostering emotional safety and increasing students' willingness to participate in learning activities.

The study examined how student-teacher interaction has been improved when mental health education is integrated into teaching and learning activities. Findings from Table 3 show that 84.2 percent of teachers agreed with the statement that integrating mental health education has led to improved student-teacher interaction.

During the interview, teachers were asked to state effective teaching approaches they are using in the class that promote students' participation. One teacher commented,

"Interactive activities like role-playing help students understand and manage emotions." (Teacher 3, July 2025).

In addition, the interaction enhances collaborative skills through social-emotional learning frameworks, which are often part of mental health education (CASEL, 2013)

Furthermore, teachers were asked to state whether learners demonstrate more focus and engagement after receiving mental health guidance inside and outside the classroom. The findings revealed that

13 (84.2%) of respondents indicated that students are more engaged and focused after receiving mental health guidance inside and outside the classroom. The finding reflects a strong perception among teachers that mental health education positively affects students' participation.

School counsellors were interviewed to find out whether any notable changes had been observed in students after receiving mental health support.

One school counsellor explained,

"Yes, students who have received this mental health education show increased confidence and are more willing to contribute during lessons." (Student counsellor: July 2025)

Findings imply that there are notable improvements in how students concentrate and participate in class after being exposed to mental health guidance. Jones and Kahn (2017) highlight that, when mental health is supported in schools, students demonstrate better attention reduced disruptive behaviour, and higher academic motivation.

In the interview, teachers explained that students become active in participating in discussions in the class.

Teachers stated,

"Yes, students are more open and willing to share their thoughts during discussions." (Teacher 1, July 2025).

Another teacher commented,

"They ask more questions and seek clarification without fear of judgment." (Teacher 2, July 2025).

Meanwhile, the findings align with findings that mental health awareness improves student participation (Education for Wellbeing, 2024). In relation to the theory under study, this finding is in line with the meso-system under EST, which argues that the collaboration between students and teachers, as well as students themselves, improves learning participation.

Moreover, students' responses agreed that the mental health lesson has helped students to focus and be motivated in the classroom. Results indicated that 59.8% agreed on the statement that mental health lessons help students to stay focused. Students associate mental health education with improved concentration and academic drive. Understanding and managing emotions may help students avoid distractions, reduce stress, and stay engaged in learning tasks.

School counsellors were interviewed to seek their opinions, and the question was: how does the inclusion of mental health content in the school curriculum influence students' active participation and focus in their academic activities?

One student counsellor was quoted,

"Students become more self-aware and better equipped to handle academic stress, which enhances their focus and participation in class. (Student Counsellor, July 2025)

These responses from teachers, heads of schools, and school counsellors indicated that teaching students about mental health and stress management acts as an academic driving force. The findings were tallied with a study conducted by Suldo, Friedrich, and Michalowski (2009), who argue that students with better mental

health tend to have higher academic motivation and are more likely to participate actively in school.

Challenges in Implementing Mental Health Education in Public Secondary Schools

Table 4.
Students Responses on The Challenges in Implementing Mental Health Education in Public Secondary Schools

		Strongly Disagree		Disagree		Neutral		Agree		Strongly Agree	
		f	%	f	%	f	%	f	%	f	%
i	Our teachers rarely talk about mental health topics in class.	-	-	1	19.7	-	-	6	70.1	0	10.3
ii	Our school lacks proper books and materials for learning about mental health.	-	-	-	-	-	-	2	26.3	6	73.6
ii	Students fear being judged if they talk about their emotional challenges.	-	-	0	9.2	-	-	6	78.2	1	12.6
i	Not all teachers take mental health topics.	-	-	-	-	-	-	8	93.1	0	6.9

Table 4 presents students' results on challenges limiting the effective implementation of mental health education. The results from the table showed that 70.1% agreed. This implies that despite the integration of mental

health education into teaching and learning activities, there is no evidence of the effectiveness and efficiency of the program. The researcher reviewed the school's subject timetable and observed that there is no specific time for conducting counselling practices. The reviewed timetable is very fixed, which does not provide a specific time for mental health education.

Additionally, students' responses indicated that there is a shortage of supportive materials, such as textbooks related to mental health education. About 73.6 percent of students strongly agreed that schools have insufficient mental health education-related materials. Students' responses are consistent with teachers' responses, which provided the same remark that schools lack teaching and learning materials. Exo-system under EST clearly elaborates the issue of broader school management and education policy as a major obstacle toward effective implementation of MHE. The study findings are in line with the study conducted by Kutcher, Wei, and Coniglio (2016), who argue that one of the major challenges to effective mental health education is the absence of a shortage of quality teaching materials that align with students' growth levels.

Almost 78.2 percent agreed that there is a situation where they feel discomfort to express their emotional challenges. This fear may be due to shame or stigma. When students develop fear, it discourages them from speaking up about depression. As a result, students may suffer in silence, which can lead to poor academic performance, absenteeism, low self-esteem, or even risky behaviours (Gulliver et al, 2010). It was further found that not all teachers consider mental health

education as a serious phenomenon. Such a response suggests that some teachers may lack proper guidance and counselling training or personal perceptions about the significance of mental health issues. Therefore, it is the role of school leadership to create a school culture that promotes a positive attitude of teachers toward mental health education.

When school counsellors were interviewed to identify the challenges, they commented about limited resources, as one school counsellor explained:

Our school has limited resources, and we lack trained personnel in the field of guidance and counselling. Most of us are teachers with very little knowledge about mental health, which makes it difficult to provide comprehensive support to all students. (School Counsellor: July 2025)

When the school lacks or has limited resources, such as textbooks, manuals, posters, or activity guides, it affects the confidence of teachers, especially those who are not trained counsellors, making it difficult for them to provide accurate and relevant support. Access to quality materials and resources is essential for the successful implementation of mental health education in secondary schools (Barry et al, 2013).

Another challenge stated by teachers was the negative cultural aspects that hinder students from openly expressing their emotional challenges. Teachers agreed that 57.8 percent of those cultural beliefs make it difficult to openly address mental health topics to students. Details from the interview with teacher's show a similar response, as one teacher was quoted as saying about the cultural challenges, as one of the responses posits,

Most students are afraid to speak about their emotional challenges at home and school because of the cultural stigma that exists in society". (Teacher 5, July 2025)

The school counsellor, too, has responded similarly to the teacher.

One school counsellor described:

"One challenge is stigma. Cultural stigma prevails within families, discouraging students from sharing their emotional challenges with parents at home for help. This increased level of depression sometimes affects students' performance." (School Counsellor, July 2025)

In Tanzanian communities, addressing mental health issues is often associated with personal weakness rather than being understood as psychological conditions. Teachers and students may not take it seriously to engage in open discussion and conversation about mental health issues because of fear, misjudgment, and shame. (Mendenhall et al, 2014). Bronfenbrenner's theory (EST) discusses this aspect under the macro-system level, where prevailing societal stigma and undervaluing of mental health issues have effects on students' willingness to speak up and discuss emotional problems in schools.

CONCLUSION AND RECOMMENDATIONS

Conclusion

To conclude the findings from this study, it was revealed that systematic changes are needed for better integration of mental health education in secondary school settings. Changes include ensuring the availability of necessary resources, such as guidance and counseling

guidebooks, teaching media, time allocation, training for school counsellors, and collaboration with experts who specialize in mental health issues. By addressing these issues, secondary schools in Temeke Municipality can establish a supportive learning environment where mental health education is a priority, and hence promote students' academic success and overall well-being.

Recommendations

The study suggested that, the Ministry of Education should incorporate mental health education into the formal curriculum as part of secondary school subjects to be taught in schools. Awareness campaign should be introduced in secondary schools and to communities to break traditional taboos around mental health and promote discussion and acceptance. Moreover, the government, in collaboration with education stakeholders, should make sure the size of classes and overcrowded classes are reduced to allow more personalized attention to students when mental health education is implemented. Apart from that, the government should employ more trained counsellors, and the existing school counsellors should be provided with tools and enough time to effectively assist learners. Addition to that, heads of schools should provide relevant teaching and counselling materials, such as manuals, books, and digital tools such as tablets and laptops, to support the effective implementation of mental health education. Lastly, there should be regular professional development training for teachers so as to equip them with the knowledge and necessary counselling skills to increase confidence and competence.

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