

MENTAL HEALTH EDUCATION MANAGEMENT FOR COLLEGE STUDENTS IN QINGYUAN, GUANGDONG PROVINCE

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ABSTRACT

Under the Healthy China strategy and the context of education in the new era, mental health education for college students has become a core component of the university education system. Several higher education institutions are located in Qingyuan City, where the psychological needs of the student population are diverse. However, challenges such as cognitive biases, inadequate system development, and weak coordination mechanisms persist in mental health education management. Drawing on the trinity new health concept of physical, psychological, and social well-being, this paper analyzes the current state of college students' mental health and the shortcomings in education management in Qingyuan City. It proposes optimization pathways from four dimensions: guiding health cognition, fostering physical and mental literacy, building an education management system, and promoting university-community collaboration. The aim is to improve the mental health education management mechanisms in Qingyuan's universities, strengthen the effectiveness of psychological education, support the holistic and healthy development of college students, and contribute to the Healthy China initiative.

Keywords: College Students; Mental Health Education; Management Research

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INTRODUCTION

With social transformation and the popularization of higher education, college students are facing multiple pressures from academics, interpersonal relationships, and employment, making mental health issues increasingly prominent. The traditional health concept, which is limited to physical absence of disease, can no longer meet the developmental needs of college students in the new era. The new health concept, which integrates physical, psychological, and social well-being, has become the core guiding principle for mental health education in universities.

The Qingyuan Provincial Vocational Education City in Guangdong Province brings together multiple undergraduate and vocational colleges, with a large population of college students. In recent years, universities in Qingyuan have gradually advanced mental health education efforts by conducting psychological lectures, crisis drills, and club-based support activities. Local health commissions, public security bureaus, hospitals, and other entities have also participated in the psychological development of college students. However, from a management perspective, practical issues remain, including insufficient dissemination of health awareness, uneven allocation of mental health education faculty, inadequate home-school-community collaborative management mechanisms, and imperfect psychological crisis intervention procedures.

Grounded in the requirements of the Healthy China 2030 Planning Outline and focusing on the realities of universities in Qingyuan, exploring the existing problems, causes, and optimization strategies in the management of college students' mental health education is of significant practical importance for improving the regional university psychological development system, enhancing students' psychological resilience, and fulfilling the fundamental task of fostering virtue and cultivating talent.

CURRENT STATUS OF HEALTH COGNITION AND PSYCHOLOGICAL MISCONCEPTIONS AMONG COLLEGE STUDENTS IN QINGYUAN CITY

1.1 One-Sided Health Cognition

The majority of college students in Qingyuan City still adhere to the traditional concept that "health means the absence of disease," neglecting the importance of mental health and social adaptability. Some students are physically healthy but fall into emotional distress due to academic setbacks or interpersonal conflicts. Others excel academically but lack social skills, suffering from loneliness and anxiety. Still others chronically stay up late, have irregular diets, and overdraw their physical health, indirectly triggering psychological problems.

1.2 Weak Awareness of Psychological Adjustment

Local college students generally lack self-awareness regarding psychological care. When experiencing emotional lows, insomnia, anxiety, or strained interpersonal relationships, they tend to adopt an avoidant mindset. They are unwilling to proactively seek help from university psychological counseling centers, nor do they regulate their emotions through self-adjustment, communication, or other means. This tendency can easily lead to minor psychological issues escalating into mental health crises.

1.3 Insufficient Understanding of Social Adaptation

Many college students in Qingyuan City struggle to adapt to the pace of university life and group living patterns after enrollment, lacking a clear understanding of career planning and social development. Some students have weak stress tolerance and a limited sense of responsibility. When faced with job competition and social role transitions, they are prone to confusion, low self-esteem, and other psychological issues, highlighting the deficiency in managing the social adaptation dimension within mental health education.

EXISTING PROBLEMS IN MENTAL HEALTH EDUCATION MANAGEMENT FOR COLLEGE STUDENTS IN QINGYUAN CITY

2.1 Outdated Educational Management Concepts

Some universities still prioritize academic education over psychological development and have not fully integrated the new health concept into their talent cultivation systems. Mental health education is often delivered through sporadic lectures and micro-courses rather than forming regular, systematic teaching arrangements. Insufficient attention is given to the integrated cultivation of physical health, mental health, and social adaptability.

2.2 Insufficient Faculty and Professional Resources

In some Qingyuan universities, the ratio of full-time mental health faculty does not meet required standards. Psychological education is often undertaken by part-time academic counselors with limited professional competence and counseling skills. Although some universities have established partnerships with the Qingyuan Third People's Hospital, regular expert guidance on campus and professional training mechanisms for mental health faculty remain underdeveloped, failing to meet students' diverse psychological service needs.

2.3 Rigid and Homogenized Forms of Educational Management

Currently, mental health education in Qingyuan's universities is dominated by classroom lectures and micro-course presentations. Practical activities such as art performances, outdoor outreach, psychological workshops, and immersive crisis drills have limited coverage. The channels for disseminating mental health knowledge are narrow, failing to fully utilize new media, club activities, public welfare practices, and other platforms to promote health concepts.

2.4 Incomplete Home-School-Community Collaborative Management Mechanisms

Coordination among universities, families, local governments, and medical institutions is insufficient. School-based psychological education is largely confined to the campus. Home-school communication focuses primarily on academics, neglecting students' psychological states. Social forces in Qingyuan, including health commissions and public welfare organizations, have not deeply engaged in university psychological development efforts, and resource integration remains weak. A comprehensive psychological development management model involving all stakeholders, throughout all processes, and across all dimensions has yet to be established.

CORE CULTIVATION CONTENT FOR COLLEGE STUDENT MENTAL HEALTH UNDER THE NEW HEALTH CONCEPT

3.1 Physical Health: Strengthening the Material Foundation of Mental Health

Physical health is a prerequisite for mental health and social adaptability, and serves as the foundational support of the new health concept. Currently, college students in Qingyuan City commonly engage in unhealthy lifestyles, including irregular routines, staying up late for online gaming, binge eating, a preference for fried, high-sugar junk food, and sedentary behavior with little exercise. These habits not only lead to decreased immunity, reduced physical stamina, and memory decline, but also easily trigger negative emotions such as irritability, anxiety, and low mood, forming a vicious cycle of physical imbalance, psychological anxiety, and behavioral disorder.

Universities should incorporate physical health into the unified management of mental health education, regularly carrying out thematic education on routine management, nutritional health, chronic disease prevention, and campus sports science. They should strengthen campus lifestyle management, guiding students to go to bed before 23:00 and maintain 7-8 hours of sleep per day, eat a diversified diet with less oil, sugar, and salt. Universities should regularly offer sports programs such as running, ball games, fitness training, and outdoor outreach, advocating moderate exercise at least three times per week, each session lasting more than 30 minutes. By

using exercise-induced dopamine release to relieve stress and regulate emotions, a strong physique can safeguard mental health.

3.2 Mental Health: Building the Spiritual Core for Growth and Development

Mental health is the core of the new health concept and a top priority in university psychological development. Based on the characteristics of college students in Qingyuan City, systematic cultivation should focus on four key dimensions:

First, emotion management and mindset cultivation. Guide students to correctly identify negative emotions, master self-regulation methods such as confiding, journaling, interest shifting, and relaxation training, maintain emotional stability when facing difficulties, and cope with academic pressure, interpersonal conflicts, and life setbacks with an optimistic attitude.

Second, scientific self-awareness and self-acceptance. Guide students to view their own strengths and weaknesses objectively, avoid blind comparison, self-deprecation, or arrogance, learn to accept their imperfections, enhance their strengths and improve their weaknesses, and build a stable, confident personality.

Third, sound willpower and stress/frustration tolerance. Help students establish clear academic, further education, and career goals, and cultivate perseverance and tenacity. When facing failure or difficulty, they should avoid escape or a “lying flat” mentality, take responsibility, confront challenges, and enhance frustration tolerance.

Fourth, interpersonal skills and communication literacy. In response to issues such as introversion, social anxiety, and lack of empathy and listening skills among some Qingyuan college students, systematically provide training in communication techniques, dormitory coexistence, and teamwork, helping students build harmonious relationships with teachers, classmates, and roommates, thereby gaining emotional support and a sense of belonging.

At the same time, universities should ensure the regular operation of psychological counseling centers, conduct psychological surveys and record-keeping, individual interviews, and group counseling, achieving early detection, early intervention, and early relief of psychological problems, thus building a strong psychological safety line.

3.3 Social Adaptation: Expanding College Students' Living and Development Space

Social adaptability is an essential competency for college students transitioning from campus to society, and an indispensable dimension of the new health concept.

First, adaptation to the campus environment. In response to the difficulties freshmen face adapting to the Qingyuan Vocational Education City, universities should help new students quickly adapt to university learning modes, daily rhythms, and collective rules through orientation education, club recruitment, class team-building, and dormitory culture construction, thereby eliminating feelings of strangeness, loneliness, and confusion.

Second, career adaptation and employ ability skills. Provide early training in career planning, career assessment, resume writing, interview etiquette, and workplace professionalism. Organize corporate internships and school-enterprise practice opportunities to alleviate job-seeking anxiety, enhance job competency and competitiveness, and facilitate a smooth role transition from campus to workplace.

Third, social awareness and sense of responsibility. Guide college students to actively pay attention to social hot topics, contemporary development, and local construction. Leverage local social resources in Qingyuan to participate in practical activities such as rural teaching, caring for left-behind children, community health awareness campaigns, and public welfare volunteer services, thereby enhancing social identity and responsibility, achieving alignment between personal development and social development.

3.4 Health Responsibility Awareness: Establishing the Concept of Self-Health Agency

Guide college students to establish the concept that they are the primary persons responsible for their own health, breaking the passive mindset of “only pay attention to health when sick, only seek help when having psychological problems.” Encourage students to proactively learn

knowledge about physical, psychological, and social health, consciously restrain unhealthy lifestyle habits, actively maintain their own emotional state and interpersonal relationships. At the same time, they should spread health concepts to family members and classmates, motivating those around them to practice healthy lifestyles, and internalize the new health concept as daily behavioral consciousness.

OPTIMIZING PATHWAYS FOR MENTAL HEALTH EDUCATION MANAGEMENT FOR QINGYUAN COLLEGE STUDENTS

4.1 Updating Management Concepts and Universally Promoting the Trinity New Health Concept

Universities in Qingyuan must completely abandon outdated concepts such as “prioritizing academics over physical and mental health” and “treating psychological problems as ideological issues.” They should strictly implement the educational philosophy of “health first” and fully integrate the trinity new health concept of physical health, mental health, and social adaptability into talent cultivation programs, university development plans, and daily student management.

Integrate the new health concept into freshman orientation, themed class meetings, ideological and political micro-courses, campus bulletin boards, and new media matrices of official WeChat accounts. Regularly disseminate health knowledge, emotional regulation, routine and diet, interpersonal skills, and other content. Conduct special training for academic counselors, homeroom teachers, and subject faculty, enabling all staff to embrace the concept of whole-person psychological development, thereby creating a campus atmosphere where everyone pays attention to mental health and participates in psychological development.

4.2 Strengthening Faculty Development and Professional Management Support

First, recruit sufficient full-time psychological counselors in strict accordance with the required university faculty-student ratio, avoiding the current situation where academic counselors fully substitute part-time management. Second, establish a tiered training mechanism, regularly organizing psychological faculty and academic counselors to participate in provincial and municipal psychological training, crisis intervention workshops, and expert supervision, enhancing professional competencies in counseling, psychological screening, and crisis assessment. Third, build a university-local expert think tank, collaborating with the Qingyuan Third People’s Hospital, local psychological industry experts, and mental health institution experts, who will regularly visit campus for consultations, lectures, and case supervision, providing professional technical support for university mental health management. Fourth, cultivate student psychological leaders, selecting psychological committee members, dormitory leaders, and psychological club members for systematic training, constructing a four-level psychological early warning network of “university- college-class-dormitory.”

4.3 Diversifying Educational Carriers and Innovating Mental Health Education Management Formats

Change the traditional model of single classroom lectures and one-way dissemination. Build diversified educational carriers combining classroom teaching, practical activities, online science popularization, and group counseling.

Offline activities: Regularly organize immersive activities such as psychological sitcoms, art performances, labor practices, outdoor outreach, interpersonal workshops, and frustration education training camps. Periodically carry out “5.25 Mental Health Month” activities, psychological fun competitions, psychological essay writing and speeches, to increase participation and emotional engagement.

Online platforms: Use campus WeChat official accounts and short-video platforms to produce psychological science short videos, emotion self-test questionnaires, and psychological “tree hole” counseling columns, achieving all-day, full-coverage mental health education.

At the same time, improve the regular crisis drill mechanism. Drawing on the immersive emergency drill experience of Qingyuan universities, standardize the entire process management of early warning, reporting, intervention, referral, and follow-up tracking.

1) ***4.4 Building Home-School-Community-Hospital Quadripartite Coordination and a Coordinated Management System***

Break down the barriers of single-campus education. Establish a quadripartite coordination mechanism among universities, families, society, and medical institutions.

University-family level: Establish a regular feedback mechanism for students’ psychological status. Through parent-teacher conferences, online home visits, and growth portfolios, guide parents to value their children’s psychological development and cooperate with universities in family education and emotional guidance.

University-society level: Collaborate with Qingyuan local governments, communities, public welfare organizations, and youth volunteer associations to jointly build psychological practice bases and volunteer service bases, sharing venues, faculty, and activity resources.

University-hospital level: Deepen cooperation with the Qingyuan Mental Health Center and the psychology departments of general hospitals. Establish a closed-loop management mechanism of psychological screening-on-campus counseling-hospital referral-rehabilitation and return to campus. For students with severe psychological distress, ensure professional medical intervention to prevent extreme incidents.

2) ***4.5 Integrating into the Construction of Healthy Qingyuan and Healthy China, Strengthening Value Orientation***

Based on the goals of Healthy China 2030 and Healthy Qingyuan, integrate college student mental health education into local development strategies. On the one hand, organize Qingyuan university students to go into communities, towns, and villages to carry out health knowledge dissemination, mental health outreach in rural areas, and caring activities for left-behind children and the elderly. Through these public welfare activities, students enhance their own social adaptability and psychological resilience while serving society. On the other hand, encourage university students to leverage their knowledge advantages to spread scientific healthy lifestyles through new media, leading social health trends. Support students with professional backgrounds to participate in health research and internships in the health industry, closely combining personal growth, mental health, and local health development, demonstrating the responsibility and commitment of Qingyuan university students in the new era.

4.6 Improving Institutional Guarantees and Evaluation Systems for Long-term Management

The Qingyuan municipal education authorities and all universities should improve mental health education management regulations, work procedures, and emergency plans, clarifying the psychological development responsibilities of each department and position. Incorporate mental health education work into university education quality assessments, college/department evaluations, and academic counselor performance appraisals. Establish a regular psychological health survey, record-keeping, and follow-up tracking system for students, implementing “one student, one file” dynamic management. Increase financial investment in mental health, ensuring the needs for counseling room construction, activity organization, faculty training, and equipment provision. Use institutions to solidify management and funding to ensure implementation, achieving normalized, standardized, and long-term effective mental health education management.

CONCLUSION

In the new era, mental health education for college students must be guided by the trinity new health concept, breaking through the limitations of traditional management models. Mental health education management for college students in Qingyuan City faces problems such as lagging cognition, insufficient resources, rigid formats, and weak coordination, which constrain the effectiveness of psychological development.

Universities need to proactively update educational management concepts and promote the new health concept; strengthen mental health faculty and professional resources; diversify educational carriers and innovate activity formats; build a multi-stakeholder collaborative management mechanism involving universities, families, society, and medical institutions, while also improving institutional systems and evaluation frameworks, attending to the comprehensive cultivation of students' physical health, mental health, and social adaptability. Through systematic, regular, and coordinated management measures, Qingyuan universities can comprehensively improve the psychological quality and health levels of college students, provide practical references for regional university psychological development efforts, and prepare physically and mentally healthy young talents to support the construction of Healthy China.

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