

When Helping Hurts: A Qualitative Study on the Mental Health of Postgraduate Clinical Psychology Students in India

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Abstract

In recent years, there has been increasing recognition of the mental health challenges faced by students in high-stress academic fields. This qualitative study explores the mental health issues specific to postgraduate clinical psychology students in India. As attention to mental health issues is growing, there is a requirement for appropriate facilities and support systems for trainees. For this study, 58 students of master's participated through focus group discussion about their experiences and concerns. The theme that emerged from thematic analysis is Academia and Emotional Exhaustion. Subthemes under Academia were an unequipped curriculum, achievement pressure, and lack of exposure. Emotional exhaustion included burnout, uncertainty about the future, and self-deprivation. Findings indicate that the academic environment is of great influence in the student's mental health; therefore, there is a dire need for reform in the training programs and more support mechanisms for mental health professionals.

Keywords: Clinical Psychology, Students, Academia, Emotional exhaustion.

1. Introduction

India is the 2nd most populated country in the world. It is characterized by the largest industrial nations but still has a whopping 36% of people still living below poverty. There is a continuous influx of people from rural India to urban areas which creates major health problems. India has been a home for many health services and medicine production which highly focuses on primary health care. Many social programmes and campaigns have been carried out to which health has been the central part of it. Mental health to which is a part of general health services but carries no separate budget [1]. The total annual budget has only a small amount allocated to health. WHO estimates that the burden of mental health problems in India is 2443 disability-adjusted life years (DALYs) per 100 00 population; the age-adjusted suicide rate per 100 000 population is 21.1. The economic loss due to mental health conditions, between 2012-2030, is estimated at USD 1.03 trillion [2]. The prevalence of mental health disorders in India has risen drastically. India is a multicultural society where people believe in visiting shrines for their mental health problems. Stigma and discrimination surrounding mental disorders persist in many communities, hindering individuals from seeking help and support. This leads to delays in diagnosis and treatment, perpetuating the cycle of suffering and exacerbating the long-term consequences [3]. Recently, along with the general

populations mental health workers and trainees have been found to have mental health problems and there many factors that contribute it one of which is that a country being as large as Indian with diver population has very a smaller number of professionals in ratio of the number of patients leading to extreme burnout among the mental health professionals. The discourse definitely changed in 2020 during global pandemic wherein Indians went through a massive revelation of how important mental health is leading to high demand for professionals needed which exacerbated the symptoms of burnout due to long hours of work. Since mental health is all about connecting to people in order to help them which requires a high amount of empathy and compassion which eventually leads to compassion fatigue among the mental health professionals. Since the dire need for professionals due to sudden breakthroughs of realizations of mental health among the pupils. The professionals can barely prioritize their own mental health which really comes down to only one thing due to multifaceted factors and complex needs and demands of the country. The professionals are hardly able to show compassion and empathy towards themselves and take breaks which they need to take.

2. Review of Literature

A review paper was published by Hvovi Bhagwagar exploring the presence of negative psychological consequences faced by helping professionals in the mental health field. The study was a systematic review aimed to synthesise and summarise literature on burnout. By exploring 14 studies the results suggested psychological impact, risk and protective factors that influence burnout, secondary trauma and resilience aiming mental health professionals in India have reported[4].

Another study was conducted among the mental health professionals by employing a qualitative interview method aimed to explore the well-being among the professionals in India by Pankhuri Agarwal et al. Despite happiness being a desirable and pleasurable state, analysis revealed that participants hardly ever gave it much thought. The study also mentioned threats to well-being included extra work obligations, negative client stories, stigma and stereotypes surrounding the field, prejudice from other professionals, a lack of chances for professional advancement, and inadequate human and infrastructure resources [5]. A study conducted by Joshi G & Sharma, to assess the burnout as a risk factor amongst the mental health professionals during covid-19. In the year 2019 and 2020 the sudden surge of corona virus created a rise in corona anxiety, stress and health anxiety amongst the people in the given scenario the role of mental health professionals become crucial in providing relief to the citizens of India. This led to heightened use of tele counselling. However, the findings suggest that due to the nature of the work and increasing workload it causes extreme burnout and can be emotionally demanding [6]. Stress levels among trainee clinical psychologists have been found too high. The study conducted by Jones and Thompson investigated the context within which the studies occur rather than just quantifying its presence among the trainees. Interpretive phenomenological analysis of interviews with the trainees from the 2 UK based training programmes. The results showed that even though there is a high workload, constant evaluation and feelings of inadequacy the trainees show significant levels of resilience and are able to maintain a healthy work-life balance [7]. The author's experiences as a psychiatrist on a multicultural population in a constrained geographic area inform this article's description and analysis of the particular difficulties faced by psychiatrists and other mental health practitioners. From 1984 to 1991, a mobile crisis unit operated on Manhattan's Lower East Side. Sociocultural factors influence how patients act out their mental illness and accordingly mental health professionals' treatment strategies vary from one ethnic group to another.

Leading to accept different cultures, idiosyncrasies and backgrounds which could have its own unique challenges [8]

3. Research Methodology

3.1 Participants

Based on their age and level of education, the participants were chosen for inclusion. In the context of the study, students above the age of 20 who are pursuing clinical psychology were taken into consideration. 58 students obtaining a master's degree in clinical psychology made up the study's sample. All of the individuals were of Indian origin, even though they came from various regions of India, and their average age was 22.5. Every student has continued their studies in India.

3.2 Procedure

The respected faculty gave their ethical clearance for the session to be held. The participants were not given any particular incentives. Important personal data, such as initials, gender, age, educational background, and consent, were gathered from the participants via a Google Form.

Following the procedure, six members in each group, led by a student moderator, begin a focus group conversation with the consenting individuals. After debriefing training and a vote of gratitude, the focus group discussion lasted approximately forty to fifty minutes. For the purpose of the study, the transcripts of each moderator were collected.

3.3 Design

The study was conducted in Kristu Jayanti College with 58 students eligible to participate who were 20 years of age and older. The participants were briefed about the procedure of the discussion and the moderators were requested to note down the minutes of the meeting. The focus group discussion was held in a conference room preceded by informing the moderators about the theme of the discussion. The moderators were asked to encourage the participants to explore their thoughts and experiences about 'Mental Health of Post Graduate Clinical Psychology students in India'. The interviews were transcribed verbatim, coded and thematically analysed. We began the data analysis using open coding where transcripts were read in full and codes were derived from the data. The transcripts were read again in full and axially coded highlighting the emerging overarching themes and subthemes.

4. Results

Figure 1. Represents the Theme 1 and the following Subcategories

Theme		Description
Academia		The diverse Academic challenges encountered by Clinical Psychology students.
Subcategories	Description	Significant Statement examples
Unequipped Curriculum	Inadequate syllabi lacking comprehensive coverage	"Unlearned practical and unequipped curriculum" (G2)
Achievement Pressure	Elevated standards established by Institution and	"The high standards set by trainers can lead to performance anxiety, while

	self-resulting into achievement pressure	institutional pressures, such as maintaining grades and fulfilling clinical hours, contribute to burnout” (G1)
Lack of Exposure	Limited clinical exposure and practical training in psychological intervention.	“Learning from academic point of view, not practical as psychological practice” (G3)

Figure 2. Represents the Theme 2 and the following Subcategories

Theme	Description	
Emotional Exhaustion	State of being emotionally drained to manage personal and academic responsibilities	
Subcategories	Description	Significant Statement examples
Burnout	A state of emotional and mental exhaustion that students experience due to high demands of academic life	“Constantly Sympathetic Nervous System is active. Pressure leads you to be emotionless, apparently it is a way to help us in managing emotions” (G4)
Future Uncertainty	A feeling of distress associated with not knowing what future holds with respect to academic and career paths.	“Future tension as less scope for psychology is seen in India and going abroad is glorified due to less pressure” (G4)
Self-Deprivation	Limited clinical exposure and practical training in psychological intervention.	“Taking care of Mental Health and simply coping with problems -mere management of symptoms and not doing anything about root cause” (G3)

5. Discussion

The exploratory qualitative study aimed to provide insights about the issues experienced by the Post Graduate Clinical Psychology students in India. Our study has identified major themes such as 1. Academia inclusive of Unequipped Curriculum, Achievement Pressure and Lack of Exposure as sub-themes and 2. Emotional Exhaustion including sub-themes such as Burnout, Future Uncertainty and Self-Deprivation. In participants’ view the major factor which has an impact on their mental health was found to be Academia and various dimensions under it. Students believe that an unequipped curriculum including lacking syllabus, practical exposure and old ways of teaching is a perpetuating factor for their distress. A study done by Scott & Husain [9] states that a state-mandated textbook based curriculum which prioritizes test-taking strategies will exacerbate the preexisting educational shortcomings. Also, the feelings of anxiety and experience due to high expectations for success stemming from personal standards

created a lot of achievement pressure among the students. To support this, Duchesne & Larose [10] highlight that students' self-pressure influences their approach to goals and can lead to disruptive behaviour. This suggests that defensive behaviours can mess up how confidence and goals are linked when students feel threatened in achievement situations. The post-graduate students often felt that the curriculum provided insufficient knowledge to practice essential intervention techniques in real world scenarios which is the underlying reason for lack of confidence and competence in handling various clinical cases. Emotional Exhaustion was the typical emotional state experienced by the students often arise due to constant feelings of fatigue. As a result of accumulated stress and being overworked pupils discovered that they had very little time to balance their academic and personal obligations which could be seen as the central component for burnout as the students mentioned that feeling overwhelmed by responsibilities and being unable to meet the constant demands placed upon them led to feeling of self-detachment and reduced accomplishment. Additionally, not knowing what future holds and unpredictability in their lives due to capriciousness of rules of government and educational bodies causes further distress. As noted by Kwok [11] uncertainty significantly obstructs students' career planning, intensifying mental health challenges. The unpredictable nature of today's job market becomes even more daunting for those without strong executive functioning skills. This increased uncertainty can worsen anxiety and stress, adding a substantial burden to students' mental health and overall well-being. The actions driven by guilt, perfectionism or fear of indulgence in some cases is linked to self-discipline taken to an extreme level needing to achieve the productivity goal causes a number of students to engage in self-deprivation.

Conclusion

The findings of this study underscore the need for the urgent attention of these issues related to the postgraduate clinical psychology students' mental health in India. The identified themes suggest that such factors as academic pressures, lack of proper training, and several other factors add up to major emotional exhaustion and stress among these students. Students report feeling that being overwhelmed by their coursework and uncertainty about the future of their career is a major setback to their mental wellbeing. In addition to these, the education institution curricula should be revised and practical training increased, and mental health resources and support systems such that the holistic educational atmosphere promotes care for future well-being of mental health professionals.

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