

Evaluating mental health facilitation in Brunei's higher education: Student perspectives

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Abstract: This study evaluates the mental health facilitation techniques employed by higher education institutions in Brunei Darussalam, focusing on student experiences during the COVID-19 pandemic. The purpose of the study is to assess the effectiveness of institutional strategies supporting student well-being and to identify barriers students face in accessing mental health services. A mixed-method design was adopted; quantitative data were collected from 82 undergraduate students via an online survey, while qualitative data were gathered through in-depth interviews with 10 students who met specific inclusion criteria. The findings highlight significant psychological challenges, including stress, anxiety, and emotional fatigue, particularly linked to online learning and social isolation. Moreover, students reported several barriers, such as stigma, lack of awareness, limited access to resources, and confidentiality concerns, which hindered help-seeking behaviors. The study concludes that while institutions provide support, the outreach, accessibility, and cultural sensitivity of these services remain limited. Practical implications include the need for student-centered mental health frameworks, improved resource dissemination, and stigma reduction initiatives. Educational institutions should prioritize proactive and inclusive strategies to enhance mental well-being in alignment with national and global health policies.

Keywords: Brunei darussalam, COVID-19, Facilitation techniques, Higher educational institutes, Mental health.

1. Introduction

Innovative teaching methods that incorporate technology and practical activities are becoming increasingly important and effective in elevating knowledge within globally interconnected higher education environments [1]. These approaches can also serve as effective tools for promoting student mental well-being, a key focus of this study. The mental health of higher education students in Brunei Darussalam has become a vital concern, particularly taking into consideration the potential factors that may have further worsened their mental health during the COVID-19 pandemic [2]. The background of this study highlights the already concerning low mental health of the students from higher education in Brunei Darussalam and the facilitation techniques implemented to address this issue. The pandemic brought about several rapid changes and the need for adaptations to these changes enforced by policies to ensure the spread of COVID-19 [3].

The unexpected changes during the pandemic and post-pandemic period in the medium of instruction, specifically "online learning", significantly impacted students' mental well-being, affecting their motivation and engagement in academic and extracurricular activities [4]. In response, higher education institutions have implemented several techniques to help students adjust to these changes [5]. For example, at the University of North Carolina at Chapel Hill, an associate professor of religious

studies, Brandon L. Bayne incorporated a human-centric message in his curriculum. He developed a set of guiding principles for this ‘Religion in America’ course, emphasising empathy and flexibility during the transition to remote instruction. Bayne’s approach demonstrated how thoughtful and empathetic teaching strategies could help students navigate unprecedented disruptions [6].

In Brunei Darussalam, students reported significant mental health issues during the COVID-19 pandemic, including disturbances in sleep patterns, physical health problems, eye strain, backaches, exhaustion and fatigue utilizing from prolonged online learning [2, 7]. A study conducted during the pandemic reported that 30% of university students in Brunei experienced poor mental well-being, with contributing factors such as physical inactivity and unhealthy dietary habits [8].

Scholars have emphasised the importance of maintaining a healthy balance of social emotional, physical, and psychological aspects of lives Mahatmya, et al. [9] and Flinchbaugh, et al. [10]. To evaluate student mental health and well-being comparatively, it is essential to define general well-being. Academics like Headey and Wearing [11] have proposed that psychic incomes, well-being and resources are in a continuous state of balance. Herzlich [12] further expanded this balance to incorporate “physical well-being, plenty of physical resources; absence of fatigue; psychological well-being and evenness of temper; freedom of movement and effectiveness in action; good relations with other people”. Additionally, Dodge, et al. [13]; Chen, et al. [14] and Disabato, et al. [15] suggested that well-being is an equilibrium between an individual’s available resources and the hurdles and obstacles they face.

This research aims to bridge the gap by analysing students’ mental well-being and evaluating the effectiveness of various facilitation techniques utilised by higher educational institutions in Brunei Darussalam. The study ultimately seeks to identify the most effective facilitation techniques, provide constructive feedback for institutions to address gaps in their mental health support systems, and offer recommendations for potential improvements.

2. Frameworks of Mental Well-Being

2.1. PERMA

The PERMA model was introduced by American psychologist, Martin Seligman, who identified five important components of well-being: engagement, relationships, meaning, accomplishment and positive emotion [16]. When applied in an educational setting, the PERMA model enhances students’ well-being by being incorporated into syllabi [17]. A report by Current Psychology on the PERMA model assesses secondary schools’ students’ well-being. The study found that the adapted tool demonstrated good psychometric properties, indicating its effectiveness in measuring and potentially enhancing student well-being through the PERMA framework [18]. However, applying the PERMA model across different cultural practices is essential, as its effectiveness can differ depending on the cultural context. A study indicated that cultural differences in well-being judgement may vary globally [19]. For instance, when Phan and Gloeckner [20] adapted the PERMA well-being survey for Vietnamese college students, they found only three key aspects (meaning, achievement, and engagement) but the initial study and earlier studies with German and Brazilian participants identified all five PERMA factors. This highlights how deeply culture influences what well-being means to individuals.

2.2. Conservation of Resources

The Conservation of Resources (COR) model, introduced by Hobfoll [21] suggests that stress arises from losing valuable resources. In this framework, resources are limited assets individuals utilise to face challenges. When these resources are insufficient to meet demands, individuals may experience stress, anxiety, and mental health issues [22, 23]. COR emphasises the importance of preventing resource depletion while maintaining current resources and acquiring new ones to manage stress effectively. It suggests that the availability of resources influences how one sees and copes with stressful

situations [24]. For example, a study on student burnout and engagement utilised COR to develop a model explaining how resource availability affects students' experiences of burnout and engagement. The findings indicate that students with more significant resources are better equipped to cope with academic demands [25]. COR has been significantly applied to understanding student well-being, offering a framework to assess how resource availability impacts stress and coping strategies in educational settings [26]. By viewing well-being as a balance between resources and demands, educators and policymakers can develop interventions aimed at resource enhancement to support students effectively [27].

3. Key Drivers and Elements Shaping Student Mental Well-Being

3.1. COVID – 19 Pandemic

Burns, et al. [28] and Lee, et al. [29] report that a significant factor affecting student well-being is the COVID-19 pandemic. The pandemic created uncertainty and led to substantial changes in how teaching and learning were conducted [30, 31]. According to Pokhrel and Chhetri [32] students and teachers struggled to adapt to this new mode of learning, which caused widespread stress and anxiety [3]. To address these challenges, Singh, et al. [33] highlighted the importance of educational institutions implementing inclusive support systems and mental health resources for their student populations.

3.2. Academic Resources and Facilities

Mumin and Padilla-Valdez [34] reported that virtual learning during the COVID-19 pandemic revealed challenges such as poor Wi-Fi, lack of conducive environments, and familial interference, which impacted students' mental well-being. Students' mental health and academic success are closely linked. When students feel good about themselves, they tend to perform better academically [35]. Research shows that equipping students with appropriate resources and assistance can enhance their mental health and academic performance. For example, Buckley, et al. [36] found that writing workshops helped reduce student stress levels. This was corroborated by Tran, et al. [37] who also determined that universities management and educators alike should provide support to their students, specifically in terms of class, quality, infrastructural conditions, as well as mental health support systems. Furthermore, clear expectations and guidance from universities play a vital job in supporting students' mental well-being. Walsh, et al. [38] found that consistent and transparent communication from lecturers and respective educational institutions played a crucial role in alleviating any anxiety as well as reducing stress levels amongst the students. Therefore, potentially leading to an environment where students are able to thrive and engage positively with their academic responsibilities.

4. Barriers and Challenges to Seeking Mental Health Facilitation

4.1. Stigma

Mental health treatment is often avoided due to the powerful impact of social stigma. Past studies have consistently reported the negative stigmatisation associated with seeking mental health care [29, 39]. University students frequently hesitate to disclose their psychological struggles, worried about being rejected or viewed negatively by their peers Maeshima and Parent [40] and Shim, et al. [41]. Nizam and Nen [42] observed that self-stigmatisation is one the more prominent reasons behind Malaysian university students' unwillingness to seek counselling further denoting that this is especially prevalent among those from outside of the psychology field. Sinduja [43] emphasised the need for specialised interventions such as screening kiosks and health programmes aimed towards improving Indian students' perceptions and attitudes with regard to mental health issues and counselling. Indeed,

these studies suggest that there is a negative perception of seeking help for mental health among the Asian community

Another common barrier to seeking mental health facilitation is the lack of awareness regarding available mental health services. Past studies have found the underutilization of mental health services is by and large due to a lack of information [29] and many students are unaware of the resources accessible to them. McCormick, et al. [44] found that students were specifically unsure of the resources such as potential costs, and accessibility of services or whether their problems warranted professional help. This lack of awareness is particularly problematic for students from underprivileged backgrounds [45] and first-generation students, who may have certain cultural challenges or lack the familiarity with mental health resources that their peers possess [46].

4.2. Confidentiality Concern

Privacy concerns also prevent many college students from seeking mental health support. Students worry that their personal information might be shared with others, leading to embarrassment or judgment [39]. This fear of compromised confidentiality is especially significant for students from minority or underrepresented groups, as well as students distinguished by demographic or cultural traits, such as skin colour, ethnicity, religion, socioeconomic background, past trauma, or familial context [47].

5. Methodology

5.1. Research Design

This study employed a mixed methods approach, integrating quantitative data for screening with qualitative data from participants who met specific inclusion criteria. By combining these methods, the study sought to uncover patterns and themes that inform effective mental health facilitation strategies in educational institutions. This design also aimed to provide valuable insights into how educational institutions in Brunei Darussalam can better support students' mental well-being.

5.2. Participants

The sample population for this study was carefully curated to ensure a comprehensive understanding of low mental well-being among students in higher education institutions in Brunei Darussalam. Ten participants, all bachelor's degree students from various higher education institutions within the country, were selected for the study. Pseudonyms were assigned to protect their identities. Participants were chosen based on their experiences with low mental well-being while enrolled in their respective programmes. The decision to limit the sample size to 10 participants aligns with the principles of qualitative research, which emphasises small, focused samples to allow for in-depth analysis and rich, detailed descriptions of personal experiences and perspectives.

5.3. Sample Criteria

The participants were selected based on the following criteria: they were current or former students at higher educational institutions in Brunei, Universiti Brunei Darussalam, Universiti Teknologi Brunei, or Universiti Islam Sultan Sharif Ali, 18 or above in age, and had sought support for well-being related issues from their institutions. The primary reason for restricting the sample to students who had actively sought help ensured the collection of accurate, experience-based data rather than second-hand accounts or speculation. This approach, supported by Andrews, et al. [48] allowed for the generation of narratives that highlighted the urgency and necessity of well-being facilitation. Such narratives also emphasised the importance of thorough evaluations to ensure the effectiveness of these services.

5.4. Data Collection

The initial screening involved distributing questionnaires to 100 students from higher educational institutions in Brunei. The researcher obtained a list of students from their respective institutions and contacted them via email. The email outlined the study's purpose and elaborated on the importance of their participation. Out of the 82 respondents, 10 participants were chosen based on their alignment with the inclusion criteria, ensuring the sample size was manageable for conducting in-depth interviews. The questionnaire included questions about participants' experience seeking mental health care, the type of care they received, and their overall satisfaction with the care provided. This process ensured that participants with relevant firsthand experiences were selected for the study.

5.5. Data Analysis

Thematic analysis was used to analyse the qualitative data collected through one-on-one interviews with the selected participants. Recorded interviews were transcribed, and the transcripts were reviewed multiple times to ensure familiarity with the data. Key points were highlighted, and meaningful sections were assigned codes related to the research questions. These codes were then grouped to form themes that reflected common ideas across the interviews. The themes were reviewed to make sure they accurately represented the students' experiences and perspectives. To further organise the interview data, an interview theme matrix was applied. This method builds upon the thematic analysis by focusing on how the identified themes manifested across individual participants. After coding and grouping the data, the researcher structured the findings into a matrix that compared participants' responses based on the key themes. This approach highlighted the commonalities and differences in the students' perspectives, providing deeper insights into the factors affecting their mental well-being and the effectiveness of the mental health facilitation techniques provided by their institutions.

6. Finding

Table 1 shows the data organization tool called the Interview Theme Matrix, utilised in this study to organise and categorise participants' responses. This tool served as a critical bridge between raw qualitative data and meaningful insights, allowing for a clear and concise analysis of the factors impacting mental well-being and the effectiveness of institutional facilitation.

Table 1.
Interview Theme Matrix (Questionnaire 1 – 13) for 10 participants.

| Name | Q1 | Q2 | Q3 | Q4 | Q5 | Q6 | Q7 | Q8 | Q9 | Q10 | Q11 | Q12 | Q13 |
|-------------|---------------------|---------------------------|----------------------------------|------------------------|-----------------------------|-------------------------|--|---------------------------|-----------------|---------------|------------------------|------------------------|--------------------------------|
| Interviewee | Time of Recognition | Primary issues Identified | Emotional response | First Contact for Help | Reaction from first contact | Time to reach intuition | Reason for delay | Institutional Response | Mode of Contact | Response Time | Facilitation Provided | Impact | Suggestions |
| Hassan | End of semester | Personal issues | Stress and anxiety | Best friend | Supportive, offered help | End of semester | Hesitant to reach out | Positive, offered support | Email | Within a day | Referral to counsellor | Grateful, felt heard | Create more awareness |
| Wahab | End of semester | Academic stress | Stress and anxiety | Best friend | Supportive, offered help | End of semester | Did not want to burden anyone | Positive, offered support | In-person | Within a week | Referral to counsellor | Grateful, felt heard | Create more awareness |
| Sana | Throughout semester | Personal issues | Worried all the time | Best friend | Supportive, offered help | Throughout semester | Stigma around mental health | Positive, offered support | Email | Within a day | Referral to counsellor | Grateful, felt heard | Encourage accessible resources |
| Mariam | Mid-semester | Academic stress | Did not feel like doing anything | Best friend | Supportive, offered help | Mid-semester | Did not want to bother anyone | Positive, offered support | Email | Within a day | Referral to counsellor | Grateful, felt heard | Encourage more open dialogue |
| Khadija | Mid-semester | Personal issues | Stress and anxiety | Best friend | Supportive, offered help | Mid-semester | Did not want to seem weak | Positive, offered support | In-person | Within a week | Referral to counsellor | Grateful, felt heard | Create more facilities |
| Omar | End of semester | Academic stress | Decline in mood and motivation | Brother | Supportive, offered help | End of semester | Did not know who to talk to | Positive, offered support | Email | Within a day | Referral to counsellor | Grateful, felt heard | Encourage accessible resources |
| Ali | Mid-semester | Relationship issues | Lack of sleep | Roommate | Supportive, offered help | Mid-semester | Did not want to seem weak | Positive, offered support | Email | Within a day | Referral to counsellor | Felt heard, less alone | Create more facilities |
| Zahra | Throughout semester | Overwhelmed with workload | Constant anxiety | Best friend | Supportive, offered help | Throughout semester | Did not want to be a burden | Positive, offered support | Email | Within a day | Referral to counsellor | Grateful, felt heard | Encourage accessible resources |
| Aisha | End of semester | Personal issues | Stress and anxiety | Sister | Supportive, offered help | End of semester | Embarrassed, did not want to seem weak | Positive, offered support | In-person | Within a week | Referral to counsellor | Grateful, felt heard | Encourage more open dialogue |
| Fatima | Around midterms | Academic stress | Decline in motivation | Best friend | Supportive, offered help | During finals | Hesitant to reach out | Positive, offered support | Email | Within a day | Referral to counsellor | Relieved, felt heard | Create more facilities |

Table 1 shows responses from students that reveal critical insights into their mental health struggles and the challenges they face in seeking help. Many students reported feeling stressed and anxious due to academic pressure, personal issues, and relationship problems. These struggles often appeared during midterms or toward the end of the semester, when workloads were highest. While students turned to close friends or family for initial support, they hesitated to reach out to their institutions because of fear of judgment, stigma, or not knowing what help was available. Those who did seek help found that institutions responded positively, offering counselling or referrals, but there were delays in arranging support for some students. Additionally, many students only learned about mental health services through word-of-mouth rather than clear communication from their institutions. This highlights systemic gaps in raising awareness and ensuring timely, accessible support. Students highlighted the need for better awareness campaigns, more flexible service hours, and a stigma-free environment where they feel comfortable asking for help. These insights show that while institutions are willing to help, more proactive efforts are needed to address students' mental health needs effectively.

The Interview Theme Matrix not only streamlined the initial stages of data analysis but also provided a comprehensive overview of individual and collective experiences. By mapping the data systematically, the matrix supported the identification of underlying trends, differences, and commonalities. For example, Table 1 shows institutions as supportive upon contact, however, there is a clear need for proactive measures to enhance awareness, availability, and the destigmatisation of mental health care.

6.1. Key Driver and Element Shaping Student Mental Well-Being

6.1.1. Emotional Health

The analysis revealed that a substantial number of students reported elevated stress levels, anxiety, and emotional exhaustion. The academic environment, characterised by demanding coursework and strict deadlines, was often cited as a major contributor to these negative emotions. Students expressed feelings of being overwhelmed, constantly trying to meet expectations and struggling to find time for self-care and relaxation. One student shared her frustration as follows,

"I feel like I'm constantly on edge. The pressure to perform well academically takes a toll on my emotional well-being. I'm always worried about my grades and the consequences of not meeting the standards." – Fatima

6.1.2. Academic Pressure

The interviews uncovered a prevailing theme of academic pressure among students. The need to excel academically, maintain high grades, and meet the rigorous expectations set by educational institutions seemed to burden students' overall well-being. Many students expressed a sense of inadequacy, self-doubt, and fear of failure. They reported feeling immense pressure to succeed academically, with little room for exploration or personal growth. A student explained,

"The constant pressure to achieve top grades and be competitive puts a lot of strain on my mental well-being. It feels like my self-worth is solely determined by my academic performance." – Ali

6.1.3. Lack of Social Support

Another significant recurring theme from the interviews was the absence of satisfactory social support networks. Many students reported feelings of isolation and loneliness, particularly those who had relocated to pursue their education. They expressed challenges in making genuine connections and finding support systems within the academic environment. Limited opportunities for social interaction and a lack of initiatives to foster community engagement further contributed to their diminished well-being. One student said,

"I moved away from my hometown for college, and it's been hard to make real friends. I often feel alone and miss the support I had back home." - Zahra

6.1.4. Personal Relationships

The analysis highlighted the strain that academic responsibilities placed on personal relationships. Students shared experiences of conflicts and challenges in maintaining healthy relationships while balancing their academic workload. The time constraints and competing priorities often made it difficult to devote ample attention to friendships and romantic relationships. Consequently, some students felt a sense of guilt or regret for not being able to fully engage in their personal connections. A student revealed,

"I've had conflicts with my friends because I can't always be there for them. It's tough to balance my studies and personal life, and it sometimes takes a toll on my relationships." - Mariam

6.1.5. Limited Engagement in Extracurricular Activities

The analysis further revealed a concerning trend of limited participation in extracurricular activities among the interviewed students. Many expressed a desire to pursue their passions and interests outside of the academic sphere but struggled to find time or energy to engage in such activities. The focus on academic achievements often overshadowed their personal development and well-roundedness. One student lamented,

"I used to love playing soccer, but I don't have time for it anymore. It feels like my life revolves around studying, and I miss having a balance." - Khadija

Overall, the analysis of the qualitative interviews painted a detailed and concerning picture of the current level of student well-being. The overwhelming majority of students reported low levels of well-being, marked by emotional distress, academic pressure, limited social support, strained personal relationships, and decreased engagement in extracurricular activities. These findings emphasise the necessity of healthy support systems, proactive interventions, and policy changes within educational institutions to prioritise and enhance student well-being. Creating a nurturing environment that fosters both academic success and holistic development is crucial for promoting a healthier and more fulfilling educational experience for students.

6.1.6. Barriers and Challenges Face by Students in Seeking Help

Mental health challenges are often stigmatised, and students may feel ashamed or embarrassed to admit that they are struggling. This, in turn, may lead students to avoid seeking help, which can exacerbate mental health issues and increase their severity.

6.1.7. Stigma and Shame

Stigma and shame surrounding mental health are among the most significant barriers to seeking help for students, as they may worry about being judged. As a result, they may avoid seeking help, leading to a worsening of their mental health. One student, Aisha, expressed her thoughts on this issue,

"I was afraid of being seen as weak or crazy. I didn't want people to think less of me because of my mental health struggles." - Aisha

6.1.8. Lack of Awareness

Another major barrier to seeking mental health support is a lack of awareness about the available resources. Many students may not realise that the symptoms they are experiencing could be related to mental health problems. This lack of awareness often leads to delays in seeking help and inadequate treatment. Zahra shared her experience,

"I didn't know what was wrong with me until it got really bad. I wish I had known about mental health issues and the resources available to me earlier." - Zahra

6.1.9. Time Constraints

Many students may feel that they do not have the time to prioritise their mental well-being, as they are constantly focused on meeting academic demands. Academic pressure and busy schedules may hinder students' ability to seek help. Additionally, inflexible appointment times and counselling schedules may not align with their busy routines, making it difficult to prioritise their mental health. As Omar explained,

"I wanted to seek help, but I don't have the time. I have so many assignments and deadlines that I can't afford to take time off for counselling sessions." - Omar

6.1.10. Financial Constraints

Financial constraints may also pose a significant barrier to seeking mental health support. Many students cannot afford the cost of counselling or therapy, which can be prohibitively expensive. This limits their access to mental health resources and treatment. Khadija shared her experience,

"I wanted to seek professional help, but I couldn't afford it. The cost of counselling sessions is too high, and I don't have the means to pay for it." - Khadija

6.1.11. Limited Access to Resources

Limited availability of resources is a significant challenge, particularly for students who live in isolated areas. Many students may not have access to a counselling centre, which limits their ability to seek help. Mariam shared her thoughts on this issue,

"I live in a rural area, and there is no counselling centre nearby. It's hard to seek professional help when there are no resources available." - Mariam

6.1.12. Lack of Confidentiality

Many students may fear that their personal information will not be kept confidential, which deters them from seeking help. One participant expressed their concern,

"I was afraid that my personal information would not be kept confidential. I didn't want anyone to know that I was seeking help." - Wahab

Overall, these barriers and challenges highlight the need for universities to provide accessible and affordable mental health resources, raise awareness about mental health issues, and promote a stigma-free atmosphere that encourages students to prioritise their mental well-being. By addressing these barriers, universities can foster a healthier and more fulfilling educational experience for students.

Table 2.
Thematic Analysis Matrix – Key Sources and Factor Matrix.

| Interviewee | Code Word | Theme | Quotations |
|-------------|--|--|--|
| Fatima | Emotional Health | Emotional health is an important aspect of student well-being | "I think mental health is really important because your brain is what makes you function as a person." |
| Ali | Academic Pressure | The pressure to attain academic success affects student well-being | "I feel like I have to work all day, every day." |
| Zahra | Lack of Social Support | Social support is crucial for student well-being | "I feel like I don't have anyone to talk to about my problems." |
| Mariam | Personal Relationships | Personal relationships can impact student well-being | "I've been struggling with a break-up and it's really affecting my mental health." |
| Khadija | Limited Engagement in Extracurricular Activities | Participating in extracurricular activities can improve student well-being | "I feel like I don't have any time to do things I enjoy anymore." |

Table 3.
Thematic Analysis Matrix – Barriers and Challenges Matrix.

| Interviewee | Code Word | Theme | Sample Quotations |
|-------------|-----------------------------|---|--|
| Aisha | Stigma and Shame | Stigma and shame around mental health issues prevent students from seeking help | "I don't want people to think I'm weak." |
| Zahra | Lack of Awareness | Students may not be aware of the resources available to them | "I didn't know the counselling centre existed until my friend told me about it." |
| Omar | Time Constraints | Busy schedules can make it difficult for students to seek help | "I have so much work to do, I don't have time to go to counselling." |
| Khadija | Financial Constraints | Financial issues can prevent students from seeking help | "I can't afford to pay for therapy." |
| Mariam | Limited Access to Resources | Access to mental health resources may be limited for some students | "I live off-campus and it's hard to get to the counselling centre." |
| Wahab | Lack of Confidentiality | Concerns about confidentiality can prevent students from seeking help | "I'm worried that my information won't be kept private." |

The findings from the thematic analysis revealed some of the more fundamental insights into student mental well-being through the identification of key sources and factors of seeking help as seen in Table 2. The key sources and factors matrix identified emotional health, academic stress, social support, personal relationships, and engagement in extracurricular activities as critical influences on students' mental health. These factors highlight the need for academics to be balanced with personal mental well-being. The Barriers and Challenges Matrix, on the other hand, identified stigma and shame, lack of awareness, time constraints, financial limitations, limited access to resources, and confidentiality concerns as the most common obstacles to mental health access shown in Table 3. These barriers point to the need for more approaches to mental health support that focus on raising accessibility, lowering costs, and addressing stigma in educational settings. Overall, these findings emphasise the necessity of addressing issues.

7. Discussions

7.1. Over of Emerged Themes and Patterns

The findings of the study demonstrate that overall student well-being in Brunei Darussalam is low, consistent with existing literature [49] that highlights the impact of external factors such as academic pressure, family and peer pressure, financial constraints, and lack of social support on mental well-being [50–52].

This study's results indicated that the COVID-19 pandemic has significantly further impacted the mental well-being of higher education students in Brunei. Anxiety, depression and stress are reported issues. The findings revealed that students often feel unsupported in managing these problems. For instance, one student mentioned.

"It's like we are often expected to cope with everything on our own, and sometimes it feels like there's no one to turn to."

The study highlights the significant gap in addressing students' mental health by educational institutions, consistent with the findings of previous studies [49]. Despite educational institutions providing mental health care and resources, there is a considerable lack of awareness among students regarding these resources, which is similar to the findings of Wang, et al. [52]. As a result, students are reluctant to seek help, and this reluctance has been a concern.

7.2. Common Themes and Patterns

7.2.1. Long – Standing Low Mental Well-Being

A recurring pattern observed in the interviews was the long-standing low mental well-being among students. Many students reported experiencing negative emotions such as anxiety, stress, and emotional exhaustion over extended periods. These findings align with Salanova, et al. [53] and Wang, et al. [52] who reported similar trends of persistent mental health challenges among students. Despite these challenges, most had not sought help or explored potential solutions to their problems, reflecting barriers like stigma and normalization of stress as discussed by Eisenberg, et al. [54] and Hunt and Eisenberg [55]. They expressed feelings of being overwhelmed, constantly trying to meet expectations, and struggling to make time for self-care and relaxation, echoing finding by Allen, et al. [56]. These findings underscore the urgent need for educational institutions to provide targeted support systems that address these challenges holistically.

7.2.2. External Factor Affecting Mental Well-Being

The interviews highlighted the significant impact of external factors, such as the COVID-19 pandemic and academic pressure, on students' mental health. Stress, anxiety, and depression were frequently cited as the most pressing issues, consistent with findings by Wang, et al. [52] who reported global increase in mental health challenges among students due to pandemic disruptions. Many students often felt unsupported in managing these problems with academic pressures and busy schedules making it difficult for them to focus on their mental wellness, aligning with Eisenberg, et al. [54] who identified academic pressures and stigma as major barriers to accessing mental health support. Furthermore, inflexible counselling schedules conflict, increasing the difficulties in seeking help to prioritize their mental health as noted in this study are echoed by Capone, et al. [50] who emphasized the need for more accessible and student-friendly mental health services.

7.2.3. Intervention Strategies

The findings further highlighted the necessity for holistic support networks, preventive measures, and institutional policy changes to prioritise student mental well-being. Similar to the observations of Hunt and Eisenberg [55] low levels of well-being characterised by emotional distress, academic

pressure, limited social support, strained personal relationships, and reduced participation in extracurricular activities. Furthermore, creating stigma-free environments that aid students in caring for their mental well-being is supported by Corrigan, et al. [57] who emphasized the role of awareness campaigns in reducing stigma and promoting help-seeking behaviours.

7.3. Different and Contradictions Amongst Themes

7.3.1. Support

One of the key differences that emerged from the interviews was the level of support students received from family and friends. This is aligned with Cohen and Wills [58] who demonstrated that strong social support networks serve as a protective buffer against stress. Students with strong support networks felt more equipped to manage their mental health issues. In contrast, those without such support systems often felt unsupported, which negatively impacted their mental well-being, as noted by Cutrona and Russell [59] and Stroud, et al. [60] who found that limited social support is associated with poorer coping outcomes and greater emotional distress.

7.3.2. Accessibility

Another key difference identified was the level of accessibility to mental health facilitation services. This is consistent with Eisenberg, et al. [54] who found that students with limited financial resources often struggled to afford such access to private mental health services. Moreover, a lack of awareness and societal biases, as highlighted by Gulliver, et al. [61] further hinder help-seeking behaviours, particularly among students from lower-income groups. To address these issues, Corrigan, et al. [57] recommend enhance awareness of existing support services and simplify administrative processes to ensure students can access mental health services and obtain timely assistance.

7.3.3. Culture and Social Values

Cultural and social values played an important role in determining students' willingness to seek mental health support. This aligns with the findings of Corrigan, et al. [57] and AlSamhori, et al. [62] who identified cultural stigma as a significant barrier to seeking mental health care. Students who had a cultural upbringing that stigmatised mental health were more hesitant to talk or seek help compared to those who grew up in an environment that openly discussed mental health. Prejudices linked to mental health can create significant barriers to accessing help as emphasised by Gulliver, et al. [61].

7.3.4. Preferred Support Approaches.

The findings also highlighted that individual preferences and personality traits can significantly impact the effectiveness of different approaches and facilitation techniques. This research highlighted introverted students found it more comfortable to have individual sessions, while extroverted students found group sessions more enriching. This aligns with the work of Cain [63] who emphasized the importance of recognizing introverted and extroverted personality traits in tailoring support systems. It was also observed that some students were more concerned about complete anonymity and confidentiality while seeking counselling, while others were less concerned.

Personal preferences and personality traits might contribute to the effectiveness of different facilitation or support techniques. For instance, some students may prefer group activities to boost morale, while others may prefer individual tasks for personal betterment. The study suggests that educational institutions should account for these individual preferences and personality traits when designing and providing mental health facilitation services. By doing so, educational institutions can develop more personalized facilitation techniques tailored to each student's unique needs. This approach can support students in attaining their educational objectives while preserving their mental well-being.

7.4. *Thematic Analysis Against the PERMA Model*

The PERMA model of wellness focuses on five essential aspects of happiness and mental well-being: Positive Emotions, Engagement, Relationships, Meaning, and Accomplishment [16].

7.4.1. *Long-Standing Low Mental Well-Being*

The PERMA model emphasizes the importance of positive emotions. Positive emotions refer to experiencing joy, gratitude, love, and other positive states. Additionally, Seligman [16] underscores that cultivating positive emotions, individuals can counterbalance long-standing low mental well-being and improve their overall psychological state.

7.4.2. *External Factor Affecting Mental Well-Being*

The PERMA model recognises that external factors, such as life circumstances and environmental conditions, can significantly impact mental well-being. This perspective aligns with Seligman [16] who emphasis on the importance of individuals engagement, relationships, meaning, and accomplishment. Similarly, Fredrickson [64] emphasised that cultivating positivity and engagement helps individuals navigate challenges, highlighting the role of personal agency in well-being.

7.4.3. *Lack of Awareness, Resource and Motivation to Seek Help*

The PERMA model addresses this theme by emphasising engagement and meaning. Engagement involves becoming deeply absorbed in activities that lead to a sense of flow and focus, leading to a state of optimal experiences [16]. Similarly, Ryan and Deci [65] emphasized that by participating in activities aligned with personal interests and values, individuals can gain a sense of purpose, intrinsic motivation, and enhanced well-being.

7.4.4. *Need for support System and Proactive Interventions*

The PERMA model aligns with this theme by emphasising the importance of relationships. Positive and supportive relationships are crucial for mental well-being as they provide emotional assistance, foster inclusion, and facilitate meaningful engagement [16]. Equally, Cohen and Wills [58] demonstrated that strong support systems and fostering relationships can enhance individuals' ability to address their mental health needs proactively and effectively.

7.4.5. *Benefits of the PERMA Model*

The PERMA model offers a comprehensive framework for mental well-being, addressing various aspects to provide a holistic approach. It emphasises active participation in activities that promote positive emotions, meaningful relationships, a sense of purpose, and a sense of accomplishment

. This action-oriented approach empowers individuals to take charge of their well-being. Additionally, the PERMA model promotes resilience by focusing on internal strengths and encouraging the development of positive emotions. Fredrickson [64] further highlighted that fostering positive emotions enhances coping mechanisms, enabling individuals to navigate life's challenges effectively. Overall, the PERMA model presents a valuable approach to mental health, fostering personal growth and enhancing mental well-being.

7.4.6. *Limitation of the PERMA Model*

The PERMA model recognises that cultural and individual differences play a crucial role in shaping mental well-being. The importance and relevance of its components may vary across cultures and individuals [16]. However, scholars like Christopher and Hickinbottom [66] highlighted the importance of cultural values and personal preferences in shaping well-being, suggesting that models like PERMA should integrate these factors more clearly. Furthermore, there is a need to address

factors, such as socioeconomic and systemic influences, which can limit access to resources and impact overall mental well-being.

7.5. Thematic Analysis Against the COR Theory

The Conservation of Resources (COR) Theory provides constructive insights into the emerging themes from the study on mental well-being. The COR Theory states that individuals strive to gain, retain, and protect resources to cope with stress and maintain well-being [21]. In the context of this study's findings, the section below explores how COR Theory aligns with the identified challenges and offers practical solutions.

7.5.1. Long-standing Low Mental Well-Being

Hobfoll [21] emphasised that COR Theory suggests that when individuals experience prolonged low mental well-being, it may result from resource loss or depletion. This includes psychological resources, such as self-esteem, optimism, or social support. Supporting this, Halbesleben, et al. [67] highlighted that restoring psychological resources can significantly enhance resilience and improve mental well-being.

7.5.2. External Factors Affecting Mental Well-Being

The COR Theory recognises that external factors, such as work stress, social support, and environmental conditions, influence individuals' resource gain or loss [21]. Additionally, Halbesleben, et al. [67] noted that interventions targeting specific resources impacted by external factors, such as enhancing social support or reducing environmental stressors, can effectively mitigate negative outcomes and promote resilience.

7.5.3. Lack of Awareness, Resources, and Motivation to Seek Help

The COR Theory highlights the responsibility of personal resources in seeking help. Individuals with sufficient psychological and social resources are more likely to seek support. However, individuals experiencing low mental well-being may lack awareness of available resources or perceive a scarcity of resources necessary to seek help [21]. By promoting resource acquisition, the COR Theory can address these barriers, enhancing awareness, motivation, and access to appropriate support systems, as mentioned by Gulliver, et al. [61] that resource availability and awareness are critical in overcoming barriers to seeking help.

7.5.4. Need for Support Systems and Proactive Interventions

The COR Theory recognises the significance of support systems and proactive interventions in preserving and enhancing resources. Support from social networks, organisations, and communities can act as a buffer against resource loss and facilitate resource replenishment [21]. Educational institutions can apply this framework by implementing interventions such as counselling services, peer support programs, and mental health awareness initiatives to strengthen resources, whilst protecting existing resources, and enhancing overall mental well-being.

7.5.5. Benefits of the COR Theory

The COR Theory offers a comprehensive framework that integrates environmental, individual, and social factors influencing mental well-being. Its holistic approach enables a thorough analysis of resource dynamics. The theory's strength lies in its ability to guide targeted interventions identifying specific resources affected by external factors. Such interventions can effectively address resource loss and promote resource gain. Furthermore, the COR theory promotes a long-term perspective emphasising resource acquisition, retention, and protection to sustain positive mental health outcomes.

By promoting resource-building habits and practices, interventions based on the COR Theory can have lasting benefits to mental well-being. Educational institutions can leverage the COR Theory framework to foster a supportive environment for students and staff.

7.5.6. *Limitation of the COR Theory*

While the COR Theory offers valuable insights into mental well-being, it is vital to acknowledge its limitations. The theory does not fully account for individual differences in terms of resource availability, coping strategies, and cultural contexts. To ensure the effectiveness of interventions, it is crucial to tailor approaches to the diverse backgrounds of individuals.

Another challenge lies in accurately identifying and measuring psychological and social resources. Reliable assessment tools are necessary to determine individuals' resource profiles and address specific resource deficits effectively. Additionally, COR Theory has a limited scope as it primarily focuses on the conservation and management of resources, which, while critical, may not encompass all aspects of mental well-being; to provide a more comprehensive understanding of mental health, it is beneficial to combine the COR Theory with other psychological theories and frameworks.

7.6. *Implications of the Findings*

The findings of this study have significant implications for researchers, students, educational institutions, and policymakers. As highlighted in the literature review, scholars have emphasised the importance of achieving a healthy balance of physical, emotional and social aspects of students' lives [9, 10]. Prioritising student mental well-being is, therefore, vital. Participants in this study expressed concerns about the lack of accessible mental health support services and the need to foster an understanding and inclusive learning environment that supports students to prioritise their mental health. One student stated, "I feel like the educational institutes are not doing enough to help students with their mental health. It's like they expect us to handle everything on our own, but it's not easy." Another student said, "I think it's important for educational institutes to provide more resources and support for students who are struggling with their mental health. There's still a lot of stigma and shame attached to mental health issues, and it's hard for students to reach out for help."

The study also recommends that educational institutions should address the barriers and challenges that restrict students from seeking mental health facilitation, such as stigma and shame, lack of awareness, time constraints, financial constraints, limited access to resources, and concerns about confidentiality. Educational institutions can address these issues by offering a range of services, including individual counselling, group therapy, psychiatric consultations, support groups, and mentorship programs.

In addition, the study recommends making mental health services more accessible and affordable while increasing the availability of support systems. Institutions could provide flexible mental health services and incorporate self-care and relaxation activities. The literature review highlights that students often face social and economic pressures as well as balancing education, family, and work responsibilities. Educational institutions need to equip students with adequate resources to enhance their ability to cope with these demands. To be able to have a better fighting chance against these challenges. One student mentioned, "I think it's important for educational institutes to understand that we are not just students, but we have lives outside of our studies as well, and it can be difficult to balance everything."

For policymakers, the study emphasises the need to prioritise student mental well-being through policy changes. This includes establishing partnerships with mental health organisations to provide additional assistance and resources. By fostering mental health awareness and allocating resources to this area, policymakers can create a healthier and more supportive educational experience for students.

These findings have important implications for educational institutions in Brunei Darussalam and other countries facing similar challenges. Institutions should take proactive measures to address barriers, implement effective interventions, and improve students' mental well-being.

8. Conclusion

The findings of this study highlight a crucial aspect of modern education: the need for educational institutions in Brunei Darussalam and similar contexts to prioritise student mental well-being. Mental health issues are increasingly prevalent among young people. Necessitating targeted efforts by educational institutions to address the barriers that hinder students from seeking mental health facilitation. These barriers include financial constraints, societal pressures, academic stress, and cultural stigma, all of which compound the challenges faced by students.

To create a supportive and nurturing learning environment, policymakers must allocate resources for mental health services and support programs in educational institutions. Such initiatives could include funding for trained mental health professionals who provide personalised support and develop partnerships with mental health organisations to offer workshops on mindfulness, stress management and resilience building.

Prioritizing student mental well-being has the potential to enhance academic achievement, as students are better equipped to focus and succeed when their mental health needs are met. This approach not only promotes a healthier and more fulfilling educational experience but also equips students with the skills and resources required to navigate the complexities of a fast paced and demanding world. In conclusion, prioritising student mental well-being is essential for their overall development and success. Education institutions and policymakers can foster academic, social and emotional growth by adopting a comprehensive and inclusive approach.

8.1. Recommendations

Technologies enhancing teaching and learning experiences in classrooms by incorporating mobile electronic devices, paving the way for mobile learning or e-learning for students in higher education [68]. Similarly, innovations in mental health support, such as mobile apps or e-counselling platforms, can break the barriers of location, stigma, and time constraints, offering students immediate access to support. However, building on the findings of this study, several recommendations for future research are proposed. Firstly, conducting a larger-scale study that includes a more diverse sample of students from different educational institutions could provide broader insights into the effectiveness of facilitation techniques. Such an approach could also identify potential differences in the experiences of students across different institutional contexts, providing a more comprehensive understanding of the issues at hand. Secondly, it would be beneficial to explore the effectiveness of specific interventions and strategies aimed at improving student well-being. This could yield targeted guidance for educational institutions and policymakers by identifying which techniques are most effective in addressing mental health challenges. Finally, conducting longitudinal studies to evaluate the long-term impact of mental health facilitation on student well-being would provide valuable insights into the sustainability and effectiveness of these interventions over time. These recommendations could help to enhance the understanding of best practices for addressing the mental health needs of students in Brunei Darussalam. They also seek to inform the development of evidence-based policies and strategies to better support student well-being and promote a more inclusive and supportive educational environment.

Institutional Review Board Statement:

Ethical approval was obtained from the Universiti Teknologi Brunei Ethics Committee. All participants provided informed consent. Ethics Reference No: UTB-URC/IRB/SB/20.

Transparency:

The authors confirm that the manuscript is an honest, accurate, and transparent account of the study; that no vital features of the study have been omitted; and that any discrepancies from the study as planned have been explained. This study followed all ethical practices during writing.

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