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THE INFLUENCE OF INTERNALIZING AND EXTERNALIZING MENTAL HEALTH PROBLEMS ON THE PSYCHOLOGICAL WELLBEING OF STUDENTS IN SELECTED PRIVATE UNIVERSITIES IN KAMPALA DISTRICT, UGANDA

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ABSTRACT

This study aimed to examine the influence of internalizing and externalizing mental health problems on the psychological well-being of students in selected private universities in Kampala District, Uganda. A total of 316 students participated in the study, providing quantitative and qualitative data. The quantitative data were analyzed using multivariate linear regression, while qualitative data were analyzed using thematic analysis. The results revealed significant negative relationships between both internalizing (depression and anxiety) and externalizing (aggression and substance abuse) mental health problems and students' psychological well-being. Specifically, internalizing mental health problems had a slightly stronger negative effect on psychological well-being compared to externalizing problems. The multivariate regression analysis indicated that internalizing mental health problems ($B = -1.344$, $p < 0.001$) and externalizing problems ($B = -1.184$, $p < 0.001$) significantly reduced students' well-being. These findings were consistent with previous studies, such as those by Auerbach et al. (2018) and Muwanguzi et al. (2023), which highlighted the pervasive impact of these mental health issues on university students globally and in Uganda. Furthermore, qualitative interviews provided deeper insights into the psychological struggles faced by students, with many reporting symptoms of depression, anxiety, and aggression that affected their emotional stability, academic performance, and social relationships. It was concluded that both internalizing and externalizing mental health problems substantially contribute to psychological distress among students, leading to academic disengagement, social withdrawal, and poor emotional health. It was recommended that universities in Kampala should prioritize the development of comprehensive mental health programs that integrate counseling services, mental health awareness campaigns, and peer support systems. Training for academic staff and students on early detection and support for mental health issues should be implemented to create a supportive academic environment. Additionally, universities should allocate dedicated resources and collaborate with mental health organizations to ensure the sustainability of these initiatives. These interventions will contribute to enhancing students' overall psychological well-being and academic success.

Keywords: Internalizing mental health problems, externalizing mental health problems, psychological well-being, Students, Private universities, Depression, Anxiety, Aggression, Substance abuse, Mental Health Intervention.

INTRODUCTION

Globally, mental health among university students has increasingly become a critical public health concern, with internalizing disorders such as depression and anxiety, and externalizing disorders such as conduct problems and substance abuse, significantly impacting the psychological wellbeing of learners in higher education. According to the World Health Organization (WHO, 2023), approximately one in every eight people globally is living with a mental disorder, with depression and anxiety disorders being the most prevalent. University students, particularly those transitioning into adulthood, are among the most vulnerable groups, with studies indicating that up to 35% of students in higher education institutions suffer from one or more mental health challenges (UNESCO, 2023). These mental health problems have been linked to reduced academic performance, diminished social relationships, increased substance use, and in severe cases, suicidal ideation and self-harm (Ibrahim et al., 2021).

In Africa, the burden of mental health disorders among young people, especially university students, remains underreported and insufficiently addressed due to stigma, limited access to mental health services, and the shortage of trained mental health professionals. The African Union (AU, 2022) notes that over 116 million people in Sub-Saharan Africa live with mental health conditions, yet less than 10% receive effective treatment, and services are predominantly urban-centered and inaccessible to many students. A systematic review by Othieno et al. (2021) revealed high levels of psychological distress among African university students, with internalizing symptoms such as anxiety and depression often overshadowed by externalizing behaviors like substance misuse and academic disengagement. These issues have a profound impact on the overall psychological wellbeing and academic success of students, thus demanding targeted interventions in higher education environments across the continent.

In Uganda, the mental health situation among students is increasingly alarming. A recent national report by the Ministry of Health (MOH, 2023) estimates that about 14% of Ugandan adolescents and youth are affected by common mental health disorders, with university students being particularly at risk due to academic pressure, economic hardships, social transitions, and a lack of psychosocial support systems. Internalizing problems such as depression are highly prevalent among Ugandan students, with some studies indicating that over 20% of university students in Uganda have moderate to severe depressive

symptoms (Sserwanja et al., 2022). Additionally, externalizing behaviors such as alcohol abuse, aggression, and risky sexual behavior are on the rise in university settings, contributing to low psychological wellbeing and increased dropout rates (Ninsiima & Namatovu, 2021). Unfortunately, mental health services in many Ugandan universities are under-resourced, and mental illness is still surrounded by stigma, leading to low help-seeking behavior among students.

Focusing on Kampala District, which is home to a significant concentration of private universities in Uganda, the situation is particularly pressing. Kampala, being the capital and the most urbanized district in the country, hosts thousands of students in its over 30 private universities and tertiary institutions (National Council for Higher Education - NCHE, 2023). The urban pressures of life in Kampala, coupled with the competitive academic environment and socio-economic disparities, have led to a rise in both internalizing and externalizing mental health challenges among university students. A study conducted by Akena et al. (2022) among students in selected private universities in Kampala revealed that more than 40% of respondents reported symptoms of anxiety, while 28% exhibited signs of aggressive and risk-prone behavior indicative of externalizing problems. Moreover, the availability and access to counseling and psychological support services remain limited in private institutions, leading many students to silently struggle with poor psychological wellbeing.

Therefore, this study seeks to examine the influence of internalizing and externalizing mental health problems on the psychological wellbeing of students in selected private universities in Kampala District, Uganda.

Problem Statement

Mental health disorders among university students are a growing public health concern, particularly internalizing problems such as depression and anxiety, and externalizing behaviors such as aggression, substance abuse, and risk-taking, which significantly impair psychological wellbeing. Globally, it is estimated that one in every three university students experiences psychological distress during their academic life (WHO, 2023), leading to decreased academic performance, poor social relationships, and increased dropout rates. In Sub-Saharan Africa, studies have reported rising rates of mental health problems among university students, yet the majority remain undiagnosed and untreated due to stigma and limited access to mental health services (Othieno et al., 2021).

In Uganda, over 20% of university students have been found to suffer from moderate to severe symptoms of depression and anxiety, while externalizing behaviors such as substance misuse and aggression are increasingly common (Sserwanja et al., 2022). In Kampala District, which hosts the largest number of private universities,

mental health challenges among students are escalating, yet most institutions lack adequate psychosocial support systems (Akena et al., 2022). Despite this, there remains a gap in empirical studies that examine how internalizing and externalizing mental health problems influence students' psychological wellbeing. This study, therefore, seeks to bridge this gap by focusing on selected private universities in Kampala District.

Literature Review

A study conducted by Auerbach et al. (2018) revealed that internalizing disorders such as depression and anxiety are among the most prevalent mental health conditions affecting university students globally, with nearly one-third of students reporting symptoms of psychological distress. These internalizing issues often go undetected because students tend to internalize their pain, leading to emotional withdrawal, low self-esteem, and suicidal thoughts, all of which negatively affect psychological wellbeing. In contrast, externalizing mental health problems such as conduct disorders, aggression, and substance abuse manifest outwardly and are more likely to result in disciplinary action rather than therapeutic intervention. A study conducted by Oppong Asante and Meyer-Weitz (2021) in Ghana found that externalizing behaviors among university students were strongly associated with environmental stressors, peer influence, and lack of institutional support systems, leading to strained interpersonal relationships and poor adjustment to academic environments.

In Uganda, a study conducted by Kaggwa et al. (2022) established that internalizing symptoms, particularly anxiety and depressive symptoms, were present in over 28% of university students, while about 15% exhibited externalizing behaviors such as substance abuse and aggression. Similarly, a study conducted by Muwanguzi, Ntale, and Kamoga (2023) among private university students in Kampala found that both internalizing and externalizing mental health challenges significantly lowered students' psychological wellbeing, resulting in increased absenteeism, academic disengagement, and strained social interactions. Another study conducted by Ssebunya et al. (2023) in Kampala private universities highlighted that the lack of targeted mental health services and the stigma attached to seeking help contributed to the worsening of psychological distress among students. Furthermore, the study emphasized the limited integration of mental health programs in university policies and curriculum, which limits students' access to timely interventions.

Methodology

The study employed a cross-sectional research design to assess the influence of internalizing and externalizing mental health problems on the psychological wellbeing of students in selected private universities in Kampala District, Uganda. This design was appropriate for capturing data from a relatively large population at a single point in

time and allowed the researcher to examine associations between mental health symptoms and psychological wellbeing effectively (Creswell & Creswell, 2018). The research was conducted in three purposively selected private universities in Kampala District, chosen based on their population size, program diversity, and accessibility to the researcher. A sample size of 316 students was determined using Cochran's formula (1977), adjusted for the finite population of university students, with a 95% confidence level and a 5% margin of error. Stratified random sampling was used to ensure proportional representation across faculties and academic years, after which simple random sampling was applied to select respondents from each stratum.

Data were collected through a structured, self-administered questionnaire divided into three key sections: demographic characteristics, indicators of internalizing and externalizing mental health problems, and psychological wellbeing. The Strengths and Difficulties Questionnaire (SDQ) was used to measure internalizing symptoms such as emotional distress and peer relationship problems, as well as externalizing behaviors such as conduct problems and hyperactivity. The SDQ has been widely validated in diverse populations, including African contexts (Goodman, 2001; Hoosen et al., 2018). Psychological wellbeing was measured using Ryff's Psychological Wellbeing Scale, which assesses six dimensions including autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance (Ryff, 1989; Abbott et al., 2006). The instruments were pre-tested on a sample of 30 students from a different university in Kampala to evaluate clarity, reliability, and cultural relevance, and the Cronbach's alpha coefficients for each subscale were found to be above the acceptable threshold of 0.70 (Tavakol & Dennick, 2011).

Ethical approval was obtained from the institutional review board of the lead university. Informed consent was obtained from each participant prior to their involvement in the study. Participation was entirely voluntary, and measures were taken to ensure anonymity and confidentiality, in accordance with research ethics guidelines (Israel & Hay, 2006).

Collected data were first coded and cleaned using Microsoft Excel before being exported to SPSS version 26 for descriptive and bivariate analyses. Descriptive statistics such as means, standard deviations, frequencies, and percentages were used to summarize demographic variables and item distributions. Pearson correlation analysis was conducted in SPSS to examine the strength and direction of associations between internalizing and externalizing mental health symptoms and psychological wellbeing (Field, 2018). Further inferential analysis was conducted using STATA version 15, where multiple linear regression was performed to determine the predictive influence of internalizing and externalizing

variables on psychological wellbeing, while controlling for demographic characteristics such as age, gender, and academic level (Acock, 2018). A significance threshold of $p < 0.05$ was used for statistical interpretation.

Results

Table 1: Multivariate linear regression for the role of internalizing and externalizing mental problems in influencing students' psychological wellbeing

	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	265.626	5.095		52.134	0.000
Index for Externalizing mental health problems (based on ten items)	-1.184	0.275	-0.264	-4.311	0.000
Index for Internalizing mental health problems (based on ten items)	-1.344	0.279	-0.295	-4.815	0.000
F-statistic=49.604, p-value =.000, R-squared=.247					

Source: Primary data, 2024

The study findings in Table 1 indicate that the multivariate linear regression analysis assessed the role of internalizing and externalizing mental health problems in influencing students' psychological well-being. The regression model reveals critical insights into how these mental health challenges impact students. The constant (intercept) is 265.626, suggesting that when both internalizing and externalizing mental health problems are absent, students have a baseline psychological well-being score. The unstandardized coefficients show that for each unit increase in externalizing mental health problems, psychological well-being decreases by 1.184 (Std. Error = 0.275), while for internalizing mental health problems, the decrease is 1.344 (Std. Error = 0.279). This negative relationship highlights the significant impact that both types of mental health issues have on students' overall well-being.

Additionally, the study findings indicate that the standardized coefficients (Beta) for externalizing problems is -0.264, and for internalizing problems, it is -0.295. This suggests that internalizing mental health problems exert a slightly stronger negative effect on psychological well-being compared to externalizing issues. The statistical significance of both influencers is further reinforced by their t-values of -4.311 ($p < 0.001$) for externalizing problems and -4.815 ($p < 0.001$) for internalizing problems. These results confirm the hypothesis that both

types of mental health challenges are significant influencers of psychological well-being among students.

Moreover, the overall regression model is statistically significant, as indicated by the F-statistic of 49.604 ($p < 0.001$). This suggests that the model effectively explains the relationship between the influencers and psychological well-being. The R-squared value of 0.247 indicates that approximately 24.7% of the variance in psychological well-being can be attributed to the presence of internalizing and externalizing mental health problems. This finding aligns with the PWB theory, which posits that mental health challenges significantly affect overall well-being, reinforcing the need for targeted interventions.

These results also resonate with Bronfenbrenner's Ecological Theory, which emphasizes the influence of environmental factors on individual behavior and mental health. The significant impact of both internalizing and externalizing mental health problems suggests that universities must address these issues within the context of their broader social environment. Interventions aimed at managing these mental health challenges such as counseling services, support programs, and community resources are essential for fostering a supportive environment that enhances students' psychological well-being.

In conclusion, the study findings in Table 4.11 underscore the critical roles of both internalizing and externalizing mental health problems in influencing the psychological well-being of students. This highlights the necessity for comprehensive mental health support systems within universities to effectively address these challenges, ultimately promoting better psychological outcomes for students and improving their overall university experience.

Qualitative results

This finding presents interview responses aimed at examining the influence of internalizing and externalizing mental health problems on the psychological well-being of students in selected private universities in Kampala District, Uganda. The objective is to explore how these distinct categories of mental health challenges impact students' emotional states, academic performance, and social interactions. Through thematic analysis, we delve into participants' narratives to uncover the complex interplay between internalizing issues, such as depression and anxiety, and externalizing behaviors, such as aggression and defiance. The insights gathered from students, counselors, and university staff reveal how these mental health problems can lead to cycles of distress, isolation, and academic difficulties. By analyzing these responses, we aim to illuminate the multifaceted effects of mental health issues on students' overall well-being and to identify potential areas for intervention and support within the university context. This exploration was critical for developing comprehensive strategies to enhance student mental health and foster a supportive academic environment.

When asked about the influence of internalizing and externalizing mental health problems on the psychological well-being of university students, several participants provided insightful perspectives:

One student experiencing depression described how internalizing challenges lead to feelings of emptiness, low motivation, and self-isolation. She explained that as her depressive symptoms intensify, she feels increasingly disconnected from others, exacerbating her loneliness and disengagement from academic pursuits. This ongoing cycle ultimately undermines her overall well-being (Source: DS-1).

Another student with ADHD shared that his condition creates persistent stress due to academic underperformance and constant feedback from lecturers about his inattentiveness. Over time, these experiences have made him feel inadequate and anxious, significantly damaging his self-esteem (Source: ADHD Student, 2024).

A university counselor emphasized that both internalizing and externalizing mental health issues dramatically compromise students' mental stability and emotional balance. He noted that while students with internalizing problems may silently endure emotional exhaustion, those exhibiting externalizing behaviors often face strained peer relationships and institutional penalties, further worsening their distress (Source: UCU-4).

A hall warden highlighted those externalizing problems, such as defiance or aggression, create fear and discomfort within residential communities. In contrast, internalizing issues often lead students to withdraw, making them vulnerable to isolation and bullying (Source: HWU-1).

When asked to share experiences or observations illustrating the influence of mental health issues on students, several poignant examples emerged:

One student recounted the story of a close friend who struggled with anxiety and stress. Over time, this friend gradually stopped attending lectures and began avoiding group discussions, eventually facing academic probation and displaying signs of emotional instability. The respondent noted that these events clearly demonstrated how untreated internalizing problems can escalate into significant academic and psychological breakdown (Source: PS-4).

A participant living with Oppositional Defiant Disorder (ODD) reflected on his experiences of getting into repeated arguments with both peers and instructors. He admitted that these confrontations left him feeling alienated and misunderstood, leading to increased anxiety and a sense of rejection, which further deteriorated his emotional state (Source: ODDS-4).

The Dean of Students recounted a particularly painful incident involving a bright student recognized for her academic excellence who, over time, fell into depression and gradually lost interest in everything around her. Despite various interventions, she ultimately dropped out of school. He emphasized that this case starkly illustrated how internalized mental health issues, when not addressed early, can

obliterate a student's potential (Source: DSU-1).

Meanwhile, the university counselor described how some students with externalizing issues are often misjudged as troublemakers and face disciplinary actions without receiving the therapeutic support they need. He noted that this stigma can drive some of these students towards further aggression or substance abuse, ultimately impacting their emotional well-being and academic performance (Source: UCU-4).

When asked about effective initiatives or programs to enhance students' psychological well-being in the context of mental health challenges, several insightful suggestions emerged:

A student dealing with depression proposed establishing mental health peer support groups on campus. In these groups, students could openly share their experiences and receive encouragement without fear of judgment. She emphasized that such groups could help reduce stigma and promote a culture of openness (Source: DS-4).

A participant with ADHD recommended training faculty and staff to recognize the symptoms of neurodivergent conditions and respond with support rather than discipline. He also emphasized the necessity for academic accommodations, such as extended deadlines and quiet testing environments, to help students thrive (Source: ADHDS-3).

A university counselor advocated for a comprehensive mental health awareness campaign across the university. This campaign would include workshops, screening clinics, and dedicated mental wellness days, fostering a culture of understanding that encourages students to seek help early (Source: UCU-4).

A hall warden suggested implementing a residential mental wellness program, where wardens and student leaders receive basic psychological training to detect early warning signs of distress. This training would enable them to refer students to counseling services before issues escalate (Source: HWU-1).

Lastly, the Dean of Students proposed a holistic student wellness initiative that integrates counseling services with emotional intelligence training, stress relief activities (such as art and sports therapy), and career support throughout the academic journey. He emphasized that such an integrated approach would promote overall student well-being (Source: DSU-1).

In conclusion, the qualitative findings of this study underscore the profound influence of internalizing mental health problems on the psychological well-being of students. Responses from university officials reveal that issues like depression and anxiety lead to feelings of hopelessness, social withdrawal, and significant academic challenges. Therefore, universities must create supportive environments that not only address individual mental health needs but also promote overall wellness, enabling students to lead fulfilling and meaningful lives. Through such initiatives, institutions can enhance the psychological well-being of

their students, ultimately fostering a healthier academic community.

Discussion of results

The regression results demonstrated that both forms of mental health challenges negatively affected students' psychological wellbeing, with internalizing problems such as anxiety and depression having a slightly stronger negative effect ($\beta = -0.295$, $p < .001$) compared to externalizing problems like aggression and conduct disorders ($\beta = -0.264$, $p < .001$). The statistical significance of these relationships, along with an R-squared value of 0.247, confirmed that nearly 25% of the variation in students' psychological wellbeing could be explained by these mental health issues. This finding resonates with prior research conducted by Auerbach et al. (2018), who found that internalizing disorders including depression and anxiety were among the most common mental health conditions globally affecting university students, with approximately one-third experiencing psychological distress. Similar to the current study, Auerbach et al. noted that such internalizing problems often remain undetected, as students internalize their emotional suffering, leading to withdrawal, low self-esteem, and psychological breakdown patterns which were echoed in the qualitative narratives of the present study. Students interviewed described feelings of emptiness, social isolation, and academic disengagement as a result of these internalizing symptoms, supporting the observation by Auerbach et al. that these problems severely impair students' psychological health.

It was further established through the qualitative data that externalizing problems such as defiance, aggression, and inattentiveness also contributed to psychological distress, often leading to disciplinary action and peer conflicts. These results aligned with the findings of Oppong Asante and Meyer-Weitz (2021) in Ghana, who reported that externalizing behaviors among university students were frequently linked to environmental stressors, peer influence, and inadequate institutional support systems. Their study emphasized how these behaviors led to poor adjustment and strained relationships in academic environments a pattern also captured in this study through interviews with hall wardens and counselors who observed fear, discomfort, and social rejection among students with externalizing tendencies. In the Ugandan context, this study's results were consistent with those of Kaggwa et al. (2022), who found that over 28% of university students experienced internalizing symptoms while approximately 15% exhibited externalizing behaviors. This correlation was further supported by Muwanguzi, Ntale, and Kamoga (2023), who concluded that both categories of mental health problems negatively impacted psychological wellbeing, contributing to academic disengagement, frequent absenteeism, and poor social interaction effects similarly noted in the qualitative

responses of students and university officials in the current study.

Conclusions

It was concluded that both internalizing and externalizing mental health problems had a significant negative effect on the psychological wellbeing of students in private universities in Kampala District. Internalizing problems such as anxiety, depression, and emotional withdrawal were more prevalent and had a slightly stronger negative impact on students' wellbeing compared to externalizing behaviors like aggression, substance abuse, and defiance. These challenges contributed to increased absenteeism, academic disengagement, social withdrawal, and strained peer relationships. It was concluded that the lack of targeted mental health services, stigma associated with seeking help, and limited integration of mental health programs within university policies and curricula further worsened the psychological distress experienced by students. These institutional gaps hindered early intervention and support, leaving many students without adequate coping mechanisms or professional assistance.

Recommendations

It was recommended that private universities in Kampala District urgently develop and implement comprehensive, student-centered mental health programs that are embedded within institutional policies, curricula, and support services to ensure timely identification, intervention, and follow-up for both internalizing and externalizing mental health issues. Universities should prioritize the establishment of accessible and confidential counseling centers staffed with trained mental health professionals who are equipped to offer psychological assessments, therapy, and crisis interventions tailored to students' unique needs and cultural contexts.

Moreover, awareness and sensitization campaigns should be regularly conducted across campuses to demystify mental health issues, reduce the stigma associated with seeking psychological help, and encourage students to openly discuss their emotional and behavioral challenges without fear of judgment or discrimination. In addition, academic staff and peer leaders should be trained in mental health first aid and early detection of distress symptoms, enabling them to play a supportive role in identifying and referring students who may be silently struggling with depression, anxiety, aggression, or substance abuse.

Universities should also collaborate with external mental health organizations, government health agencies, and civil society to develop resourceful partnerships that can provide technical, financial, and logistical support for sustainable mental health initiatives. Furthermore, institutions must create safe, inclusive, and engaging learning environments that promote positive coping mechanisms, resilience, and emotional wellbeing through mentorship

programs, extracurricular activities, peer support groups, and wellness clubs.

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