FREQUENTLY ASKED QUESTIONS ABOUT COLLEGE STUDENT MENTAL HEALTH DATA AND STATISTICS



The answers to the Frequently Asked Questions below provide basic facts and statistics about mental health in college student populations in the U.S. The information is intended to be useful for audiences who need basic background information, particularly the media and others communicating about college student mental health.

- (1) How many students are experiencing mental health problems?
- (2) Are mental health problems increasing in college populations? If so, why?
- (3) Are college students at higher risk for mental health problems than young adults not in college?
- (4) What is the economic case for investing in student mental health?
- (5) How does student mental health relate to academic outcomes?
- (6) Which types of students are at higher or lower risk for mental health problems?
- (7) What are the available data sources regarding mental health in college populations?
- (8) Which types of institutions have higher or lower prevalence of mental health problems?

(1) How many students are experiencing mental health problems?

A total of 39% of students are experiencing a significant mental health issue, according to our 2016-2017 Healthy Minds Study data (54 schools and approximately 50,000 student participants). This suggests that approximately 8 million students nationwide are experiencing these conditions (39% of 21 million students enrolled in higher education). More specifically, our survey data indicate the following prevalence rates: 14% of students with severe symptoms of depression (15+ score on the PHQ-9); 10% with severe symptoms of anxiety (15+ on the GAD-7); 9% with probable eating disorders (3+ on the SCOFF); 21% with non-suicidal self-injury in the past year; and 11% with serious thoughts of attempting suicide in the past year. Note these numbers for specific conditions add up to more than the 39% overall prevalence, because many students are experiencing more than one condition. It is also important to note that many students are experiencing positive mental health; 42% of students are in the highest interval of the Flourishing Scale (48+ out of 56) in our survey data.

You might have seen very different numbers from other sources. Prevalence rates for mental health conditions can vary substantially, depending on the sampling approach and the screening measures. For example, in clinical samples (i.e., students who are receiving mental health care) such as those in the Center for Collegiate Mental Health's data reports, prevalence rates tend to be higher, because these samples focus on students who have an apparent need for services (whereas our Healthy Minds estimates focus on general student populations). As another example, a single-item question about experiencing distress (e.g., NCHA's question about feeling overwhelmed at any point in the previous year) tends to yield much higher percentages than clinical screens such as the PHQ-9 or GAD-7.

The following is a selected list of resources where you can find additional estimates of the prevalence of mental health conditions in college and university populations:

- <u>Healthy Minds data interface</u>: This website allows you to explore the Healthy Minds data in more detail. For example, you can look up variations across student sub-populations and examine trends over time.
- <u>Healthy Minds publications</u>: This page contains a selected list of publications using the Healthy Minds, exploring a variety of topics in more depth. Publications reporting overall prevalence estimates include a <u>2013</u> <u>study</u> (summarizing data from 2007-2011) and a report summarizing data from 2016-2017.

- <u>ACHA-NCHA</u>: This is the largest, longest-running survey study of college student health. Although it covers the full spectrum of health issues, the survey has increased its coverage of mental health issues in recent years. The website includes annual data summaries and instructions for applying to work directly with the data sets.
- <u>Center for Collegiate Mental Health</u> (CCMH): This network of hundreds of college and university counseling centers has generated enormous standardized data sets regarding the mental health concerns of students who visit and receive services from the centers.

(2) Are mental health problems increasing in college populations? If so, why?

More college students than ever are using mental health services, but this does not necessarily signify an increase in mental health problems. An alternative explanation is that students are simply more likely to seek or access services as a result of increased knowledge and comfort regarding those services. This latter explanation is consistent with the relatively low levels of stigma that students report in our Healthy Minds Study: fewer than 10% of students agree with statements such as "I would think less of someone who has received mental health treatment."

Our overall read of the data, however, is that the prevalence of mental health problems is in fact increasing somewhat in college populations. In our Healthy Minds data, for example, we have observed a rise in past-year suicidal ideation ("seriously thought about attempting suicide") from 6-8% during our earlier years of the survey (2005-2013) versus 11% in 2016-2017. This is consistent with evidence that depressive symptoms and suicidal risk has increased in general adolescent populations in the U.S. since 2010 (Twenge et al., 2018). That study speculates that increased use of electronic media, especially social media, has been an important contributing factor. For college populations specifically, another potential factor is that increased access to services has allowed a greater number of adolescents with mental health problems to make it to college.

Read more:

- <u>Healthy Minds data interface</u>: This website allows you to examine trends over time (select "Survey year" for the sample breakdown).
- Healthy Minds book chapter reporting data from 2016-2017
- Article by Twenge and colleagues

(3) Are college students at higher risk for mental health problems than young adults not in college?

College students are at approximately the same risk as young adults not in college, according to a study by Blanco et al. (2008). Using data from the National Epidemiologic Study on Alcohol and Related Conditions (NESARC), they find that in both college and non-college persons ages 19-25, the overall prevalence rates are nearly 50% for a psychiatric disorder in the past year. Alcohol use disorders are more prevalent for college students, although treatment rates are very low for alcohol and other substance use disorders. Bipolar disorder is significantly less common in the college population.

Thus, available evidence suggests that college students do not necessarily have greater needs than other young people. But students can benefit from the unique opportunity for population health initiatives in campus settings. Most campuses are integrated communities with substantial human and organizational resources that can be leveraged to enact change for entire student populations. Improving student mental health would have not only a direct impact on individual wellbeing but also positive returns to campuses and society at large, given that student mental health is a significant predictor of many important functional outcomes, including academic performance and retention (Arria et al., 2013; Eisenberg, Golberstein, & Hunt, 2009), and future employment/workplace productivity (Wang et al., 2007).

Read more:

- Article by Blanco and colleagues (2008)
- Article by Arria and colleagues (2013)
- Article by Eisenberg and colleagues (2009)
- Article by Wang and colleagues (2007)

(4) What is the economic case for investing in student mental health?

The economic benefits are much greater than the costs of investing in student mental health services and programs, based on our analysis of data from the Healthy Minds Study data. The logic is that improving student mental health can increase retention, leading to increased tuition revenue for the institution and increased lifetime productivity for the students themselves. This economic case can apply to treatment services as well as prevention programs, as long as the services or programs are effective in improving mental health. As an example, our data suggest that a program that reduces depressive symptoms for 500 students (whether through treatment or prevention), can yield several million dollars in economic benefits while costing less than one million dollars. This type of example can be scaled up or down to programs that are larger or smaller.

Read more:

- Article by Eisenberg and colleagues (2009)
- Research brief summarizing the economic case (see Issue 1)
- Example memo about the economic case that we provide to schools in the Healthy Minds Study
- Whitepaper by Kognito
- RAND study applying the economic case to colleges and universities in California

(5) How does student mental health relate to academic outcomes?

Mental health conditions such as depression and anxiety are strong negative predictors of academic outcomes such as persistence/retention and grade point average (GPA). In our original analysis of this relationship, using Healthy Minds data from the University of Michigan during the period of 2005-2008, we found that a positive screen for depression (using the PHQ-9) was associated with approximately double the risk of departing college without graduating. That finding was the original basis for the economic case for student mental health services, as described above. We also found that depressive symptoms predicted a reduction in GPA over time, and this was especially true when anxiety symptoms were also present. Since that original analysis, we have had similar findings using data from a range of other colleges and universities. Amelia Arria and her colleagues have also found significant relationships between academic outcomes and both mental health and substance use measures in their longitudinal College Life Study.

Read more:

- Article by Eisenberg and colleagues (2009)
- Analysis by Arria and colleagues from the College Life Study

(6) Which types of students are at higher or lower risk for mental health problems?

Across fields of study, we have found in Healthy Minds data that students in humanities and art and design are significantly more likely to experience mental health problems. High levels of perceived competition in one's classes are also associated with increased risks of depression and anxiety, especially among queer, first-generation, Black and Latinx students. Other notable variations include a higher prevalence of mental health problems among undergraduate students compared to graduate students, a higher prevalence of depression among students of color compared to white students, a higher prevalence of anxiety among women compared to men, and a higher prevalence of all mental health problems among students from lower socioeconomic backgrounds and among students with minority sexual orientation or gender identities. We have also found that weight status is the most consistent predictor of eating disorder symptoms, with students in the overweight or obese range at highest risk.

Students engaging in substance use—particularly cigarettes, binge drinking, and marijuana—have somewhat higher risk of experiencing poor mental health. Experiencing assault or abuse in the previous year is another clear risk factor for mental health symptoms. Low physical activity and sleep difficulties are also correlated with mental health problems, while resilience and coping skills are well-established protective factors. Campus climate also correlates with mental health; students who report a low sense of belonging and have a negative perception of support and responsibility among their peers and themselves, are at substantially higher risk for mental health problems.

Read more:

- Articles by Lipson and colleagues (2015 and 2016)
- Healthy Minds book chapter reporting data from 2016-2017

(7) What are the available data sources regarding mental health in college populations?

The following are data sources that focus on mental health in college populations:

American College Counseling Association Community College Survey (ACCA): The ACCA Community College Task Force administers an annual survey with the purpose of gathering benchmark data about common practices for mental health counseling in community and two-year colleges.

American College Health Association-National College Health Assessment (ACHA-NCHA): The ACHA-NCHA is a nationally recognized survey that assists schools in collecting data about their students' health habits, behaviors, and perceptions. Although it covers the full spectrum of health issues, the survey has increased its coverage of mental health issues in recent years.

Association for University and College Counseling Center Director Survey (AUCCCD): AUCCCD developed and administers the Annual Director Survey to its membership as a means to increase understanding of those factors critical to the functioning of college and university counseling centers.

Center for Collegiate Mental Health Database (CCMH): CCMH is a multidisciplinary, member-driven network focused on providing accurate and up-to-date information on the mental health of college students who visit and receive services from school counseling centers. The collaborative efforts of more than 500 college and university counseling centers and supportive organizations have enabled CCMH to build one of the nation's largest databases on college student mental health.

Healthy Minds Study (HMS): HMS is an annual web-based survey study examining mental health, service utilization, and related issues among undergraduate and graduate students. Since its national launch in 2007, HMS has been fielded at more than 200 colleges and universities, with over 200,000 survey respondents.

National Research Consortium of Counseling Centers in Higher Education Studies: The National Research Consortium of Counseling Centers in Higher Education, housed at the University of Texas Counseling and Mental Health Center, conducts large-scale, national research studies on mental health in college students. Five different studies have been completed since its inception. The most recent study on the nature of suicidal crises in college students, involved over 26,000 participants from 70 U.S. colleges and universities, establishing the largest dataset of in-depth college student suicidal behavior. Two past research studies have used a clinical student population, and two other studies have dealt with a non-clinical student population.

(8) Which types of institutions have higher or lower prevalence of mental health problems?

While high rates of mental health problems and low treatment utilization are major concerns at all types of institutions of higher education, substantial variation occurs across campuses. At four-year colleges and universities, the following institutional characteristics are associated with worse mental health in Healthy Minds data: doctoral-granting, public, large enrollment, nonresidential, less competitive, and lower graduation rates. Among students with apparent mental health problems, treatment utilization is higher at doctorate-granting institutions, baccalaureate colleges, institutions with small enrollments, and schools with a high proportion of students living in campus housing. We have also examined mental health on community college campuses, where rates of depression and anxiety appear to be even higher than on four-year campuses.

Read more:

• Article by Lipson and colleagues (2015)

About this document:

- These FAQs provide basic facts and statistics about mental health in college student populations in the U.S., using data from the Healthy Minds Study and other national sources.
- The information is intended to be useful for audiences who need basic background information, such as journalists or anyone preparing a presentation or communication about college student mental health.
- This initial FAQ document was prepared by the Healthy Minds Network team, with feedback from participants at the 2018 College Mental Health Research Symposium at the University of Michigan.
- This is a working document and we intend to add new questions and answers. Please email us at healthyminds@umich.edu if you have suggestions for new questions to include or additional information for existing answers. We welcome your feedback at any time!

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