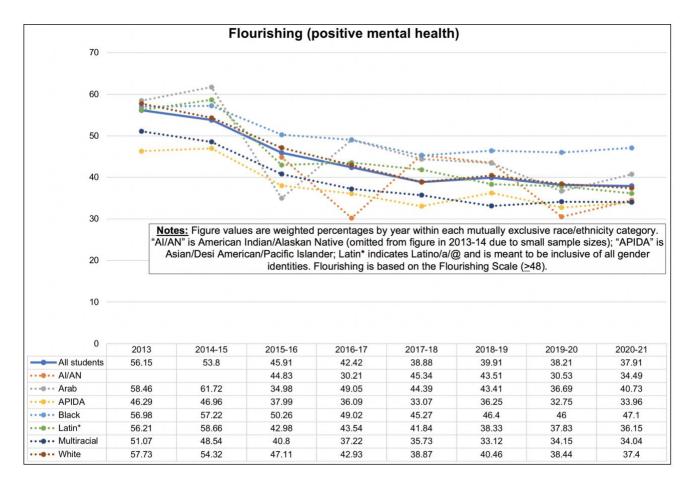
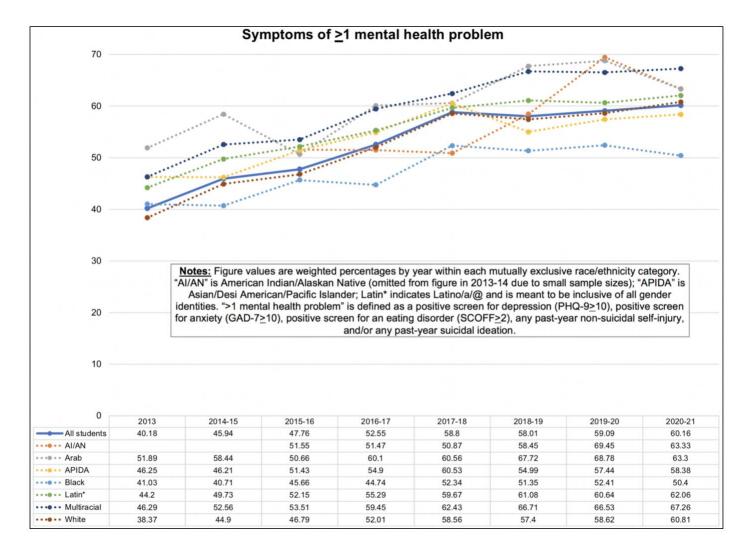
New Healthy Minds paper documents mental health inequalities experienced by students of color

Our team's <u>latest paper</u>, published in the *Journal of Affective Disorders*, uses 8 years of Healthy Minds Study data to document trends in mental health prevalence and treatment-seeking in college student populations. We examine trends for seven groups: American Indian/Alaskan Native, Arab/Arab American, Asian/Pacific Islander/Desi American, Black/African American, Latinx, White, and multiracial. Data come from >350,000 students at 373 U.S. colleges and universities from 2013-2021. Findings underscore the urgent need to identify and implement best practices to bridge the mental health equity gap. Below is a summary of key findings and implications.

What do the findings indicate about rising mental health prevalence in college populations?

While the high and rising prevalence of mental health problems has been documented in overall student populations, little is known about trends for specific racial/ethnic groups. For each of the prevalence outcomes examined in this paper, annual trends reveal worsening mental health among all students. For symptoms of depression, anxiety, suicidal ideation, and one or more mental health problems, prevalence increased most significantly among racial/ethnic minority students. As shown in the figures below, American Indian/Alaskan Native students experienced largest decreases in flourishing of any group as well as largest increases in meeting criteria for one or more mental health problems from 2013-2021.





What can we learn from this study about the mental health "treatment gap" and inequalities therein?

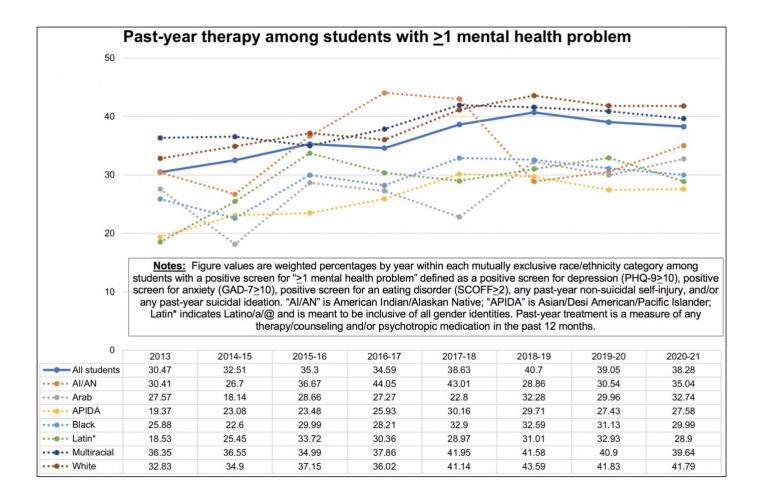
The mental health "treatment gap" represents the proportion of students with apparent symptoms who have not received mental health treatment. The figure below shows past-year

therapy/counseling among students with symptoms of one or more mental health problems. Findings from this study show that little progress has been made—and indeed a worsening of inequalities has occurred—when it comes to the mental health 'treatment gap' for racial/ethnic minority students. For example, although Arab American students experienced a 22% increase in meeting criteria for one or more mental health problems over the study period, there was an 18% decrease in past-year treatment

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- Jasmine Morigney

among Arab American students with one or more problems. Jasmine Morigney, Healthy Minds Study researcher, study co-author, and clinical psych PhD student, notes "The treatment gap highlights a number of systemic issues related to health disparities, stigma, and the shortage of mental health professionals. Such barriers to the use of mental health services can be quite daunting for students of color."



What does this study reveal about trends during the COVID-19 pandemic?

The data analyzed span the start of the COVID-19 pandemic, including spring 2020, fall 2020, and spring 2021. Prevalence of one or more mental health problems increased slightly among all students from 58% in 2018-2019 (last academic year pre-pandemic) to 60% in 2020-2021 (first complete year in the pandemic). The most notable increases over this period were for American Indian/Alaskan Native and Asian students. While data reveal that past-year treatment decreased slightly in the overall sample before vs. during the COVID-19 pandemic (52% in 2018-2019 vs. 50% in 2020-2021), treatment rates declined more notably for certain groups, including Asian students. Furthermore, the pandemic has exacerbated students' known mental health risk factors (e.g., discrimination among Asian students). Related, Dr. Sasha Zhou, in addition to her role on this paper, has led research examining the mental health impact of discrimination against Asian American and Pacific Islanders.

Concurrently, disparities perpetuated by structural racism have led Black, Latinx, Al/AN, Pacific Islander communities to be disproportionately affected by the pandemic.

What do we risk if the trends revealed in this study continue?

"The time is now to address these trends and ensure they do not continue into the next decade for tomorrow's college students of color."

- Akilah Patterson

Healthy Minds Study researcher, study co-author, and public health PhD student Akilah Patterson notes, "If the trends revealed in this study continue, we risk sustaining the status quo related to race/ethnicity and higher education. There is a history of not welcoming students of color in higher education spaces and this study indicates that little progress has been made over the past decade to address mental health outcomes and some inequalities have worsened. With today's conversations related to equity and anti-racism, the time is now to address these trends and ensure they do not continue into the next decade for tomorrow's college students of color."

Healthy Minds Student Associate Research Assistant, study co-author, and undergraduate public health student Meghna Singh agrees wholeheartedly with Patterson's perspective: "There must be a significant, immediate investment by post-secondary education leaders to not only prioritize well-being in academic environments, but also increase capacity to connect students to culturally sensitive mental health professionals and resources."

The Equity in Mental Health Framework

The Steve Fund, in collaboration with the JED Foundation, developed the Equity in Mental Health Framework, which outlines actionable recommendations for campuses to support racial/ethnic minority students. These include: building trust through racial trauma-informed leadership; taking a collaborative approach to promote mental health for racial/ethnic minority students; engaging faculty and staff to support the mental health of racial/ethnic minority students; treating student mental health as a priority for investment; and leveraging community and external

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stakeholders to promote mental health and emotional wellbeing of racial/ethnic minority students. The framework focuses on system-level change to promote mental health equity; this is in line with an anti-racist approach to mental health, seeing inequalities as stemming from systems (rather than individuals) and thus, the most promising opportunities to advance equity, lie within these systems. The framework has been most effectively implemented with: cross-departmental/-unit collaborations (e.g., counseling centers, offices of diversity, equity, and inclusion, student affairs, academic units); dedicated financial resources to prioritize the mental health of racial/ethnic minority students; and buyin and active participation from administrative leaders (e.g., presidents, deans, directors, department chairs).

Full article available online: Trends in college student mental health and help-seeking by race/ethnicity.

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Data are essential for documenting inequalities and advocating for change. As a reminder, we make our Healthy Minds Study data available to researchers interested in working with the data. There are many resources available on our <u>website</u>, and we hope that more folks will use the data to advance understanding of mental health inequalities. Link to <u>HMS</u> data request form.

