

STUDENT WELLBEING**Student Mental Health: A University Crisis?**

University years often coincide with the critical transitional period, between the ages of 17 and 25 years, when mental health problems are most likely to onset. Students need to be equipped with the expectations and skills to cope with the challenges of life at university and that requires a whole university approach.

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University's challenges can bring on mental health issues.

Have you ever heard that the student years are the best of one's life? If so, you might wonder why this doesn't seem to be the case for so many at university. Australian and international research suggests university students experience heightened risks for the onset of mental health problems when compared to the general population and previous generations (Browne et al, 2017; Lewis et al, 2021). University years often coincide with the critical transitional period (between the ages of 17 and 25 years) when mental health problems are most likely to onset. Coupled with this, a recent UK government report says that the number of students in higher education experiencing mental health problems has doubled since 2014 (ONS, 2022). Over the last decade, the number of students disclosing a mental health condition to their university has increased fivefold. Over 90% of university counselling services have reported an increase in demand for their services. So, are we facing a crisis in student mental health?

The impact of COVID-19

The COVID-19 pandemic has added further to the strains on university students. Almost two in five (38%) new students reported that they felt unprepared for studying at university because of the loss of face-to-face learning. The majority of students (63%) witnessed a deterioration in their mental health since the start of COVID-19 pandemic (ONS, 2021). Throughout this pandemic, the phrase 'mental health' appeared in almost every media story about students, also appearing frequently in statements from government and other officials. "We need to think carefully about the implications for mental health for students" said Larissa Kennedy, President of the National Union of Students, in a BBC Radio 4's broadcast, when considering the restrictions students have faced during this pandemic. The evidence suggests that COVID-19 has exacerbated an already critical mental health crisis in our universities. But, are all students equally affected?

Heightened inequalities

Students from disadvantaged backgrounds and those with protected characteristics (for example, disability, race, religion) are disproportionately impacted by mental health issues, discrimination and associated stigma. Dropout rates amongst the most disadvantaged students have reached 8.8% for first year undergraduates, compared to 6.2% among their more advantaged peers. These figures have been rising steadily for the last few years, and it's clear that students from disadvantaged backgrounds are bearing the brunt of this. Students' experiences of this pandemic have been shaped by existing health and social inequalities. So, how can we better understand this and explain this apparent worsening crisis?

The "snowflake" narrative

Some have taken a critical stance, turning to the term "snowflake students" as an explanation for the reported crisis in student mental health. The "snowflake" narrative suggests that students are either exaggerating their mental health issues, or that they have been influenced by a political ideology that discourages resilience. In this sense, students are often viewed as being less tough, see themselves to be more victimised and are more prone to taking offence than previous generations. Yet, it's becoming increasingly clear that students experience stigma in relation to mental health issues and this acts as a barrier to them seeking treatment and speaking out about their difficulties (Kosyluk et al, 2021). This is concerning, as experiencing untreated mental illness can have a long-lasting negative impact on life, including poor academic achievement, reduced employment opportunities, poorly developed relationships and increased likelihood of mental health problems in later life (Taylor et al, 2022). What is clear is that this "snowflake" narrative sends out the message that it's "not OK to not be OK" as stigma presents a barrier to students disclosing mental health difficulties and seeking help.

Reflection of an uncertain world?

Perhaps instead, a more plausible explanation might be the challenges students face in the context of an increasingly uncertain world. Global financial recessions, the rising cost of living and education, insecure and precarious work, climate change and a turbulent political landscape have all contributed to significant increases in poor mental health among students (Weng & Gleason, 2021). This coupled with personal factors such as student debt, precarious job prospects, increasing rent prices – could it be that today's students really do have a tougher time than previous generations? This has certainly created a difficult environment for students to meet their full potential. To tackle the effects of this, we need an alternative to the “snowflake” narrative.

Beyond speculation

We can speculate about the causes and extent of the student mental health crisis and set this within the wider national conversation about stigma and mental health. But we know from the soaring demand being faced by mental health services and the impact on learning that students are at the sharp end of this crisis. Students have been disproportionately affected by the COVID-19 pandemic – particularly those from disadvantaged backgrounds. The last two years have been challenging, disruptive and overwhelming for many students. They have had restricted access to social support and remote learning has led to a significant decline in already low levels of mental health (Dodd et al, 2021). To better meet students' needs, we must work together to ensure that students are given the skills, supports and resources to effectively deal with these multiple, and interacting challenges, with tailored support for those who are most vulnerable.

The way forward – a whole university approach

Recent research has encouraged a 'whole university' approach to addressing student mental health involving partnerships and joined-up services (Cage et al, 2021). This approach focuses on ensuring that positive approaches to student mental health are embedded within all learning and teaching. It involves equipping students with the expectations and skills to cope with the challenges of life at university. Central to this is creating a sense of community and belonging within the university environment. Student led approaches such as 'peer mentoring' and 'buddy schemes' are just some of the ways in which social support can help buffer some of the challenges faced by students. Such supports need to be complemented by the provision of wider mental health services and the key role that trained mental health professionals have in helping students who are experiencing mental health issues (Broglia et al, 2021). Addressing the stigma surrounding mental health will help reduce some of the barriers around mental health help-seeking, particularly among the most vulnerable students. A whole university approach reflects a recent call for a clearly defined and coordinated approach towards university mental health supports and services (Maguire & Cameron, 2021). This whole university approach may be the best way to help prevent an escalating crisis in student mental health moving forward. Increasing awareness of the mental health problems faced by students has been an unfortunate consequence of the crisis's worsening over the course of the pandemic. Perhaps, though, there is the potential for this to direct attention towards finding a solution to an already urgent and critical problem.

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