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Mental Health Support and Advocacy for Undergraduate BGSU Students in Wood County, OH

Robert Lince

Honors Project

Submitted to the University Honors Program at Bowling Green State University in partial fulfillment of the requirements for graduation with University Honors.

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INTRODUCTION

This study is an exploration of common barriers to mental healthcare experienced by undergraduate college students attending Bowling Green State University (BGSU) in Wood County, Ohio. The study is also designed to investigate students' attitudes toward mental illness. To do so, I combined elements from both psychology and sociology. I analyzed the mental health of students and the ways in which their minds react to stressful stimuli and experiences in college to better understand the impact of mental health on their lives and connect my research to psychology. I applied this project to sociology by analyzing the topic of mental health and applying it at a societal level to explain current attitudes, outreach methods, and statistical trends. The main research question that guided this study was: Are providers in Wood County effective in advocating for and supporting undergraduate BGSU students with mental illnesses? Other questions addressed were: What is the awareness of the available mental health treatment and support programs across Wood County for BGSU undergraduates with mental illnesses? What are the attitudes of undergraduate BGSU students toward mental health?

My hypotheses included the following:

- 1) BGSU undergraduates are largely unaware of off-campus mental health resources but aware of on-campus resources, specifically the Counseling Center.
- 2) Wood County mental health outreach efforts provide insufficient support to the diverse BGSU student body.
- 3) Social stigmas toward mental illness impact students' willingness to access mental health resources.

The Mayo Clinic defines a mental illness as a disorder that affects your mood, thinking and behavior (2019). Among college students, the most prevalent forms of mental illness are

anxiety disorders, depression, and eating disorders (Pedrelli et al., 2015). I have experienced the devastating impacts poor mental health can have through the suicide of a childhood friend. As a result, I sought to raise awareness about available outreach programs as well as provide data to help mental health experts and counselors around Wood County better understand how future outreach and treatment plans can fit the knowledge and attitudes that BGSU undergraduate students have about mental illnesses. As college students face many pressures, both socially and academically, I think it is important to emphasize the importance of mental health and the toll it can take on an individual when improperly managed. As recent research suggests an increasingly concerning prevalence of mental illnesses on college campuses, this is an area of study that needs more focused attention and care than ever before (Mackenzie et al., 2011).

Twelve to eighteen percent of all college students have a diagnosable mental illness and many of those students exhibit their first psychiatric episode during college, with roughly 16% of all undergraduate students experiencing symptoms of anxiety and depression (Mackenzie et al., 2011). However, a study conducted by the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC) found that only 18% of college students surveyed with a mental health diagnosis in the previous 12 months had received treatment within the previous 12 months for that diagnosis (Pedrelli et al., 2015). This shows that, while there is a high prevalence of mental health conditions across college campuses, few students affected are receiving the care they need. This is an important topic that needs to be addressed to correct this trend and improve the mental health of undergraduate students in the future.

In Wood County, Ohio, outreach designed for BGSU undergraduate students is quite limited. While the on-campus Counseling Center reaches out to students via email and provides additional information around campus and on the BGSU website, little information about the off-

campus mental health organizations is visible on campus or provided via email. In order for students to effectively utilize those resources, it would require significant effort on the part of the individual to research the organizations and determine the best course of action. This is not uncommon on other college campuses around the country, as many institutions have implemented on-campus counseling resources that perform extensive outreach, while off-campus mental health organizations may lack the same frequency and effectiveness of outreach.

The optimal approach to mental health outreach and treatment for undergraduate college students requires continuity of care by professionals and organizations. The professionals and organizations should frequently communicate with the students so that they can maintain their mental health long-term and make students aware of treatment options in the local community (Pedrelli et al., 2015). On-campus counseling centers should develop extensive relationships with external organizations that can assist in the care of students and ensure that their mental health needs are met, while care received both on and off campus should be coordinated between the providers so that the students are receiving appropriate treatment and support (Pedrelli et al., 2015). Routine screening can also improve undergraduate student mental health and is a common tactic used by universities and medical professionals to help combat the increase in college student mental illness experienced on campuses all over the country (Mackenzie et al., 2012).

Another goal of my study was to analyze the stigmas that college students have about mental health conditions. Mental health is a very sensitive topic, but I hope that this is the study that can spark the much-needed dialogue on student mental illness at BGSU. While societal attitudes toward individuals with mental illnesses have improved in recent years, much work remains to raise awareness and provide education on this topic (Parcesepe & Cabassa, 2013). Additionally, by analyzing stigmas and attitudes that students at BGSU possess about mental

health, I sought to understand why students with mental illnesses are not seeking the necessary support and treatment.

Across the United States, roughly 60% of individuals with a mental illness do not receive the necessary treatment for a variety of reasons, ranging from societal stigmas to a lack of childcare and transportation, as well as a lack of knowledge and awareness of the available programs in and around the local community (Harvey & Gumport, 2015). This is a troubling trend that I hope to address through the knowledge gained from this study. Specifically, I hope to provide BGSU with information regarding mental health services, while also providing data to local organizations and facilities that may not fully recognize the lack of awareness that BGSU students have of the available mental health support.

Since anxiety and depression are more prevalent than other mental health conditions on college campuses due to the unique position of vulnerability experienced by undergraduate students, it is important to help students learn how to manage their high workloads, grueling exam schedules, and academic expectations (Bedewy & Gabriel, 2015). As more students are coming to BGSU each year, it is vital that they have information about not only the on-campus counseling resources but also those available off campus in the Wood County area. This is important because students in need of prescribed medications or specific treatment programs may need to consult a physician or other medical professional whose services are not available on the BGSU campus. Students need to be made aware of the off-campus resources as early as possible because a lack of identification of mental health conditions and inadequate treatment can contribute to the persistence of mental health symptoms among the college student population and negative long-term impacts (Pedrelli et al., 2015). Thus, this will help students

find the professional or organization that can best meet their specific set of needs and provide the most appropriate treatment in a timely manner.

Through the data obtained from my BGSU student survey, in addition to the insight provided by local individuals with extensive experience in working with and advocating for individuals with mental illnesses, care providers will be able to better understand how they can adjust their future outreach methods to reach a larger population of undergraduates at BGSU. If this topic is not analyzed and discussed around the BGSU campus and local community, students will continue to suffer in silence, continuing the increase in depression and suicidal thoughts on college campuses. I am hopeful that this study will serve as the starting point for improved mental healthcare availability and outreach to all undergraduate students at BGSU, while also helping students better understand how to seek the help they need and identify the local organizations best equipped to provide the appropriate care.

METHODS

BGSU Undergraduate Student Surveys

A survey (see Appendix 1) was administered to BGSU undergraduate students 18 years of age or older through Google Forms. Both quantitative and qualitative data were collected directly from the target population of students to better understand the toll that academic and social pressures can take on their mental health. Firsthand accounts from the students were extremely valuable when determining how future outreach and programming could be adjusted to promote positive mental health outcomes for BGSU undergraduates since they are the individuals directly impacted. Beginning on November 30th, 2020, students were contacted and recruited to take part in the survey. As an intern in the BGSU Office of Pre-Professional Programs, I was able to perform outreach to a large population of pre-professional students,

while also sending my outreach email and survey link to friends and classmates. My Project Advisor, Dr. Meredith Gilbertson, sent the survey link to her students and provided my outreach email and survey link to other faculty members who then provided the information to their students. I then re-contacted the pre-professional students to remind them to complete the survey on December 17th, 2020. The student survey was closed on December 24th, 2020, preventing any more students from responding to the survey. This allowed me to begin my analysis of the responses.

All student surveys were provided using the contact information available in the BGSU directory. Thus, there were likely several hundred students contacted throughout the process, as it was open for all BGSU undergraduates 18 or older. The outreach email informed students of the topic of my study as well as its goals. Students were also informed that they must be at least 18 years of age or older to complete the survey and were instructed to read the Informed Consent Form on the first page of the survey before clicking “Next” to provide me with consent to view their responses and analyze them for use in my final project. The survey should have taken approximately five minutes and was able to be accessed anywhere with a stable internet connection. There was no compensation associated with participation in the survey, and students did not take part in a debriefing session nor were they re-contacted regarding their answers or the survey process. Students experienced no change in academic standing or in their relationship with BGSU regardless of their decision of whether or not to complete the survey.

Quantitative Data

I collected data on several sociodemographic characteristics of the students in order to better understand the characteristics of my sample. Students were asked to anonymously indicate their status at BGSU (freshman, sophomore, junior, or senior), their age, their sex assigned at

birth, their current gender, and their place of residence (on campus, off campus, or outside of the BG area).

To measure the students' mental healthcare access, needs, use, and knowledge of resources, I asked a series of close-ended questions. First, I asked, "Do you know how to access mental healthcare, should you need it?" Next, I asked, "In the past 12 months, have you felt as though you were in need of mental healthcare?" and "If so, did you access mental health care?" Students were asked if they were aware of several different mental health support resources: A Renewed Mind, Harbor, the National Alliance on Mental Illness (NAMI) Wood County, Wood County Hospital, and the on-campus Counseling Center at BGSU.

Qualitative Data

In an open-ended question, students were asked, if they had not accessed needed mental healthcare, why had they not done so. I used an open-ended question here because I thought it was important to understand the students' reasoning, in their own words, for why they did not access mental healthcare when it was needed.

Mental Health Professional Surveys

The survey (see Appendix 2) for mental health professionals was intended for individuals with extensive experience working with individuals with mental illnesses around Wood County. Mental health experts were surveyed because of their expertise in this field, ability to understand the struggles of the students surveyed, and explain the current state of mental health outreach for BGSU undergraduates and how it could be improved. Thus, I performed outreach at BGSU and through some of the local organizations that provide mental health resources and support. By having individuals with different experiences and occupations in the local area provide answers to my survey, respondents were able to provide insight as to how the issue of mental health on

college campuses can be addressed in the future both on campus and in the local community. My outreach began on November 30th, 2020 and continued until I had the desired number of participants. The survey was provided through Google Forms to each individual willing to participate and was slightly longer than the survey for students, taking approximately 15 minutes to complete. The survey was accessible anywhere with a stable internet connection. There was no compensation associated with completion of the survey, and the participants were not part of a debriefing session nor were they re-contacted regarding their answers or the survey process. Additionally, the completion of the survey had no impact on the individuals' relationships with BGSU.

Mental health professionals were asked to indicate their name and current occupation within Wood County, OH, whether or not they would like their name and affiliation disclosed in my final project, their experience working with BGSU undergraduate students with mental illnesses, some of the reasons that mental health conditions are so prevalent on college campuses, their awareness of the available mental health programs for undergraduate BGSU students in Wood County, their thoughts as to why college students often fail to seek the necessary mental health support and treatment, and what can be done in the future to increase awareness and education of the available mental health resources for BGSU students in Wood County.

Analyses

The responses provided by the students were then analyzed further in-depth to provide context to my study and justification for my conclusions. Sociodemographic variables were used to help better understand the background and social contexts of the respondents while analyzing their knowledge of, need for, and access to mental health care. For the open-ended question

about reasoning for not accessing needed mental health care, I analyzed responses, looking for common themes.

Responses from the mental health professionals were analyzed, much in the same way as the student responses, to help provide context to my research and to the responses provided in the undergraduate student surveys. I again looked for themes in the responses in an attempt to better understand BGSU undergraduates' needs and access to mental healthcare.

RESULTS

BGSU Undergraduate Student Surveys

Quantitative Responses

Survey responses were completed by 124 BGSU undergraduate students. Table 1 summarizes responses to quantitative variables. Variable distributions indicate that the sample includes BGSU students who represent different grade levels, ages, sexes/genders, and residential statuses. The students in the sample also varied in their mental healthcare needs, mental healthcare access, and knowledge of local mental health care providers.

Table 1. Summary of Quantitative Variables (N = 124)

	Percent		Percent
Year at BGSU		Can access mental healthcare, if needed	
Freshman	33.1	Yes	67.7
Sophomore	25.0	No	13.7
Junior	16.9	Unsure	18.5
Senior	25.0		
Age		Past 12 mos., in need of mental healthcare	
18 years	24.2	Yes	58.1
19 years	27.4	No	41.9
20 years	20.2		
21 years	15.3		
22+ years	12.9		
Sex assigned at birth		Past 12 mos., accessed mental healthcare	
Male	19.4	Yes	25.0
Female	80.6	No	33.1
Intersex	0.0	Not applicable	41.9
Gender		Aware of local mental healthcare providers	
Man	19.4	A Renewed Mind	
Woman	77.4	Yes/No	3.3/96.7
Transgender	0.0	Harbor	
Gender not listed	3.2	Yes/No	10.5/89.5
		NAMI Wood County	
Residence		Yes/No	21.0/79.0
BGSU - on campus	31.5	Wood Co. Hospital (counseling services)	
Bowling Green, OH – off campus	44.4	Yes/No	29.8/70.2
Outside of Bowling Green area	24.2	BGSU Counseling Center	
		Yes/No	89.5/10.5

Of the 124 BGSU undergraduate participants, 41 students (33.1%) were freshman, 31 students (25%) were sophomores, 21 students (16.9%) were juniors, and 31 students (25%) were seniors.

Students ranged in age from 18 years to 39 years. Thirty students (24.2%) were 18 years, 34 students (27.4%) were 19 years, 25 students (20.2%) were 20 years, 19 students (15.3%) were 21 years, 12 students (9.7%) were 22 years, and 1 student (0.8%) each was 24 years, 31 years, 37 years, and 39 years.

With respect to sex assigned at birth, 19.4% of respondents indicated male, 80.6% indicated female, and 0% indicated intersex. In terms of gender, 19.4% of students listed current gender as man, 77.4% listed current gender as woman, and 3.2% indicated that their current gender was not listed.

Students were asked where they live in relation to the campus of Bowling Green State University. Students living on the BGSU campus made up 31.5% of the sample. Students living off campus in the Bowling Green area made up 44.4% of the sample. Students living outside of the Bowling Green area made up 24.2% of the sample.

Students were asked if they knew how to access mental healthcare should they need it. A majority of students, 67.7%, answered “Yes,” while 13.7% answered “No,” and 18.5% answered “Unsure.”

Students were asked if, in the past 12 months, they have felt as though they were in need of mental healthcare. More than half of the students, 58.1%, indicated that they had felt as though they were in need of mental healthcare in the past 12 months.

The next survey question built off the previous question and asked, “If so, did you access mental healthcare?” Overall, 25% of students indicated that they had accessed mental healthcare,

33.1% reported that they had not accessed mental healthcare, and the question was not applicable to 41.9% of respondents who had answered “No” to the previous question. Among those who did feel the need for mental healthcare in the past 12 months, 43.1% did not access mental healthcare and 56.9% did access mental healthcare.

Students were asked if they were aware of several different local mental health care providers: A Renewed Mind, Harbor, NAMI Wood County, Wood County Hospital, and the Counseling Center at BGSU. There was a considerable range in the percentages of students who were aware of the different mental health care providers. Only 3.3% of students were aware of the services provided by A Renewed Mind, 10.5% were aware of Harbor, 21.0% were aware of NAMI Wood County, and 29.8% knew about the counseling services at Wood County Hospital. The vast majority of students, 89.5%, were aware of mental healthcare services at BGSU’s Counseling Center.

Qualitative Responses

Students were asked why they did not access mental healthcare if they had indicated that they were in need of it within the previous 12 months and did not access it. Though there were many different responses as to why students elected not to access mental healthcare within the previous 12 months, several themes emerged. The first theme that I identified had to do with societal stigmas surrounding mental health. One student simply stated, “I felt ashamed.” Another student elaborated on this: “I thought if my parents found out that I needed help, they would be disappointed with me and call me names such as crazy, lazy, unable, or that I needed to go to the looney bin as they say with many people suffering from a mental illness.” Other students similarly noted that they might face embarrassment from their family, they would be perceived differently by others if they asked for help, or they were too nervous to call for an appointment.

A second theme had to do with a lack of time due to the competing demands on their time, including school and employment demands. One student noted, "It was hard to find time in between my class schedule and my work schedule." Several others mentioned not having time to make an appointment or attend an appointment.

A third theme centered on the cost of mental healthcare. One student said, "I didn't think I'd be able to afford it," while another noted, "I am a poor college student." Others indicated that it would be too expensive, they did not have the money, they were unsure about finding a provider that accepts Medicaid, or "it wasn't financially feasible this year."

A final theme that I identified from the responses was a feeling of wanting to manage the condition independently and without external help. Some students mentioned using this strategy in the past: "I got through worse without help before. I didn't want to fill out paperwork and wait for an availability/appointment either. I just wanted someone to give me a hug and say everything will be ok at that moment." Another student had a similar response: "I personally deal with mental issues by myself, it has always been like that. I am not too too comfortable with letting other people know my feelings and the inside of my mind. I do acknowledge it would be helpful and is sometimes needed, however, it isn't too easy and I don't like people to worry about me so I deal with these things alone. It's worked so far!" Others wanted to deal with things on their own for different reasons. One student replied, "I didn't want to be a nuisance," while others felt that seeking professional health care would not help.

We, as a society, need to change our attitudes toward those with mental illnesses so that we can prevent individuals from feeling powerless against their own conditions. In doing so, we will also help eliminate the stigma surrounding those with mental illnesses and learn better ways to support those individuals and provide them with the necessary and appropriate treatment.

Mental Health Professional Surveys

The COVID-19 pandemic changed the lives of many and put more stress on our healthcare system, facilities, and employees than ever before. I had planned for three experts from Wood County with different occupations and affiliations to participate. However, given the timing of the pandemic, I was only able to obtain two responses. The first respondent has experience working with those with mental illnesses around Wood County, while the second respondent has much more experience in helping students on the BGSU campus. Both respondents chose not to disclose their names or occupations in this report. Thus, the first respondent will be referred to as Expert 1, while the second respondent will be referred to as Expert 2 for the remainder of this project.

The respondents were asked about their experiences working with individuals, particularly BGSU undergraduate students, with mental illnesses. Expert 1 indicated that, while not working directly with students at BGSU, they and their colleagues have begun an awareness campaign to continue developing a relationship with BGSU and to help college students in Wood County with their mental health needs. Expert 2 indicated that they have extensive experience in working with these BGSU undergraduate students.

Next, the respondents were asked to identify the reasons that mental health is such a prevalent problem for undergraduate college students. Expert 1 responded that, since college is a transitional time for many students, they may struggle to make the transition from high school to college, especially during their first year. This can create feelings of anxiety and depression due to stressful situations and being away from home. Expert 2 responded that, with a more diverse student population than ever before, there is also diversity in their mental health. With mental

illnesses prevalent and rising, social inequities and injustices continue to make life harder each year.

The respondents were asked about their awareness of programs available for BGSU students that struggle with mental illnesses in Wood County, OH. Expert 1 responded that they are aware of NAMI Wood County and are aware that they are planning to re-launch their BGSU chapter. Expert 2 responded that there are programs available through the Counseling Center on campus and through Project Connect. This individual indicated that Project Connect is not specifically for undergraduate students but does include them.

The respondents identified some of the biggest reasons why college students may fail to seek the necessary mental health support and treatment. Expert 1 responded that college students may experience signs and symptoms of a mental illness for the first time and not realize how much it is affecting their everyday lives. This could cause them to overlook their need for treatment. This individual also mentioned that there is a significant stigma surrounding mental illness due to a lack of global understanding and education. Expert 2 responded that mental healthcare is not covered by insurance, consists of long wait times, there is a stigma associated with mental health, providers may lack the necessary multicultural training, and the views of the parents of the patient all may make it difficult for a college student to find the necessary treatment and support.

Finally, the respondents discussed what can be done in the future to increase awareness and education of the mental health resources available for BGSU students in Wood County, OH. Expert 1 responded that we need to begin the conversation. Talking about mental health and shared experiences can open the door to conversations about mental illness and may provide a safe space for people to share their own struggles. Expert 2 responded that programming

specifically for college students from the Wood County Health Department would be beneficial. This individual also indicated that with an increase in awareness comes an increase in the demand for services. Without additional resources provided for those services, the demand will not be met.

CONCLUSIONS

Results from this study provided support for each of my three hypotheses. As evidenced by the undergraduate survey responses, a majority of students were unaware of the off-campus mental health resources available in the local community. With none of the four off-campus mental health organizations having more than 29.8% of surveyed students aware of their presence in the local community, it is clear that there is a lack of knowledge of these resources among the BGSU undergraduate student population. However, over 89% of surveyed students indicated their awareness of the on-campus Counseling Center, further supporting my hypothesis that students would be largely unaware of off-campus resources but aware of the available on-campus resources.

Any Wood County outreach or programming targeting the BGSU undergraduate student population has not been effective in helping them understand their symptoms and receive the necessary support and treatment. This is proven not only by a lack of student awareness of the resources offered across Wood County, but also by the noted stigmas and desire to manage mental health conditions independently without the help of these organizations. With students unable or unwilling to turn to these organizations and agencies for help, it is clear that there is a disconnect between the diverse student body and the outreach efforts provided to support this student body.

Social stigmas also played a major role in the willingness of BGSU undergraduate students to access mental health resources. With many of the qualitative responses provided by students noting the existing stigmas and the shame surrounding their mental health, this provided evidence that social stigmas are still prevalent in the Wood County area and are significantly impacting the willingness of BGSU undergraduate students to seek the necessary support and treatment. Over 43% of students in need of mental healthcare within the past 12 months did not access it and until these stigmas surrounding mental healthcare are defeated, more students will continue to avoid local organizations and other available resources in the Wood County community.

DISCUSSION

Throughout my study, there was a common theme that became apparent while analyzing both the student survey responses and the expert survey responses: stigma. Social stigmas can cause individuals to avoid seeking treatment for a fear of judgement from parents, friends, classmates, and others. This stigma leads not only to a reluctance to seek help but a public perception that can even lead to institutional discrimination and a fear of poor treatment by health care providers (Henderson, Evans-Lacko, & Thornicroft, 2013). This institutional discrimination against individuals with mental health conditions can manifest when health care professionals treat their patients dismissively, do not actively listen to their symptoms or take them seriously, provide insufficient information about their condition or treatment options, tell the patient they will never get well, and make the patient wait excessively when seeking the necessary care (Knaak, Mantler, & Szeto, 2017).

At this point, Wood County, OH is effective in advocating for and supporting undergraduate BGSU students with mental illnesses on campus but lacks the same impact and

effectiveness of outreach off campus. While the majority of the surveyed students indicated their awareness of the available on-campus Counseling Center, a significant number were also unaware of the off-campus resources listed on the survey. As referenced by each of the experts in their responses, by starting the conversation on mental health and providing each undergraduate student with support and respect, we can help them understand their mental illnesses and seek the proper care. By increasing community education on the issue and bringing some of this programming to students at BGSU, students can be made more aware of available resources both on and off our campus.

With more than 70% of individuals suffering from mental illnesses receiving no treatment globally, it is imperative that we address this issue now, especially with so many barriers existing between individuals with mental illnesses and the necessary treatment (Henderson, Evans-Lacko, & Thornicroft, 2013). This trend remains steady when focusing on college student access as the Healthy Minds study, a large online survey to assess college student mental health, reported that only 36% of the students who screened positive for a mental health disorder received treatment within the previous year (Pedrelli et al., 2015).

It is also important for health care providers to understand that mental illnesses cannot simply be treated in the same way that physical illnesses and ailments are treated. Mental illnesses affect the very core of an individual, influencing their everyday thinking, perception, and consciousness about themselves and the world around them (Malla, Joobar, & Garcia, 2015). Thus, there is no one-size-fits-all approach that can be applied by practitioners to each patient suffering from a mental health condition, making it important for local medical professionals to build relationships with BGSU undergraduates and create treatment plans tailored specifically to the needs of each student. Knowing that the undergraduate student body at Bowling Green State

University is quite diverse in its composition, it is important to remember that each student comes from their own unique financial situation, home environment, and social status. Each of these factors influence students' mental states and contribute to either positive or negative mental health outcomes both short- and long-term.

As a current student at BGSU and a future physician, I am hopeful that, given the information presented in this study, mental health care providers in Wood County, OH and other local counseling and support organizations perform additional outreach to students on campus. These providers should bring new and unique programming to BGSU students and make frequent contact with students on campus so that our students feel comfortable reaching out for help and are able to make an informed decision when assessing the available treatment options. Frequent screenings should also be utilized for early detection of student mental health conditions, while the off-campus care providers should also build and maintain strong relationships with the BGSU Counseling Center so that students demonstrating mental health symptoms can be directed to the appropriate professional in a timely manner. By reaching an increased number of students and implementing new educational programs designed to combat societal stigmas surrounding mental health, undergraduate students at BGSU will be in more advantageous positions when seeking the necessary and appropriate treatment.

To reverse the concerning prevalence of mental health conditions on the campus at BGSU and on other college campuses around the country, we must encourage students to seek help and communicate with others when they are struggling. We must also work to erase the current stigmas surrounding those with mental illnesses and teach them that it is okay to ask for help. By opening these doors and seeking to build relationships and provide quality care and support to undergraduate students at BGSU, these students will experience better mental health

outcomes, and the campus and local community will be more welcoming and accepting places for all of those struggling with their mental health.

STRENGTHS/LIMITATIONS

My study was strengthened by its focus on a topic that is often overlooked by many school administrators, families, and even individuals themselves. In this case, especially with the prevalence of the stressors and uncertainties surrounding the COVID-19 pandemic, I was able to bring awareness to available mental health resources and help start a discussion on this topic that, otherwise, may not have been addressed in this way. With the timeliness of this study and my own experiences with the devastating impacts that undiagnosed mental health conditions can have on an individual, I was able to address this topic with a passion for supporting BGSU undergraduates suffering from mental illnesses, further strengthening my study and reinforcing the importance of my research.

By obtaining both student and expert perspectives, I was able to analyze mental health from different angles and better understand BGSU undergraduate student mental health and why they may not be willing to seek the necessary resources, as well as what can be done to improve outreach in the future. These different perspectives strengthened my study because, to my knowledge, there have been no studies in the past that have focused on both BGSU students and local experts and improving the awareness of off-campus resources. Thus, my study was able to fill a gap in the knowledge base on this topic in the Wood County area and, hopefully, will be able to help students both now and in the future when seeking to understand their mental health symptoms.

My study was ultimately limited by much of my outreach focusing on the pre-professional student population. Due to COVID-19, I was not able to perform outreach as widely

as I had hoped; since my classes were all remote and I was typically not on campus during the week, it was quite difficult to find opportunities to reach out to undergraduate students.

However, using the BGSU directory and the resources available through the Office of Pre-Professional Programs, I was able to reach many students via email, while Dr. Gilbertson helped distribute the survey through her classes and those of her colleagues as well. With many pre-professional students going through grueling application cycles, challenging coursework, and having extracurricular and service obligations outside of the classroom, it is possible that they may have been struggling with their mental health more than those in other programs at the time of survey distribution.

My study was also limited by the “yes/no” style of the student survey. With my survey asking students to indicate their awareness of local mental health organizations with a simple “yes” or “no” answer, I was not able to paint a full picture of the knowledge that these students have of the available resources on and off campus. I should have asked students to rate their level of awareness on a scale from 1-10, which would have provided more diversity in the responses and allowed for more in-depth analysis.

Another factor that served as a limitation for my study was the timing of the distribution of the student surveys. By distributing many of the surveys one week prior to Finals Week, many students were already stressed and may have been experiencing more intense feelings of anxiety than at other points throughout the year, especially taking into account additional COVID-19 hardships. This may have led to students being more likely to indicate that they felt in need of mental healthcare than if I had asked at a different point during the year.

FUTURE RESEARCH

Based on the findings of my study and the challenges that college students experience when trying to access mental healthcare, it is apparent that future research needs to shed more light on this topic. Future research should focus on the prevalence of social stigmas surrounding mental illnesses on college campuses across the United States, as well as how mental health professionals can help address the lack of time, financial hardships, and desire of students to handle their problems independently that were the main themes noted in my student survey.

By building upon the findings that I obtained from this study, more widespread surveys can be provided to undergraduate students, a more in-depth analysis of social stigmas and other barriers to the necessary care can be performed, and additional firsthand accounts can be acquired to continue analyzing the undergraduate student experience with the mental healthcare system. This will provide even more data to mental health care providers and suggest improvements to their outreach methods and treatment plans for undergraduate college students. Though this is a difficult and sensitive topic, the conversation on mental health needs to be started now so that no more undergraduate students have to suffer in silence at Bowling Green State University or at other colleges and universities around the world.

Appendix 1

BGSU Undergraduate Student Survey Questions

1) What is your status at BGSU?

- Freshman
- Sophomore
- Junior
- Senior

2) What is your age?

3) What sex were you assigned at birth?

- Male
- Female
- Intersex
- No answer

4) What is your current gender?

- Man
- Woman
- Transgender
- A gender not listed
- No answer

5) Where do you live?

- BGSU – on campus
- Bowling Green, OH – off campus
- Outside of the BG area

6) Do you know how to access mental healthcare should you need it?

- Yes
- No
- Unsure

7) In the past 12 months, have you felt as though you were in need of mental healthcare?

- Yes
- No

8) If so, did you access mental healthcare?

- Yes
- No
- I answered “no” to the previous question

9) If you did not access mental healthcare, why not? (If you previously responded that you were not in need of mental healthcare, please type “N/A” in the box).

10) Are you aware of the mental health organization, A Renewed Mind?

- Yes
- No

11) Are you aware of the mental health organization, Harbor?

- Yes
- No

12) Are you aware of NAMI Wood County?

- Yes
- No

13) Are you aware of the medical and counseling services available at Wood County
Hospital?

- Yes
- No

14) Are you aware of the on-campus Counseling Center at BGSU?

- Yes
- No

Appendix 2

Mental Health Professional Survey Questions

- 1) What is your name and current occupation within Wood County, OH?

- 2) Would you like your name and affiliation disclosed in my Final Project?
 - Yes
 - No

- 3) What is your experience in working with individuals, specifically undergraduate students at BGSU, with mental illnesses?

- 4) What are some of the reasons that mental health is such a prevalent problem for undergraduate college students?

- 5) What programs are you aware of that are available for BGSU students with mental illnesses in Wood County, OH?

- 6) What, in your opinion, are some of the biggest reasons why college students may fail to seek the necessary mental health support and treatment?

- 7) What can be done in the future to increase awareness and education of the mental health resources available for these BGSU students in Wood County, OH?

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