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# Understanding and Promoting Student Mental Health in Scottish Higher Education – A Mapping Exercise

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## Aims and objectives

The project had three main aims:

- To map existing statistics, policy and provision for students with mental health difficulties
- To gain an understanding of the complex issues involved in addressing student mental health within the higher education (HE) context
- To identify ways in which HE institutions may adopt a more preventative approach.

## Methodology

The research involved the following activities:

- A review of national policy documents and legislation relating to mental health in HE and the wider Scottish context
- A wide-ranging review of the research literature on students with mental health difficulties
- Examination of available statistics on student mental health
- Interviews with a range of key informants: 12 students who were experiencing mental health difficulties, from one case study institution; interviews with academics from the case study institution and three other HE institutions
- Creation of an anonymous interactive web space for students experiencing mental health difficulties, where they could communicate anonymously with each other about their mental health difficulties and their experiences of HE. On the agreement of the students involved, one researcher had access to this site for the purposes of the research
- A focus group with student volunteers to discuss the broader area of student mental well-being.

## Key findings

### *Background factors*

There has been an increase in the incidence of mental health difficulties among HE students over

the past decade. Official statistics show that the proportion of undergraduates declaring a mental health difficulty on entry to HE rose from 5 in every 10,000 in 1994-5 to 30 in every 10,000 in 2004-5. Incidence of severe psychological problems has increased, and student mental health is generally worse than that of the general population (for age-matched populations). Anxiety and depression are the most commonly noted difficulties.

The research review identified a relationship between mental health and the following factors: finances, accommodation, academic issues, university systems and social factors. Academic issues, and specifically coursework, emerged as particularly related to stress levels and mental health issues.

### *Student experience*

The transition to higher education can be a stressful time, with students (some of whom are only 17-18) entering a completely new environment. Students reported feeling ill-equipped emotionally and academically, with no immediate friendships or support available, and being uncertain where to look for help. They also reported difficulty in identifying or recognising their experiences as “mental health difficulties”, and in admitting to themselves and others that they were struggling. Students often saw their problems as a personal inability to cope, and so were unsure what sort of help to look for.

Some of the students indicated that academic departments were supportive, with staff being easily accessible, approachable, and responding promptly to requests for assistance. However, other students reported more difficult experiences of contact with staff, a general lack of understanding of mental health issues, and poor access to tutors and academic support.

What students experiencing difficulties valued most from their lecturers and tutors was practical help and support. This included making notes

readily available; allowing extra time for assignments; showing understanding and awareness when students needed to take time off as a result of their difficulties.

Formal procedures to alert academic staff to student difficulties remain problematic, and students reported having to repeatedly inform academic staff about their difficulties.

#### *Accessing support*

Student support services were seen as providing a good service, but students were not always aware of what support they offered, or how support could be accessed.

While students more readily associated counselling services with direct access to help, they were generally very reluctant to seek this help. Even students in acute difficulties found the step of making an appointment with a counsellor a difficult one to take. Some students were afraid of the stigma attached to mental health difficulties, and feared that it would be recorded on their medical records.

#### *Academic staff perspectives*

It was recognised that some staff are under an enormous amount of pressure. Staff reported dealing with increasing numbers of students in distress, and expressed the need for more knowledge and information on how best to deal with them.

The extent to which the institution, departments and academic staff assume responsibility for caring and supporting students is extremely variable. For example, residential accommodation services can be very supportive to students in terms of their well-being in their first year, while some academic departments/staff do not explicitly acknowledge or accept such responsibility as part of their role.

Staff expressed a commitment to helping students, but anxiety that they regularly experienced intense situations with distressed students. In such situations, staff reported feeling responsible for the student but at times isolated and vulnerable through lack of knowledge and access to immediate support. Tension between

doing something to help and protecting student confidentiality was also identified as a key concern in such situations.

#### *Key areas for development*

There is clearly a need for institutional policy and direction with regard to improving student mental health and well-being. Some key informants to the research called for national policy and direction on this issue.

Students need access to more immediate and accessible forms of support and information. Academic staff need similar access to support and information, if they are to be equipped to cope appropriately with students experiencing difficulties.

Ways in which the HE environment could be changed to help reduce sources of stress include:

- Redesigning courses and timetables, particularly for first year students, to provide more structure, more direct support for the development of study skills and more opportunities for staff-student relationships to develop
- Developing a more supportive learning environment, in which seeking support for academic difficulties is seen as “normal”
- Developing (or building on existing) online guidance and resources to students and staff.

Such developments would improve the learning environment for all students and support the general promotion of mental health and well-being.

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