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Smargon, Abby R.. (2020). Mental Health In College Students: Disclosure & Seeking Support. In *BSU Honors Program Theses and Projects*. Item 451. Available at: https://vc.bridgew.edu/honors_proj/451
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MENTAL HEALTH IN COLLEGE STUDENTS: DISCLOSURE & SEEKING SUPPORT

Mental Health In College Students: Disclosure & Seeking Support

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Submitted in Partial Completion of the
Requirements for Departmental Honors in Social Work

Bridgewater State University

December 20, 2020

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Abstract

A study was conducted through Bridgewater State University in order to better understand the mental health and help seeking behaviors of college students. The data collected served to provide information regarding what specific types of mental health difficulties are reported by college students, whether or not they disclose these mental health difficulties to their school, how such mental health difficulties impact academic performance, and whether or not students seek behavioral health support. To gather data, an anonymous survey was distributed via email and Facebook to undergraduate students at Bridgewater State University. The anonymous survey included multiple choice and open ended questions regarding demographics, mental health, disclosure, academic performance, and behavioral health supports. The findings (n=50) illustrated that college students are experiencing mental health issues commonly in the form of anxiety and depression. Survey responses indicated that some students have disclosed their mental health difficulties to their schools, though the reasons for this appeared to vary. Data also showed that students with mental health difficulties were reporting struggles with academic performance. Based on study results, students struggling with mental health difficulties appeared to be more likely to seek support to manage such struggles. Recommendations for supporting undergraduate students at a public university with mental health difficulties are provided.

Introduction

College students are a population who have been found to be at an escalated risk for high levels of stress, anxiety, and depression (NAMI, 2012). In recent years, bachelor's degrees and even advanced degrees have become not only a preference, but a requirement for application in many professional fields (Recovery: Job Growth And Education Requirements Through 2020). As a result, "traditional" college students who attend university full-time immediately after high school, are now accompanied by a cohort of just as many if not more "non-traditional students" (Mounsey, Vandehey, & Diekhoff, 2013). Non-traditional students are those who start or return to college later on, or who attend school part time while working or taking care of their family. Non-traditional students are often financially independent, taxed with maintaining financial stability while attending and paying for their own schooling. Completing college under such pressures can lead to critical changes in how a student is able to manage the stress and challenges of advanced education.

Due to an increase in responsibilities, pressures, and sources of stress in the lives of modern day college students, mental health concerns for this population are on the rise (Beiter, et al., 2015). Students who struggle with higher levels of stress, anxiety, and depression are at risk for also suffering academically. Students who are struggling to manage their mental health may find themselves turning assignments in late, missing classes, or dropping out altogether. Although many students find it difficult to disclose that they are struggling, this study and others, have found that most students suffering from mental health difficulties are likely to seek support for varying reasons. Understanding the implications of mental health difficulties in college students may allow for universities to better provide services and resources to students in order to promote college success as well as more readily provide effective mental health support.

Literature Review

Mental Health Prevalence in College Students

With mental health difficulties in college students becoming a growing area of concern, many studies have been conducted to provide a better understanding of the issue's prevalence. One study utilized The World Health Organization World Mental Health Surveys and found that approximately one fifth of surveyed college students suffered from DSM-IV anxiety, mood, or substance abuse disorders (Auerbach, Alonso, Axinn, Cuijpers, Ebert, Green, & Nock, 2016). Another study found that based on a national sample, self-reported diagnoses/treatment of several MH conditions are increasing among college students (Oswalt, Lederer, Chestnut-Steich, Day, Halbritter, & Ortiz, 2020). A report by Pedrelli, Nyer, Yeung, Zulauf, & Wilens (2015) discussed the many responsibilities college students must tend to. In addition to academic stress, many students must also manage obligations related to work and family. Balancing the many challenges of adulthood while trying to succeed in college appears to relate directly to the prevalence of persistent mental health difficulties in college students of all ages (Pedrelli, et al., 2015). Among college students, anxiety is the most common diagnosis with 11.9% of college students living with anxiety disorders (Pedrelli, et. al, 2015). Depression rates follow closely in college students with 7-9% of the population suffering from depression, with the age of onset typically falling within childhood, adolescence, or young adulthood (Pedrelli, et. al, 2015).

Disclosing Mental Health Difficulties in College

Struggling with mental illness during college presents many challenges for students throughout their journey towards acquiring a degree. Along with difficulties associated with mental health struggles comes the dilemma of whether or not to disclose. Though self-disclosure may allow students to access supportive resources, many encounter fears in doing so. According

to Corrigan, Kosyluk, Markowitz, Brown, Conlon, Rees, & Al-Khouja (2016), about 1 in 5 college student survey respondents reported feeling that remaining secretive about their identification as someone with a mental illness was a wise choice. Willingness to disclose was especially low in this sample for students of color due to higher rates of stigma associated with mental illness in different racial groups (Corrigan, et al., 2016). Similarly, students from a study conducted by Wynaden, McAllister, Tohotoa, Al Omari, Heslop, Duggan, & Byrne (2014) presented with a hesitation to disclose as a result of the negative impact of stigma associated with mental illness. Though it is evident that students feel hesitant about disclosure, many do support the idea of doing so knowing that it may lead to receiving necessary support during times of high stress. Findings from Meluch & Starcher (2020) illustrate that student participants found it important and sometimes necessary to disclose their struggle with mental health difficulties to professors especially when they felt they were likely to receive a supportive response.

Mental Health and College Performance

Achieving academic success in college can be particularly challenging for students who are struggling to manage their mental health. College is a time characterized by high levels of academic pressure, expectations, and stress. Individuals suffering from increased levels of anxiety, stress, and depression are at risk for suffering academically as well. According to Wilks, Auerbach, Alonso, Benjet, Bruffaerts, Cuijpers & Sadikova (2020), research consistently documents high rates of mental health problems among college students and strong associations of these problems with academic role impairment. Students suffering from mental health difficulties are likely to experience challenges related to maintaining their grades, turning assignments in on time, showing up to class, as well as dealing with low overall levels of motivation. Students living with anxiety, depression, and other mental health difficulties are at a

higher risk for feeling highly overwhelmed or living in a constant state of fight or flight response (Reddy, Menon, & Thattil, 2018). A study by Wynaden, et al. (2014) found that “affected students experience isolation, loneliness and struggle as they try to meet their study requirements with many withdrawing from programs.” Additional factors may contribute to a student’s likelihood of experiencing poor mental health during college as well as related academic difficulties. First generation college students (Hartfield, 2020) and students experiencing food insecurity (Martinez, Frongillo, Leung, & Ritchie, 2018) are at increased risk of experiencing high levels of anxiety, stress, and depression, leading to obstacles that challenge or prevent high academic achievement. Research shows that mental health difficulties account for more college role impairment than physical health issues (Wilks, et al., 2020). With a wide range of variations in demographics, levels of independence, financial stability, and other related characteristics of non-traditional college students, increased stress, anxiety and depression within this population puts students at high risk for suffering academically as a result of mental health challenges.

Mental Health Support and College Students

While many universities do have mental health support services available, students who are struggling with mental health difficulties often hesitate to seek help (Cage, Stock, Sharpington, Pitman, & Batchelor, 2020). Several barriers may stand in the way of students accessing mental health support at their university. Among these barriers are stigma, lack of available appointments, lack of student awareness of services, and student belief that they do not need services even if they would be considered at elevated risk for suicide (Cage, et al., 2020). A study conducted by DiPlacito-DeRango (2016) discusses how some students carry a mindset in which they believe school is meant for academics only, which may hinder their likelihood of seeking support for mental health difficulties associated with academia. This article also states

that universities tend to have underdeveloped policies surrounding mental health, as well as minimal opportunities for university faculty to become more educated on how to support student mental health (DiPlacito-DeRango, 2016).

An important component of increasing help seeking behaviors in college students suffering from mental health difficulties is raising awareness of available supports. Modern technology has become a novel avenue for potential mental health support resources. Online mental health applications can serve as a means to provide mental health education to college students and increase awareness of available resources (Johnson, & Kalkbrenner, 2017). Online mental health applications have been found to be an easily accessible way to deliver brief interventions for students in order to help reduce symptoms of anxiety and depression (Johnson, & Kalkbrenner, 2017). Similarly to the use of mobile mental health applications, social media is also a potential outlet for related support. It has been found that people who are struggling with stressful life events who choose to open up or disclose on Facebook allowed them to “mobilize social support” (Zhang, 2017). Though technology based supports are not intended to replace in-person counseling or interventions, this is an important option for universities to consider when trying to increase the number of students accessing some sort of mental health support.

In addition to the use of virtual supports, research has also been done to examine the benefits of utilization of mental health groups or organizations on university campuses. A study conducted by Sontag-Padilla, Dunbar, Ye, Kase, Fein, Abelson & Stein (2018) found that student engagement in peer-lead mental health organizations through universities lead to a decrease in stigma, increase in helping behaviors, and increase in mental health knowledge over time. These findings indicate that while availability of counseling services is significant in college

communities, other accessible, short-term options may also be beneficial for supporting the mental health of college students.

Methods

This study, approved by the Bridgewater State University IRB (Appendix A) and supported by the ATP Summer Research Grant, uses an anonymous, online Qualtrics quantitative survey (Appendix B) to gather data from undergraduate students registered at Bridgewater State University. The survey includes questions concerning student demographics (age, gender, race/ethnicity, sexual orientation, household income, parent status, work status, enrollment status), self-evaluated mental health status (including depression, anxiety, and stress scores), and academic performance. Additionally, the survey also included open-ended questions regarding mental health status, reasons why they did or did not disclose mental health status to the school, how mental health has impacted their college performance, and reasons why the students decided to seek out supportive services for their mental health.

Participants

The participant sample consists of 50 undergraduate students from Bridgewater State University, a public Massachusetts college. The sample contains mostly white students (82.0%, n=41) with non-white respondents at 18%. (n=9); the overall BSU population is 29% students of color. Additionally, the participants are predominately female (73.2%, n=34) with 22.5% identifying as male (n=12) and one identifying as genderqueer; the overall BSU population is 41.3% male and 58.7% female identifying. The mean age of the participant sample was just over 23 years with the youngest respondent at age 18 and the eldest at age 47. On a five-point Likert scale measuring overall mental health (ranging from 1=Excellent, 2=Good, 3=Average, 4=Poor,

5=Terrible), the majority of students (56.5%, n=26) responded that their mental health was average. Additional demographic information can be found in Table 1, below.

Table 1

Variable	Characteristic	Students
Age		22.3 years old
Gender	Male	22.5% (12)
	Female	73.2% (34)
Race	White	82.0% (41)
	Non-White	18.0% (9)
LGBTQ	Yes	26.0% (13)
	No	74.0% (37)
Household Income		\$40,000-\$60,000 per year
Home Community	Urban	10.6% (5)
	Suburban	70.2% (33)
	Rural	19.1% (9)
Student Enrollment	Full Time	88.4% (38)
	Part Time	11.6% (5)
Housing	On Campus	22.7% (10)
	Off Campus/Commuter	77.3% (34)
Work Status	Working	80.0% (40)
	Not working	20.0% (10)
First Gen	Yes	43.5% (20)
	No	56.5% (26)
Overall Mental Health	Excellent	15.2% (7)
	Good	13.0% (6)
	Average	56.5% (26)

	Poor	10.9% (5)
	Terrible	4.3% (2)

Recruitment

All participants were either recruited through their summer course professors, via direct email from the researchers, and later through social media platforms such as Facebook. The survey (created using Qualtrics) was emailed to Bridgewater State University professors whose names were collected from a list of those who were scheduled to be teaching summer courses. The survey was attached to individual emails accompanied by IRB approved language describing (Appendix C) the purpose of the survey and requesting that each professor share the survey and the associated instructions with their undergraduate summer course students at their own discretion. Students read that by beginning to answer the questions on the survey, they were providing consent for research. This initial outreach effort yielded approximately 20 results. Wanting to hear from a larger population, recruitment efforts were then approved to post the recruitment script on BSU social media. For individuals recruited through social media, a similar IRB approved script was posted to Facebook groups created specifically for Bridgewater State University students. These groups included one with Members from the Class of 2021, one for BSU Social Work students, and one for BSU Commuter students. Additionally, an email was sent directly to fellow recipients of the ATP research grant requesting their participation as well. By the end of data collection, 50 responses were received.

The participants were all undergraduate students, most of whom were enrolled in summer classes during 2020 (COVID-19 pandemic). Participation for students was voluntary and anonymous. Students were informed that the brief survey would take about 10-15 minutes.

Students were also provided with the option of disclosing their personal identity (name and student ID number) directly to the PI in order to receive a five-dollar incentive on their student ID for completing the survey.

Procedure

Data were downloaded from Qualtrics to SPSS. Frequencies and descriptive statistics were derived from the quantitative data, and the qualitative data from the open ended responses were coded in SPSS using thematic analysis (Braun & Clarke, 2006).

Research Questions

After researching current literature on mental health difficulties in college students and related behaviors, it became clear that there is an emerging breadth of research on the mental health of college students. However, there is still much to be known about public university students, their mental health, and related behaviors around disclosure, college performance, and seeking support for mental health. Therefore, the following research questions were asked:

R1: What mental health difficulties do college students report?

R2: Do college students disclose their mental health difficulties to their school, and why?

R3: How does mental health difficulties impact college performance?

R4: Do college students seek out support for mental health?

It was from this data that we were able to record, review, and interpret the following findings.

Findings

R1: What mental health difficulties do college students report?

Response data in Table 2 show that 30.00% of this sample (n=15) reported experiencing at least one mental health difficulty while enrolled in college. Anxiety was most common

(66.67%, n=10), followed by depression (40.00%, n=6), PTSD (20.00%, n=3), ADHD (13.33%, n=2), and ADD, Bipolar II, and OCD all mentioned once at 6.67% of this full sample.

Table 2: Mental health difficulties in college students (n=15)

Mental Health Issue	Frequency %(n)
ADHD	13.33% (2)
ADD	6.67% (1)
Anxiety	66.67% (10)
Bipolar II	6.67% (1)
Depression	40.00% (6)
OCD	6.67% (1)
PTSD	20.00% (3)

R2: Do college students disclose their mental health difficulties to their school, and why?

Response data in Table 3 show that 14.00% of the sample, or seven students, report that they've disclosed a mental health condition to their school. In terms of the reasons why students decided to disclose this information in Table 4, 71.43%, or five students, said they were forced to disclose their mental health difficulties due to needing accommodations in class or disclosed through meeting with the school staff and counselors. Only, 28.57%, or two students, felt they were actually ready to disclose this information. Eight students, or 18.6% had no mental health issue to disclose, 13.95% or six students felt like they could deal with their mental health difficulties without the school's involvement, and 6.98% or three students said they did not share their mental health status with the school due to the fear of stigma.

Table 3: Disclosure of mental health difficulties to school

Disclosure of MH	Frequency %(n)
Yes	14.00% (7)

No	86.00% (43)
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Table 4: Reasons for disclosure

Yes, disclosed		No, did not disclose	
Forced disclosure 71.43% (5)	“I need accommodations, and if I didn’t disclose, I wouldn’t get them.”	No MH condition 18.60% (8)	“I don’t have a mental health condition.”
	“I had to during intake forms for counseling.”	Dealing with without school involvement 13.95% (6)	“It’s something I can handle.”
	“I was basically emailed by the academic people and I HAD to speak with them in person. So I had to tell them what was going on, they gave me advice and I completely ignored it because they didn’t care and neither did I.”		“I seem to do well enough, even though I would probably be an “A” student if this didn’t interfere. I guess I just try to figure things out on my own and don’t want to make excuses.”
	“They asked me to when I came back from taking a semester off.”		“I don’t think it’s necessary, I know I can still get things done.”
	“To the Wellness Center, to try and talk past the problems.”	Fear of stigma 6.98% (3)	“Don’t want to be looked at differently.”
Ready to disclose 28.57% (2)	“I’m much more open to receiving help now.”		“Negative connotations with mental health issues, especially in the field of science.”

	“It’s important to break down the stigma.”		“I’m shy and uncomfortable to.”
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R3: How does mental health difficulties impact college performance?

Response data in Table 5 show that 37.30% of the sample, or 19 students, report that their mental health has impacted their college performance. In explaining how their mental health impacts college performance, Table 6 shows three main themes were pulled from the open-ended responses: stopped going to class/dropped out (52.63%, n=10), trouble concentrating (31.48%, n=6), and difficulty completing assignments/handing in work late (31.58%, n=6).

Table 5: Mental health difficulty, impact on college performance

Mental health impacts college performance?	Frequency %(n)
Yes	37.30% (19)
No	60.80% (31)

Table 6: How has mental health impacted your college performance?

Impact on college performance	Quotes
Stopped going to class/dropped out 52.63% (10)	“I stopped going to class for months. I was anxiety ridden and eventually dropped out.”
	“Almost dropped out of BSU- the commute and parking almost killed me.”
	“Took a semester off due to stress.”
Trouble concentrating 31.58% (6)	“Trouble getting work done/focusing”
	“Trouble concentrating or processing words spoken. Most difficulty occurs during testing, as I seem to go blank in thought.”

Difficulty completing assignments/handing in work late 31.58% (6)	“I’ve missed class, taken a semester off, handed an assignment in late. I still manage to be a good student, but it is extremely stressful.”
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R4: Do college students seek out support for mental health?

Response data in Table 7 show that 37.30% of the sample, or 19 students, report that they’ve attempted to access behavioral health supports to address their mental health. In terms of the reasons why they attempted to access behavioral health supports for their mental health in Table 8, 89.47%, or 17 students, reported that they’ve attempted to access/have accessed counseling or therapy; 56.63%, or 10 students attempted to access/have accessed medication; 10.53%, or two students, have been hospitalized for their mental health; and 5.26%, or one student, said they are utilizing self-help supports to support their own mental health. In terms of the reasons why students do not attempt to access behavioral health supports, 12.90%, or four students, reported they do not seek out behavioral health supports due to fear; 19.35%, or 6 students, reported they did not seek out behavioral health supports because they did not think their mental health issues were severe enough; 9.68%, or 3 students said they were too busy to access behavioral health services; 9.68%, or 3 students said that accessing behavioral health services was too expensive; and 6.45%, or one student, reported that they access behavioral health supports for their mental health because they didn’t know how to.

Table 7: Attempts to access behavioral health supports

Attempted to access behavioral health supports	Frequency %(n)
Yes	37.30% (19)
No	60.80% (31)

Table 8: Reasons for or against attempting to access behavioral health supports

Yes, attempted to access behavioral health supports		No, did not attempt to access behavioral	
Counseling/therapy 89.47% (17)	“I am always trying to see a therapist. The Wellness Center is not doing intakes so I couldn’t receive services.”	Fear 12.90% (4)	“Criticism that I might face.”
	“I tried accessing counseling at BSU, finally was able to get a weekly appointment and did not find any benefit. Often left feeling worse.”		“Too scared to.”
	“Walk in sessions at BSU (but let me tell you...the sessions were awful. They need a wake up call. The people who I talked to were awful. One invalidated whatever I said, the other only repeated everything I said back to me. Awful experience during an awful time in my life).	Mental health symptoms aren’t serious enough to “get help” 19.35% (6)	“I didn’t think I needed one.”
Medication 52.63% (10)	“Prescription medication, therapy.”		“I just get in my head sometimes but never too much where I need help.”

	“Counseling and medication!”	Too busy 9.68% (3)	“During the last few years I have 3 jobs while attending school. I just don’t have enough time during the day.”
	“MD diagnosed my anxiety disorder. Took meds for 1 year.”	Too expensive 9.68% (3)	“I can’t afford one.”
Self-help supports 5.26% (1)	“Bought books/DVD program that helped the most with understanding my condition and its triggers.”		“It sounds like a lot of money and effort.”
Hospitalization 10.53% (2)	“Therapy, medication, and hospitalization.”	Don’t know how 6.45% (1)	“Don’t know how to find the resources.”

Discussion

R1: What mental health difficulties do college students report?

Based on the data collected, students from our sample appear to struggle most with depression (40%), anxiety (66.67%), and PTSD (20%). This may be attributed to the significant amount of stress and pressures endured by college students. In addition to academic expectations and responsibilities, our data shows that the majority of students are also working, which can add additional stress. Students must also manage the stress of home and family responsibilities as well as the overwhelming pressure of the need to succeed in college in order to advance in their careers, and qualify for well-paying professional positions. Overall, college students are at high risk for these mental health difficulties as a result of being taxed with balancing responsibilities in numerous areas of their lives while progressing through a challenging but critical time of educational, personal, and professional development. These findings are supported by

conclusions drawn in the (Pedrelli, Nyer, Yeung, Zulauf, & Wilens, 2015) study regarding the relationship between student lifestyles and associated increase of mental health difficulties, showing that many students do indeed cope with anxiety and depression.

R2: Do college students disclose their mental health difficulties to their school, and why?

According to the data collected through this study, 86% of student survey respondents reported that they did not disclose their mental health difficulties to their school and discussed reasons of stigma and fear as reasons why they chose not to disclose. Even for students who did disclose, a number of them felt they were forced to disclose their mental health conditions even if they were not ready or did not want to. As supported by findings from the (Wynaden, et al., 2014) study, this may be directly related to student fears of negative response to disclosure as a result of mental health stigma. Students who do disclose may do so in hopes of receiving support, or as was found in our sample, students have felt that they were forced by their educational institution to disclose.

R3: How does mental health difficulties impact college performance?

Our data illustrates that struggling with mental health difficulties negatively impacted student college performance and academic success. This can be explained by the difficulty of trying to cope with symptoms of stress, anxiety, and depression while attempting to also manage school, work, and personal pressures and responsibilities. Students reported that their mental health difficulties made it harder to show up to class, turn in assignments on time, or stay focused. Some students also reported that they considered dropping out as a result of the effects of mental health difficulties on their ability to manage academic responsibilities. This data is supported by similar findings from the study conducted by Wilks, et al., (2020) which reported a strong relationship between student mental health struggles and college role impairment.

R4: Do college students seek out support for mental health?

According to our findings in this study, only 37.30% of participants reported having sought behavioral health support. The 60.80% of students who did not seek support felt unable to do so for many reasons. Some students experienced fear of reaching out for help, while others felt they did not have enough time, could not afford it, their symptoms were not severe enough, or they did not know how to find mental health support. These reasons for college student hesitation when considering whether to access mental health supports were also found in the Cage, et al., (2020) study which examined these and other related barriers that are common for college students in accessing behavioral health supports to properly address their mental health difficulties.

Limitations

Despite facing barriers to recruitment in times of COVID-19 and abandoning the original in-person data collection plan of on campus recruitment of students enrolled in summer courses, the project moved forward with a convenience sample for data collection through reaching out to instructors teaching summer courses and through posting about this survey on BSU student social media pages. Our sample also has a larger proportion of respondents identifying as white and female than the overall BSU population as well. Due to the recruitment methods and the respondent population, this sample is not generalizable to the larger BSU population.

Recommendations

Literature collected from related research supports the importance of awareness, availability, and access when it comes to providing mental health support for college students. It should be noted that campus counseling centers (such as the Wellness Center at BSU) are necessary and helpful resources. However, additional models of support and options for college

students may be the answer to bridging the gap between students who are struggling and their educational institutions, particularly during this time of remote learning and isolating situations caused by COVID-19. What may be the most important implication of our findings is the need for creating more widespread university discussion of mental health as well as increasing student, faculty, and staff awareness of how mental health issues manifest and impact students, as well as knowledge about available mental health resources (DiPlacito-DeRango, 2016). Students could also benefit from mental health mobile applications (Johnson, & Kalkbrenner, 2017), such as the newly implemented Togetherall virtual support resource for BSU students. Students may also benefit from peer led mental health groups and organizations (Sontag-Padilla, Dunbar, Ye, Kase, Fein, Abelson & Stein, 2018) made available through their university (on social media, zoom, or in person), however, in order for students to take advantage of these services, they must be made aware of them.

BSU and other universities should consider frequently providing more information to their students about available mental health supports whether through emails, flyers, social media posts, or administrative announcements. BSU and others should also strategize when it comes to opening up conversations and promoting discussions surrounding mental health difficulties. Students need to feel that they are safe and will not be judged or penalized when deciding to disclose that they are struggling. Additional recommendations may include professional development options for university faculty to help them feel more equipped to recognize and support students who are struggling with mental health difficulties. BSU and other universities may also want to consider developing ways to actively reach out to and check on student mental health status. This will allow schools to have a better overall understanding of how students are doing, as well as potentially open communication with those who are hesitant to reach out for

help. This may be done through direct outreach from the counseling center, through mental health mobile apps, emailed surveys, or periodic check-ins conducted by professors. More research would be required concerning maintaining privacy through the use of online supports, as well as gaining a better understanding of which models of outreach and support are preferred by students.

Conclusion

Acquisition of a college degree has become one of the most common goals set by individuals of all ages, races, genders, classes, and identities; therefore, this is a matter of social justice. Though earning a college degree is a rewarding and often necessary experience given current professional standards within our society, it is often one of the most taxing journeys to embark on. Present day college students tend to juggle many roles while simultaneously working toward their diploma. Students are also full-time employees, parents, financial independents, caregivers, volunteers, and so on. Balancing all of these responsibilities in addition to attending classes and completing assignments puts college students at high risk for suffering from elevated levels of stress, anxiety, and depression. The significant expansion of the college student population is accompanied by a growing concern for the mental health of these individuals.

This study of mental health difficulties and college performance in students at Bridgewater State University is intended to draw attention to the mental health needs of college students as well as the responsibility of educational institutions to provide adequate support. Our data as well as similar findings from prior research indicates that too many college students are struggling with their mental health and suffering academically as a result. Due to the impacts of stigma, lack of available services, and an overall disconnect between students and their universities when it comes to mental health awareness, many are suffering alone. Universities

must adopt a sense of urgency surrounding the issue of how to best support overall student mental health, and more importantly, provide outreach and resources to those who are struggling. Educational institutions are an environment where students should be able to learn, connect, grow, and achieve. Unfortunately, college success is severely threatened by the risk for high levels of student stress, anxiety, and depression. Universities must initiate and expand critically important discussions regarding a movement towards becoming equally as committed to student mental wellbeing as they are to academic achievement. Students should never have to choose between their mental health and their college degree.

References

- Auerbach, R. P., Alonso, J., Axinn, W. G., Cuijpers, P., Ebert, D. D., Green, J. G., ... & Nock, M. K. (2016). Mental disorders among college students in the World Health Organization world mental health surveys. *Psychological medicine, 46*(14), 2955-2970.
- Beiter, R., Nash, R., McCrady, M., Rhoades, D., Linscomb, M., Clarahan, M., & Sammut, S. (2015). The prevalence and correlates of depression, anxiety, and stress in a sample of college students. *Journal of affective disorders, 173*, 90-96.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology, 3*(2), 77-101.
- Cage, E., Stock, M., Sharpington, A., Pitman, E., & Batchelor, R. (2020). Barriers to accessing support for mental health issues at university. *Studies in Higher Education, 45*(8), 1637-1649.
- Corrigan, P. W., Kosyluk, K. A., Markowitz, F., Brown, R. L., Conlon, B., Rees, J., ... & Al-Khouja, M. (2016). Mental illness stigma and disclosure in college students. *Journal of Mental Health, 25*(3), 224-230.
- DiPlacito-DeRango, M. L. (2016). Acknowledge the Barriers to Better the Practices: Support for Student Mental Health in Higher Education. *Canadian Journal for the Scholarship of Teaching and Learning, 7*(2), 2.
- Hartfield, K. N. (2020). Cultural Mismatch: First-generation College Students, Academic Performance, and Mental Health.
- Johnson, K. F., & Kalkbrenner, M. T. (2017). The utilization of technological innovations to support college student mental health: Mobile health communication. *Journal of technology in human services, 35*(4), 314-339.

- Martinez, S. M., Frongillo, E. A., Leung, C., & Ritchie, L. (2018). No food for thought: Food insecurity is related to poor mental health and lower academic performance among students in California's public university system. *Journal of health psychology*, 1359105318783028.
- Meluch, A. L., & Starcher, S. C. (2020). College Student Concealment and Disclosure of Mental Health Issues in the Classroom: Students' Perceptions of Risk and Use of Contextual Criteria. *Communication Studies*, 1-15.
- Mounsey, R., Vandehey, M. A., & Diekhoff, G. M. (2013). Working and non-working university students: Anxiety, depression, and grade point average . *College Student Journal* , 379–389. doi: 2014-23627-014
- NAMI. (2012). College Students Speak: A Survey Report on Mental Health, 4–22. Retrieved from https://www.nami.org/getattachment/About-NAMI/Publications-Reports/Survey-Reports/College-Students-Speak_A-Survey-Report-on-Mental-Health-NAMI-2012.pdf
- Oswalt, S. B., Lederer, A. M., Chestnut-Steich, K., Day, C., Halbritter, A., & Ortiz, D. (2020). Trends in college students' mental health diagnoses and utilization of services, 2009–2015. *Journal of American college health*, 68(1), 41-51.
- Pedrelli, P., Nyer, M., Yeung, A., Zulauf, C., & Wilens, T. (2015). College students: mental health problems and treatment considerations. *Academic Psychiatry*, 39(5), 503-511.
- Recovery: Job Growth And Education Requirements Through 2020. (n.d.). Retrieved June 15, 2020, from <https://cew.georgetown.edu/cew-reports/recovery-job-growth-and-education-requirements-through-2020/>

Reddy, K. J., Menon, K. R., & Thattil, A. (2018). Academic Stress and its Sources Among University Students. *Biomedical and Pharmacology Journal*, *11*(1), 531-537.

doi:10.13005/bpj/1404

Son, C., Hegde, S., Smith, A., Wang, X., & Sasangohar, F. (2020). Effects of COVID-19 on College Students' Mental Health in the United States: Interview Survey Study. *Journal of medical internet research*, *22*(9), e21279.

Sontag-Padilla, L., Dunbar, M. S., Ye, F., Kase, C., Fein, R., Abelson, S., ... & Stein, B. D. (2018). Strengthening college students' mental health knowledge, awareness, and helping behaviors: the impact of active minds, a peer mental health organization. *Journal of the American Academy of Child & Adolescent Psychiatry*, *57*(7), 500-507.

Wilks, C. R., Auerbach, R. P., Alonso, J., Benjet, C., Bruffaerts, R., Cuijpers, P., ... & Sadikova, E. (2020). The importance of physical and mental health in explaining health-related academic role impairment among college students. *Journal of Psychiatric Research*, *123*, 54-61.

Wynaden, D., McAllister, M., Tohotoa, J., Al Omari, O., Heslop, K., Duggan, R., ... & Byrne, L. (2014). The silence of mental health issues within university environments: A quantitative study. *Archives of psychiatric nursing*, *28*(5), 339-344.

Zhang, R. (2017). The stress-buffering effect of self-disclosure on Facebook: An examination of stressful life events, social support, and mental health among college students. *Computers in Human Behavior*, *75*, 527-537.

Appendix A



April 7, 2020

Dr. Taylor Hall
Assistant Professor, School of Social Work
Burrill Office Complex, Room 102Y

Re: IRB Approval Letter – Case #2020156

Dear Taylor,

This approval letter is to inform you that the Institutional Review Board (IRB) has approved (*expedited*) the research project titled, “*Exploring the Relationship Between Mental Health, Behavior Health Supports, and College Performance in Public University Students.*”

The approval for your study is active for a period of one (1) year, expiring April 7, 2021. You are expected to adhere to the procedures as outlined in your proposal. Any changes in procedures, protocol, or the consent form will require the approval of the IRB. You are also expected to notify the IRB immediately in the event of injury to, or any problem with, the subject(s) participating in the study.

As the Principal Investigator, you have primary responsibility for protecting the rights and welfare of human research subjects and for complying with the provisions of the Institutional Review Board.

Please share this with the co-investigator(s) you are working with on this project. Thank you, and good luck with your research project.

A handwritten signature in black ink, appearing to read "Elizabeth R. Spievak".

Elizabeth R. Spievak, IRB Chair

Appendix B

ATP Smargon IQ Score: Great | Published

Thank you so much for taking the time to complete this survey! Block Options

Q4 We are going to begin by asking you some basic demographic questions to learn more about you.

What gender do you identify most with?

- Male
- Female
- Transgender
- Gender Queer
- Other

Q5 What is your age?

18 28 39 49 59 70 80

Current Age

--	--	--	--	--	--	--	--

Q6 What race do you most identify with? If Latinx, please identify ethnicity. Select as many as apply.

- Black Non-Latinx
- Black Latinx

- White Non-Latinx
- White Latinx

- American Indian/Alaskan Native
- Asian/Pacific Islander
- Multiracial

Q7 Do you consider yourself to be part of the LGBTQ community?

- Yes
- No

Q8 What type of community are you from?

 Rural
 Suburban
 Urban

Q9 Are you enrolled at BSU School of Social Work as a part time or full time student?

 Part Time Student
 Full Time Student

Q10 Do you live on campus or commute to BSU School of Social Work?

 Live on campus
 Commute to campus

Q58 What is your major?



Q11 What is your employment status while enrolled in classes in BSU SSW?

 Employed part-time
 Employed full-time
 Not working for wages

Q12 What is your average household income per year?

 Less than \$20,000 per year
 Over \$20,000 but less than \$40,000 per year
 Over \$40,000 but less than \$60,000 per year
 Over \$60,000 but less than \$80,000 per year
 Over \$80,000 but less than \$100,000 per year
 Over \$100,000 per year

Q13 Are you a first generation college student? (Are you the first person in your family to attend a college/university?)

 Yes
 No

Q14 Is English your first language? If NO, please specify which language is primary.

 Yes
 No

 **Q15** Are you currently serving in the military, or are you a military veteran?

 Yes
 No

 **Q16** Are you a parent? If YES, how many children do you have?

 Yes
 No

 **Q20** How would you rate your overall mental health?

 Excellent
 Good
 Average
 Poor
 Terrible

 **Q23** Do you have a chronic mental health condition that interferes with your daily life? If YES, please specify.

 Yes
 No

[Add Block](#)

▼ BSU SSW wants to address depression, anxiety, and stress levels in our students
Block Options ▼

 **Q25** The next set of questions will help us learn more about how you experience depression, anxiety, and stress.

 Over the past week, I found it hard to wind down.

Did not apply to me at all
 Applied to me to some degree, some of the time
 Applied to me to a considerable degree or good part of the time
 Applied to me very much or most of the time

 **Q26** Over the past week, I was aware of dryness in my mouth.

 Did not apply to me at all
 Applied to me to some degree, some of the time
 Applied to me to a considerable degree or good part of the time
 Applied to me very much or most of the time

<p> Q27</p> <p></p>	<p>Over the past week, I couldn't seem to experience any positive feeling at all.</p> <p><input type="radio"/> Did not apply to me at all</p> <p><input type="radio"/> Applied to me to some degree, some of the time</p> <p><input type="radio"/> Applied to me to a considerable degree or good part of the time</p> <p><input type="radio"/> Applied to me very much or most of the time</p>
<p> Q28</p> <p></p>	<p>Over the past week, I experienced breathing difficulty (e.g. excessively rapid breathing, breathlessness in the absence of physical exertion).</p> <p><input type="radio"/> Did not apply to me at all</p> <p><input type="radio"/> Applied to me to some degree, some of the time</p> <p><input type="radio"/> Applied to me to a considerable degree or good part of the time</p> <p><input type="radio"/> Applied to me very much or most of the time</p>
<p> Q29</p> <p></p>	<p>Over the past week, I found it difficult to work up the initiative to do things.</p> <p><input type="radio"/> Did not apply to me at all</p> <p><input type="radio"/> Applied to me to some degree, some of the time</p> <p><input type="radio"/> Applied to me to a considerable degree or good part of the time</p> <p><input type="radio"/> Applied to me very much or most of the time</p>
<p> Q30</p> <p></p>	<p>Over the past week, I tended to over-react to situations.</p> <p><input type="radio"/> Did not apply to me at all</p> <p><input type="radio"/> Applied to me to some degree, some of the time</p> <p><input type="radio"/> Applied to me to a considerable degree or good part of the time</p> <p><input type="radio"/> Applied to me very much or most of the time</p>
<p> Q31</p> <p></p>	<p>Over the past week, I experienced trembling (e.g. in the hands).</p> <p><input type="radio"/> Did not apply to me at all</p> <p><input type="radio"/> Applied to me to some degree, some of the time</p> <p><input type="radio"/> Applied to me to a considerable degree or good part of the time</p> <p><input type="radio"/> Applied to me very much or most of the time</p>
<p> Q32</p> <p></p>	<p>Over the past week, I felt that I was using a lot of nervous energy.</p> <p><input type="radio"/> Did not apply to me at all</p> <p><input type="radio"/> Applied to me to some degree, some of the time</p> <p><input type="radio"/> Applied to me to a considerable degree or good part of the time</p> <p><input type="radio"/> Applied to me very much or most of the time</p>

 Q33 Over the past week, I was worried about situations in which I might panic and make a fool of myself.



- Did not apply to me at all
- Applied to me to some degree, some of the time
- Applied to me to a considerable degree or good part of the time
- Applied to me very much or most of the time

 Q34 Over the past week, I felt that I had nothing to look forward to.

Q34



- Did not apply to me at all
- Applied to me to some degree, some of the time
- Applied to me to a considerable degree or good part of the time
- Applied to me very much or most of the time

 Q35 Over the past week, I found myself getting agitated.

Q35



- Did not apply to me at all
- Applied to me to some degree, some of the time
- Applied to me to a considerable degree or good part of the time
- Applied to me very much or most of the time

 Q36 Over the past week, I found it difficult to relax.

Q36



- Did not apply to me at all
- Applied to me to some degree, some of the time
- Applied to me to a considerable degree or good part of the time
- Applied to me very much or most of the time

 Q37 Over the past week, I felt down-hearted and blue.

Q37



- Did not apply to me at all
- Applied to me to some degree, some of the time
- Applied to me to a considerable degree or good part of the time
- Applied to me very much or most of the time

 Q38 Over the past week, I was intolerant of anything that kept me from getting on with what I was doing.

Q38



- Did not apply to me at all
- Applied to me to some degree, some of the time
- Applied to me to a considerable degree or good part of the time
- Applied to me very much or most of the time

 Q39	Over the past week, I felt I was close to panic.
	<input type="radio"/> Did not apply to me at all <input type="radio"/> Applied to me to some degree, some of the time <input type="radio"/> Applied to me to a considerable degree or good part of the time <input type="radio"/> Applied to me very much or most of the time
 Q40	Over the past week, I was unable to become enthusiastic about anything.
	<input type="radio"/> Did not apply to me at all <input type="radio"/> Applied to me to some degree, some of the time <input type="radio"/> Applied to me to a considerable degree or good part of the time <input type="radio"/> Applied to me very much or most of the time
 Q41	Over the past week, I felt I wasn't worth much as a person.
	<input type="radio"/> Did not apply to me at all <input type="radio"/> Applied to me to some degree, some of the time <input type="radio"/> Applied to me to a considerable degree or good part of the time <input type="radio"/> Applied to me very much or most of the time
 Q42	Over the past week, I felt that I was rather touchy.
	<input type="radio"/> Did not apply to me at all <input type="radio"/> Applied to me to some degree, some of the time <input type="radio"/> Applied to me to a considerable degree or good part of the time <input type="radio"/> Applied to me very much or most of the time
 Q43	Over the past week, I was aware of the action of my heart in the absence of physical exertion (e.g. sense of heart rate increase, heart missing a beat).
	<input type="radio"/> Did not apply to me at all <input type="radio"/> Applied to me to some degree, some of the time <input type="radio"/> Applied to me to a considerable degree or good part of the time <input type="radio"/> Applied to me very much or most of the time
 Q44	Over the past week, I felt scared without any good reason.
	<input type="radio"/> Did not apply to me at all <input type="radio"/> Applied to me to some degree, some of the time <input type="radio"/> Applied to me to a considerable degree or good part of the time <input type="radio"/> Applied to me very much or most of the time

Q45 Over the past week, I felt that life was meaningless.

Did not apply to me at all

Applied to me to some degree, some of the time

Applied to me to a considerable degree or good part of the time

Applied to me very much or most of the time

Add Block

▼ Block 2 Block Options ▼

Q59 Have you ever attempted to access behavioral health supports for your mental health? This could be group or individual counseling, therapy, or even prescription medication to address mental health difficulties, or something else.

If Yes, describe what supports you have accessed (please describe below):

If No, please describe why you have not attempted to get mental health support (please describe below):

Q60 Have your mental health difficulties ever interfered with your college success? This could be missing class, taking a semester off, handing in assignment late or not at all, trouble concentrating on work, or something else.

If Yes, please describe how mental health impacts your college success (please describe below):

No

Q61 Have you disclosed your mental health condition to your college?

If Yes, please tell us why:

If No, please tell us why not:

Q62 Are you aware the BSU has mental health support available on campus via The Wellness Center?

Yes

No

Q63 Have you accessed services and supports from The Wellness Center at BSU for mental health?

Yes

No

 Q64

Want to tell us more about your experiences with mental health while being a college student?
For your time, you will be compensated \$10.

 Thank you!

Name

Cell number

BSU email address

Banner ID #

[Add Block](#)

 End of Survey [Survey Termination Options...](#)



Appendix C

Dear Professor _____:

My name is Abby Smargon, and I am a senior level social work student at BSU. As a recipient of the ATP Summer Research Grant, I am reaching out to faculty teaching summer courses to recruit potential undergraduate students to participate in a brief online survey. This research study is designed to learn more about the lives and experiences of our BSU undergraduate students as it relates to mental health, behavioral health supports, and college success. They will be asked to answer basic demographic questions about themselves, their mental health, their engagement with behavioral health services, and their success in college. Their participation in the study will last approximately 10 minutes and will assist in learning more about student experiences around mental health and college success. Survey completion is anonymous. If a student chooses, the first 70 survey completers may receive \$5 to their BSU Connect Card for study completion by breaking anonymity and providing their name, BSU email address, and BSU Banner ID # to Dr. Taylor Hall at t7hall@bridgew.edu at the surveys end.

If you so agree to help with recruitment by sharing this survey with your students, here is the language the email must contain:

Dear Participant:

You are invited to participate in a research study designed to learn more about the lives and experiences of our BSU students as it relates to mental health, behavioral health supports, and your college success. You will be asked to answer basic demographic questions about yourself, your mental health, your engagement with behavioral health services, and your success in college. Your participation in the study will last approximately 10 minutes and will assist in learning more about student experiences around mental health and college success. Survey completion is anonymous.

For your time, you may choose break anonymity and submit your name, BSU email address, and Banner ID # at the end of the survey to Dr. Taylor Hall at t7hall@bridgew.edu to be compensated \$5 on your Connect Card. The first 70 students to do so will be compensated. The information you provide will be collected confidentially if you choose to be compensated. Your name or identifiable information will not be included on the questionnaire, the written work or any of the materials used in this study. If the data should be published, your identity will not be revealed.

There are no foreseeable risks in participating in this study, though you may experience minimal discomfort around questions regarding your mental health and how that impacts your college experience. This study is important because we want to learn more about our students' experiences and respond by developing programs and supports based on this data. Individually, you may or may not benefit personally by participating in this study. If you feel uncomfortable at any time and would like to seek support, please contact the BSU Wellness Center at 508-531-1252 to schedule an online support meeting.

Your participation in this study is voluntary and you may refuse to participate or discontinue your participation at any time without incurring any penalty or losing any benefits to which you are entitled. You are also free to decline to answer any questions that make you uncomfortable.

If you have any questions about this study, please feel free to call Dr. Taylor Hall (508-531-2597). If you have any questions about your rights as a research subject, you may call the University Institutional Review Board office (508-531-1242) and will be given an opportunity to discuss any questions in confidence, with a member of the committee. This is an independent committee composed of faculty and staff of Bridgewater State University and its affiliates, as well as lay members of the community not connected with the institution. The committee has reviewed this study.

By clicking the link and beginning the survey, you are acknowledging that your current questions have been answered in language that you understand.

Thank you for your help.

https://bridgew.az1.qualtrics.com/jfe/form/SV_3P1cxA0pnNpYMCx

