Evaluation of student mental health needs at entry to university: Initial findings from the U-Flourish student well-being and academic success study

D. Rivera1, N. King2, W. Pickett2, S. McNevin1, C. Bowie, K. Harkness3, S. Cunningham3, M. Milanovic3, K. Saunders4, A. Duffy1,4
1Dept. Of Psychiatry, Queen’s University, 2Dept. Of Public Health Sciences, Queen’s University, 3Dept. of Psychology, Queen’s University, 4Dept. of Psychiatry, University of Oxford

Introduction

• 1.4 million students transition to post-secondary studies at the peak period of risk for psychiatric illness (16-24 years of age) 1-3
• Increased diversity and younger student populations translate into more diverse mental health care needs 4-6
• Increasing student demand for mental health support and care is straining university resources 5
• Limited systematic research exists to inform resource development and to effectively support the increased and highly variable student mental health care needs 4,6
• The U-Flourish Student Well-Being and Academic Success Study was launched at Queen’s University in September 2018, led by an interdisciplinary team and adopting a student-informed study approach

Goals

1. Partner with stakeholders and students to improve mental health and academic outcomes through evidence-informed resource and service development
2. Collect data on the current mental health needs of students
3. Determine the individual and collective contribution of specific family, personal, and environmental factors to specific students’ health, mental health, and academic outcomes
4. Assess the longitudinal relationship between mental health and academic outcomes over undergraduate study

Methods

Fall 2018 Survey

- Student-led collaborative engagement campaign developed and launched in Summer and September 2018
- All first-year undergraduate students at Queen’s University (n=5242) emailed link to online U-Flourish survey
- Personal factors, family factors, environmental factors, psychological and emotional health, motivations for learning, and lifestyle habits and behaviour assessed using validated self-report measures

Winter 2019 Survey

- Follow-up to assess mental health using validated symptom rating, student life satisfaction, and emotional well-being scales
- GPA, academic probation or suspension status, and plans to return collected to assess academic success
- Students asked to indicate mental health services used and about barriers to care, timing, frequency, and satisfaction of service using validated survey questions

Results

2018-2019 U-Flourish Queen’s first-year student cohort

High burden of mental health need reported by university students

Figure 1. 2018-2019 respondent pool demographic information. (a) Fall 2018 baseline survey respondent pool (n=3020; 88% of all undergraduates) description by gender, campus, academic program, and academic load. (b) Winter 2019 follow-up survey respondent pool (n=1939; 64% of baseline respondents) description by gender, campus, academic program, and academic load.

Figure 2. Rates of specific mental health illnesses and lack of treatment of entering undergraduate students. (a) Diagnosed psychiatric disorders amongst entering students. (b) Percent of students with psychiatric diagnosis who were not receiving any form of treatment/support. (c) Non-diagnosed students scoring above the clinical cut-off for symptom rating scales of various psychiatric disorders. (d) Percent of non-diagnosed students with symptom severity scoring above clinical cut-off for psychiatric disorders not receiving treatment/support.

Symptoms of common mental problems appear to worsen over the year

Figure 3. Depressive symptom distribution over first year. Percent distribution of depression severity grouped by PHQ-9 scores in students scoring above the clinical cut-off for psychiatric disorder.

Figure 4. Anxiety severity distribution over first year. Percent distribution of anxiety severity grouped by GAD-7 questionnaire score at Fall 2018 baseline survey (blue; n=3020) and Winter 2019 follow-up survey (green; n=1939) of the 2018-2019 U-Flourish student cohort (n=3020). GAD-7 scores of 5-9 correspond to mild symptoms, 10-14 to moderate, and 15+ to severe.

Conclusions

• Students entering a major Canadian university report a significant mental health burden which appears to worsen over the first year of study
• There is considerable lack of engagement, support, and treatment for students reporting clinically-significant symptoms
• There is a need to understand what factors are related to the high and increasing severe level of mental health symptoms experienced during the transition to, and over the early course of, undergraduate studies

Future Goals

• Continue to study the 2018-2019 first-year student cohort through their next 2 years of undergraduate study
• Launch a 2nd first-year cohort to study forward at Queen’s and Oxford University
• Identify risk profiles and model well-being & academic outcomes
• Translate findings for campus partners, students, and external stakeholders
• Develop evidence-informed prevention and early intervention initiatives

Acknowledgements

We would like to thank all students, staff and faculty who assisted with the U-Flourish study, making the launch of U-Flourish a major success. We would also like to thank Roz Murphy for her help with graphics and all participating students for their involvement and partnering with us in this research. Finally, we would like to thank the Division of Student Affairs (Queen’s University), Rossy Family Foundation, and the Canadian Institute of Health Research for funding support.

References


K. Harkness

Dept. Of Psychiatry, Queen’s University, 1

K. Saunders

Dept. Of Public Health Sciences, Queen’s University, 2

K. Saunders

Dept. Of Psychiatry, Queen’s University, 3

K. Saunders

Dept. Of Psychiatry, University of Oxford, 4