



Increasing Student Retention through Improved Mental Health

Many of us look back fondly on our college days—for good reason. College life is full of opportunities for new experiences, rapid learning, and personal growth. It can be exhilarating and exciting to live in a new place, study a course of interest, and strive to achieve academic success. But it can also cause tremendous stress. For some students, day-to-day college life feels like a losing battle. The everyday stresses of college life can exacerbate existing mental illness making it more severe or trigger symptomatology in those students with a predisposition.^{1,2} According to a 2012 report from the National Alliance on Mental Illness, colleges and universities throughout the United States have reported significant increases in the frequency and severity of student psychological distress.³ The suicide rate among people 15–24 years of age has tripled since the 1950's, and approximately 1,100 suicides occur at colleges every year in the United States alone.⁴ Now, more than ever, campuses need to address the challenge of promoting a culture of mental and emotional well-being among their students.

Psychological Distress Is Common

Ninety-five percent of school administrators agree that mental health is a significant issue at their institutions.⁵ Psychological distress is

widespread among college students and ranges from mental illness, short-term mental health problems, temporary stress or anxiety, or a combination thereof. Most people who struggle with persistent psychological distress experience symptoms of mental illness by the age of 24.⁶ Nearly 40% of college students report symptoms of depression that compromises their ability to function at least once within a 12-month period.⁷

At any given time, 32% of college and university students are dealing with a mental illness with 5% screening positive for panic disorders, 6% for anxiety disorders, 9% for major depression, and 15% self-injuring without thoughts of suicide.⁸ The rate climbs higher when you include substance use or eating disorders which are prevalent in student populations. Less common but still prevalent are health concerns among college students including bipolar disorder, schizophrenia, post-traumatic stress disorder, and personality disorders.³

Of immediate concern are those students contemplating suicide. In any given year, 6% of undergraduate students and 4% of graduate students will have seriously considered suicide.⁴ Twenty percent of students have considered suicide at some point during their collegiate career.⁹ Suicide is considered to be the second

leading cause of death for college students, behind accidents. But due to the difficult distinctions separating intentional from accidental death, and the inclusion of deaths of “unknown cause” within the “accident” category, it may actually be the leading cause.¹⁰

Students Aren't Seeking Help

Only 40% of students with mental illness seek help. Some studies have found that an important factor is stigma surrounding mental health.¹¹ This stigma can result in stereotyping, discrimination, and ultimately the alienation of students who are already struggling. Other studies have found that stigma is a less common reason for not seeking treatment, and that the attention to stigma has taken resources away from more prevalent contributing factors.

According to the Healthy Minds Study by Prof. Daniel Eisenberg of the University of Michigan, only 12% of students agreed with the statement “I think less of someone who has received mental health treatment.”⁸ More than 80% of college students with mental illnesses who have not sought out help believe that treatment would be helpful and know that they might need help. Students report being unwilling to seek help because they are unsure of the severity of their issues as compared to peers. Some students report that they see their mental health condition as normal due to the generally high stress levels of collegiate environments. The most common reason cited by students for not seeking help is the thought that they would be “bothering mental health services,” or taking resources away from those in greater need. Instead, many students try—and often fail—to deal with their mental health concerns on their own.⁸

By promoting a culture of campus wellness, students who are now reluctant to use available services might be more willing to seek out help. If the main concern of students, faculty, and staff is the welfare of others instead of stigma, as has previously been thought, then the process of getting students to treatment needs to be altered. Students without serious or life-altering mental illnesses need to know that when they need help there is a place for them in the wellness centers and/or therapist's offices of your institution. They need to know that their peers, their professors, and the staff members at their school understand the importance of mental wellness and are there to support them. By creating a community that prioritizes mental and emotional wellness, we can help students before their problems become severe.¹²

Healthy Students = Healthy Schools

It is in every college and university's best interest to invest time, money, resources, and training to promote mental and emotional health on

campus. Promoting an environment of wellness promotes student success. Students who experience depression, anxiety and other psychological disorders perform more poorly in class. Depressed and anxious students are also more likely to be absent, take semesters off, and/or drop out of school.¹³ When students drop out due to psychological concerns, everyone loses, including the student and their future aspirations, the institution and its ratings, its loss of tuition and alumni dollars, and its impact on the campus culture.¹⁴

According to the American Council on Education, those lost students are also less likely to attain well-paying jobs and achieve productive life goals, which decreases their potential to contribute positively to both society and their alma mater.⁹

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Word of mouth is a crucial part of what shapes an institution's reputation. Students who are actively provided with steady support through counseling and peer support are more likely to speak positively about their institutions, complete their degree, and donate after graduation.⁴ By fostering a campus culture that emphasizes wellness, the college or university may earn positive student feedback, which may

improve their student feedback and overall institutional reputation.

In contrast, students with mental health issues who are unaware of, or feel alienated from utilizing campus resources, or suffer administrative penalties for disclosing their conditions are likely to speak out about their negative experiences—and so are their parents. When a student or parent publicly speaks out against an institution, it reflects poorly upon that institution's quality and future prospects. Over time, enough bad publicity can damage a school's rankings, retention rate, and alumni giving rate.³

Investing in Mental Health Benefits Students

A culture of mental and emotional wellness can change students' lives. An important part of wellness culture is campus wellness and/or mental health centers. Students benefit most from centers when an array of appointment times are available, clinics are known and easily accessible, staff are not overworked, and confidentiality is prioritized.³ Especially when intervention occurs early, mental health treatment and wellness services can make a tremendous difference.

In addition to wellness and mental health centers, hotlines, and other staff-run services, students benefit greatly from peer mentoring programs and overall wellness promotion campaigns. Trainings for students, staff, and faculty can also improve overall campus quality of life especially if they provide hands-on experience in how to manage conversations with peers and students relating to concern about psychological health and how to build motivation to seek help.

Everyone at a school has opportunities to support students and foster an environment focused on mental and emotional well-being. A campus culture of wellness can have a significant positive impact for students, especially those who might be suffering.

Supporting mental and emotional wellness saves money. Your school may have economic concerns associated with wellness or mental health centers, hotlines, and facilitating student-run peer groups such as staffing, hours of service, and space. But in the long run, schools save money by providing mental and emotional health support for their students. In terms of tuition alone, the benefits are astounding. It is estimated that delivering treatment to 100 depressed students in a single school year could result in 6 averted dropouts and an average of \$240,000 in additional tuition dollars.¹³

The Six Reasons to Invest in Student Mental Health

1. Increase Student Performance

Student mental health affects performance in school. Mental illness affects student productivity and can have negative impact on grades. Poor mental health can lead to procrastination, social withdrawal, and feelings of despair, as students neglect not only their studies, but social functions and school events.⁸

The impact of mental illness upon GPA is substantial and immediate. Mild to severe depression leads to an average -0.2 change in GPA the semester of onset, and if there is co-occurring anxiety, that figure becomes -0.4.⁸ At NYU in 2014, 22.5% of students reported that anxiety had impacted their academic performance during the past 12 months, 55% that emotional and mental difficulties had impacted their academic performance for one or more days in the past month, and 59% of students with symptoms of depression said that those symptoms had made it difficult for them to do their schoolwork.¹⁰

By reducing stress levels through a campus focus on mental and emotional wellness, a school may be able to alleviate some of these short term anxieties and emotional and mental difficulties. If students know that services and support are available not just to those with serious mental illnesses, but those who are struggling more short term, they are less likely to worry about bothering personnel or stealing time away from students in dire need.⁸

2. Improve Student Retention

Many college and university dropouts have mental illnesses. Among students who had dropped out with less than a 3.0 GPA, 25% screened positive for at least one mental illness, such as depression or

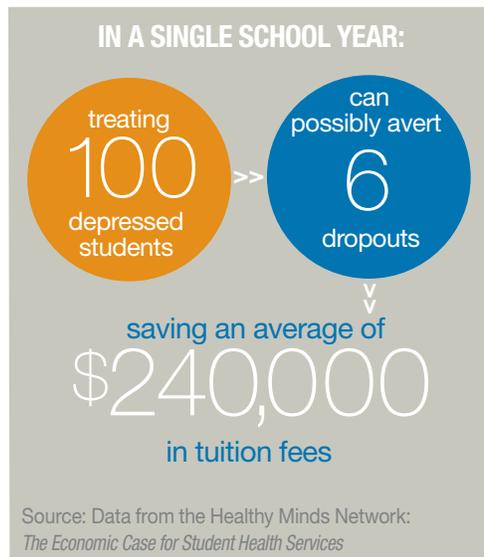
generalized anxiety disorder.⁹ Mental illness, especially when coupled with substance use, is also a leading cause of discontinuous enrollment.¹⁴

Students who did not intend to drop out of school because of their mental health may end up not returning after discontinuous enrollment. Students who have skipped semesters, especially when they cite their main cause as related to their mental health, are less likely to gradu-

ate on time or at all, while their peers progress without discontinuity. Many students who intend to only “take a break” from college or university, especially when they have left for more than two semesters, do not return to complete their degree.¹⁴

Students who participate in campus counseling services generally report improvement in their mental health or attendance problem, and they report higher satisfaction with their quality of life. Quality of life is the most cited reason for choosing to drop out of school.⁴

By providing a healthy culture of mental and emotional wellness on campus, including wellness or mental health centers, schools can improve student quality of life, and retain students who might be at risk.¹⁴



3. Bolster Campus Safety

A mentally healthy campus is a safer campus. The majority of violence on campuses is committed by students who have screened positive for mental illness. This is especially true for perpetrators of partner violence and sexual assault. A generally unsafe environment or an increase in crime, especially of sexual nature, not only places students at increased risk, but can cause bad press and lower enrollment for colleges and universities.⁴

Sexual assault and gun violence on campus have received significant media attention over the past few years. Supporting students with adequate and readily available mental health services may help reduce these types of crimes.

In the event that crimes do occur, treating survivors with immediate respect and adequate care is essential. Due to the national attention directed towards violent and sexual campus crimes, cost in school reputation can be high when these events are handled poorly, or survivors are not supported by campus services. The cost of treating community trauma in cases of suicide, accidental deaths while using substances, crimes, and assaults are also high, as counselors may be needed for students, faculty, and staff around campus who have been mentally or emotionally affected by the incident(s).⁹

4. Help Reduce Suicide Rates

Student mental health services can help reduce suicide rates by catching potentially suicidal students early. Suicide and associated depres-

sion is a major problem facing students and schools today. The event of suicide is generally not a spur of the moment decision, but the culminating event of weeks, months, or even years of consideration and planning.¹²

Suicidal thoughts are often comorbid with depression, anxiety, and/or substance use. A completed suicide is the end of a mental illness continuum, and the earlier in the continuum the illness is noticed and treated, the more likely it is that suicidal behaviors and thoughts will cease.¹² Having a comprehensive wellness system in place so that students will receive treatment early can reduce suicide rates on campus.¹²

5. Promote Resilience and Reduce Stress

Mental health services are not just for students who are already suffering, but also for those who may develop a problem in the future. Colleges and universities can be stressful environments, and learning to cope with stress is an important part of academic success. Resilience, or the ability to bounce back after trouble or trauma, is a key component of well-being, and having an array of available, accessible mental health services promotes resilience.⁹

Taking a proactive stance on stress reduction by educating students about their own mental health can have positive effects not just in school, but later in life. Promoting mental and emotional wellness on campus is good for all students, not just those with mental illnesses. Knowing ways to cope with stress is useful for every student, whether they are dealing with severe depression or have never suffered from a mental health issue. If students are educated in how to take care of their own mental health, they are more likely to have higher levels of resilience.⁹ They will be better equipped to cope with stresses in school and in the workforce. Resilient students are more prepared after graduation. They take more creative risks, and are better at working with others.⁹

Being able to identify friends and colleagues who might be suffering is one key to maintaining a mentally healthy educational environments, which is why we recommend programs that inform everyone in your campus community about how to encourage those who may be suffering to reach out for help, such as *At-Risk on Campus for Faculty & Students*.¹⁵

6. Help Reduce Substance Abuse

Substance abuse is a common strategy for self-medicating mental illnesses such as depression and anxiety.⁹ In some students, substance use disorders, or SUDs may be present, either comorbid with another or multiple mental illnesses, or as the main presenting problem.⁸

While under the influence of substances, students tend to engage in risky behaviors, that can result in assaults, crimes, injuries, and in some cases, even death. By treating the mental illnesses and alleviating



stressors that have caused a student to use at low or moderate levels, (please note that this is not the case for severe SUDs) the chances that these risky behaviors will occur may be reduced.¹⁶

What Can Schools Do?

There are dozens of ways to promote awareness of mental and emotional health on campus and to connect more students at risk with support services including:

- Increase staff at campus and community mental health centers.
- Eliminate obstacles that students face in accessing mental health services, such as inconvenient appointment hours, poor confidentiality, or high costs.
- Train faculty, staff, and students in mental health, how to recognize the signs of psychological distress in themselves and others, how to reach out to the students of concern, and how to motivate them to seek help (i.e., gatekeeper skills).
- Provide on-campus accommodations for students receiving treatment.
- Facilitate development or continuation of peer-operated support groups.
- Include information about available mental health resources on the school's official website as well as on campus materials and in events.
- Collaborate and support student clubs to inform students about available support services, and reduce stigma.

Conclusion

Juggling limited resources as a school administrator or a counseling center director is a challenge, but the return on investment for addressing mental health issues on campus is substantial, both financially and in terms of school reputation. Though the process of change may start with administrators and counselors, it doesn't stop there: supporting students involves the entire staff, faculty, and the student body itself. Reducing stress and psychological distress, increasing outreach and awareness about available resources, and better supporting students are causes worthy of budgetary focus.

Proactively addressing students' mental health struggles and promoting wellness on campus can have a positive impact on an institution's reputation, financial resources, alumni backing, student support, and overall rankings. Since mental health conditions are so common among students, and the benefits of addressing them are so high, it is in every school's best interest to promote mental wellness on campus. Investing in the mental health of students carries numerous long and short-term benefits for students, schools, and society as a whole.

About Kognito

Founded in 2003, Kognito is a leader in immersive learning experiences that drive positive change in health behaviors. Kognito's award-winning online and mobile simulations with virtual humans prepare individuals and professionals to effectively manage challenging conversations about health. Kognito uses a science-driven, research-proven approach and currently has more than 450 clients in education, government, and healthcare settings. Programs for the higher education sector include At-Risk on Campus, LGBTQ on Campus and Veterans on Campus (all are available in both faculty and student versions) and are widely utilized by community colleges, public and private colleges and universities, as well as for-profit and online institutions across the nation. Learn more or access demos at kognito.com.



Kognito has been recognized for its evidence-based programs, and is the only company with digital simulations listed in the Substance Abuse and Mental Health Services Administration's (SAMHSA) National Registry of Evidence-based Programs and Practices (NREPP).

KOGNITO CONVERSATION PLATFORM™ Kognito simulations are developed and delivered using the Kognito Conversation Platform™, a proprietary group of development, delivery, API and analytic technologies integrated with principles of neuroscience, social cognition, and applied game mechanics.

References

- ⁽¹⁾ National Institute of Mental Health. "Depression and College Students." National Institute of Mental Health. US Department of Health and Human Services, 2012. Web. 04 Feb. 2015.
- ⁽²⁾ American College Health Association. American College Health Association-National College Health Assessment II: Reference Group Executive Summary Spring 2014. Hanover, MD: American College Health Association; 2014.
- ⁽³⁾ Gruttadaro, Darcy, Dana Crudo, and NAMI. College Students Speak: A Survey Report on Mental Health. Rep. Arlington, VA: NAMI, 2012.
- ⁽⁴⁾ "Crisis on Campus: The Untold Story of Student Suicides." College Degree Search. College Degree Search, 2012. Web. 09 Feb. 2015.
- ⁽⁵⁾ American Psychological Association: College Students' Mental Health Is a Growing Concern, Survey Finds <http://www.apa.org/monitor/2013/06/college-students.aspx>
- ⁽⁶⁾ Baker, Katie JM. "How Colleges Flunk Mental Health." Newsweek. Newsweek, 11 Feb. 2014. Web. 09 Feb. 2015.
- ⁽⁷⁾ NAMI on Campus, and Ken Duckworth, MD. Mental Illness on Campus~What You Can Do to Help. Arlington, VA: NAMI, 2007. Pdf.
- ⁽⁸⁾ Eisenberg, Daniel, & Sarah Lipson. Data from the Healthy Minds Network: The Economic Case for Student Health Services. Ann Arbor, MI: University of Michigan, 13 Mar. 2014. Pdf.
- ⁽⁹⁾ Douce, Louise A., Richard P. Keeling, American Council on Education, American Psychological Association, and Student Affairs Administrators in Higher Education. A Strategic Primer on College Student Mental Health. Rep. Washington, DC: American Council on Education, 2014.
- ⁽¹⁰⁾ Turner, James C., and Adrienne Keller. Leading Causes of Mortality among American College Students at 4-year Institutions. Charlottesville, VA: University of Virginia & American College Health Association, 2 Nov. 2011. Ppt.
- ⁽¹¹⁾ Grasgreen, Allie. "Colleges Don't Always Help with Mental Health Issues, Student Survey Shows." Inside Higher Ed, 30 Oct. 2012. Web. 09 Feb. 2015.
- ⁽¹²⁾ Suicide Prevention Resource Center. (2004). Promoting mental health and preventing suicide in college and university settings. Newton, MA: Education Development Center, Inc.
- ⁽¹³⁾ Eisenberg, Daniel. Connections between Mental Health and Academic Outcomes. Ann Arbor, MI: University of Michigan, 13 Mar. 2014. Pdf.
- ⁽¹⁴⁾ Arria, Amelia M., Laura M. Gardner-Dykstra, Kimberly M. Caldeira, Kathryn B. Vincent, Emily R. Winick, and Kevin E. O'Grady. "Drug Use Patterns and Continuous Enrollment in College: Results From a Longitudinal Study." Journal of Studies on Alcohol and Drugs 74 (2013): 71-83. Web.
- ⁽¹⁵⁾ Live Well NYU. "Mental Health / Depression." NYU University Life. New York University, 2014. Web. 11 Feb. 2015.
- ⁽¹⁶⁾ Arria, A. M., Caldeira, K. M., Bugbee, B. A., Vincent, K. B., & O'Grady, K. E. (2013). The academic opportunity costs of substance use during college. College Park, MD: Center on Young Adult Health and Development.