

Student Perceptions of Mental and Emotional Health Support at the University of Rhode Island: An Overview

Megan Kurose

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Introduction

Suicide is now the second leading cause of death among teenagers in the United States.¹ This statistic speaks volumes, from the dismal state of health care delivery our nation provides, to the way that we care for the people in our community. No one should have to feel overwhelmingly lonely, depressed, or anxious, yet in a Fall 2017 nationwide survey of 31,463 college students, 51.7% of respondents reported feeling hopeless during the last twelve months.² Mental health care is not a cultural imperative within our modern-day society; rather, the issue is heavily stigmatized within mainstream media and a taboo topic of discussion. While the push for the institution of more actionable policies surrounding mental health care delivery is underway, the United States still has a long way to go in the mental health epidemic our country is currently facing.

Mental health among college students is a topic that has recently received a lot of press, both positive and negative. The recent growth in demand for mental health services on college campuses has forced many higher education institutions to take alternative measures, such as outside community referrals, to make up for the gap in supply.³ Now more than ever before, colleges and universities around the United States are making the push towards offering more mental health care options to enrolled students. At the University of Rhode Island, mental health has been receiving more attention during the past year. URI is the first university in the state to offer mental health first aid training, and the administration is pursuing a more active role in

¹ Vanorman, Alicia, and Beth Jarosz. "Suicide Replaces Homicide as Second-Leading Cause of Death Among U.S. Teenagers." *Population Reference Bureau*, Population Reference Bureau, 9 June 2016. Web.

² *National College Health Assessment: Fall 2017 Reference Group Executive Summary*. American College Health Association, 2017, *National College Health Assessment: Fall 2017 Reference Group Executive Summary*. Web.

³ Williams, Lee Burdette. "Under Pressure: The Growing Demand for Student Mental Health Services." *Association of Governing Boards, AGB*, 27 June 2017. Web.

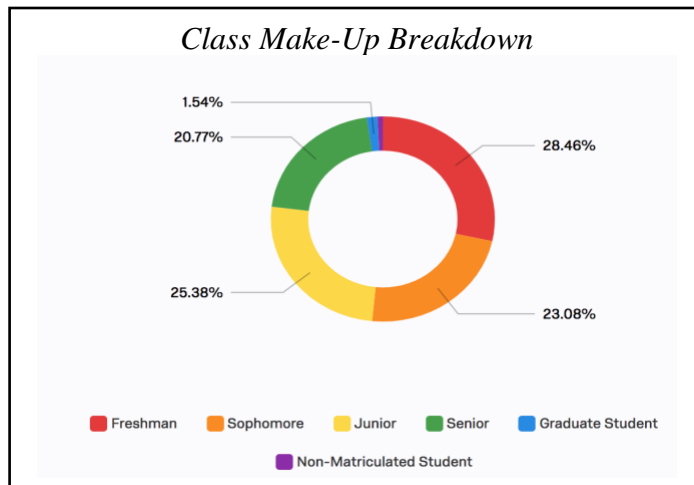
normalizing the conversation surrounding mental health.⁴ This report will serve to provide analytic data on student perceptions of mental and emotional health support services and organizations.

Survey Results: Data and Analysis

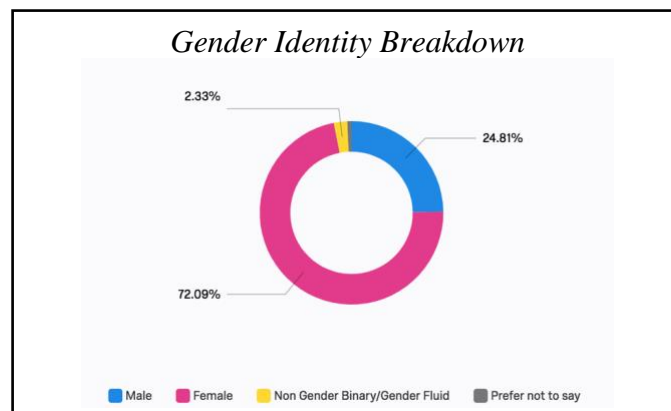
For my senior Honors project under the supervision of Dr. Sara Murphy, I organized and hosted URI's very first "Mental Health Awareness Day". The event was held on Wednesday, April 11, 2018, on the Quadrangle on URI's Kingston campus. The following mental health-related organizations from URI ran informational and interactive booths during the event: Health Services, the Counseling Center, the Psychological Consultation Center, Emergency Medical Services, Campus Police, Substance Abuse Prevention Services, the Dean of Students Office, Housing and Residential Life, the Couple and Family Therapy Clinic, Disability Services, the Women's Center, the Gender and Sexuality Center, and the UReca! (URI Eating Concerns Advisors) Club. During the entirety of the event (three hours), a survey was offered via two iPads as a voluntary opportunity to guests who attended. The survey included twelve questions, though depending on the responses of the individuals and the display logic subsequently invoked, participants may have answered less than twelve questions due to situation applicability. The survey took most participants three to four minutes to complete. After the survey was completed, participants entered a raffle to win either a \$25.00 Starbucks gift card or a lavender aromatherapy gift basket. After data cleaning to eliminate results from non-student participants, the survey received 130 unique survey responses in total.

⁴ McCarthy, Carol. "Mental Health Initiative at University of Rhode Island about Keeping Each Other Well." *URI Today*, University of Rhode Island, 10 Oct. 2017. Web.

The first two questions in the survey were solely for demographic purposes. The first question asked, “What is your class year?” The survey respondents yielded a fairly even spread among freshmen, sophomores, juniors, and seniors, though the most responses came from freshman students. Graduate students represented 1.54% of the survey respondents, while non-matriculated students made up 0.77% of the total respondents. The chart below provides a visual representation of the class make-up of the survey participants:

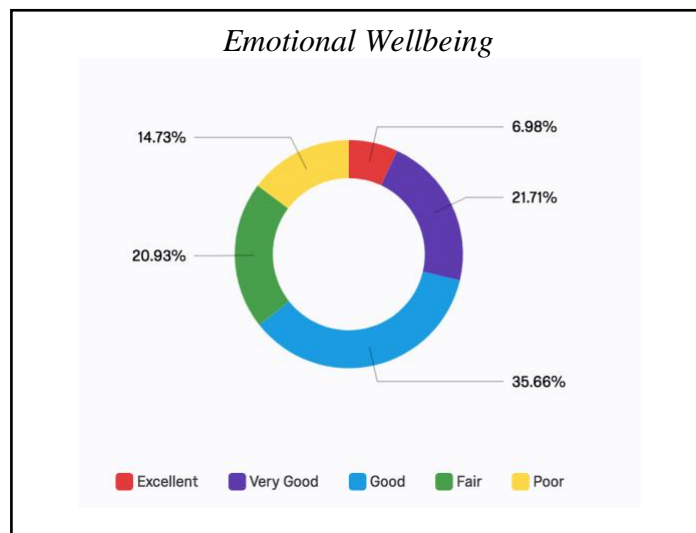


The second demographics-based question asked, “What is your gender identity?” The survey results showed that 24.81% of the respondents were male, 72.09% were female, 2.33% identified as non-gender binary/gender fluid, and 0.78% preferred not to say. Thus, the majority of the survey respondents identified as female. A visual representation of the gender identity breakdown may be seen below:



The survey then went on to ask students, “Which of the following organizations on campus are you familiar with?” The answer choices for Question 3 reflected the twelve mental health-related organizations on campus that participated in the event (please refer to page three for the full list). Two student-run clubs relating to mental health were excluded from the answer choices. According to the results, the most well-known services on campus were Health Services, Campus Police, and the Women’s Center, with 13.75%, 11.42%, and 11.07% of survey respondents indicating they were familiar with these services, respectively. The least well-known organization was Substance Abuse Prevention Services, with only 2.21% survey participant awareness.

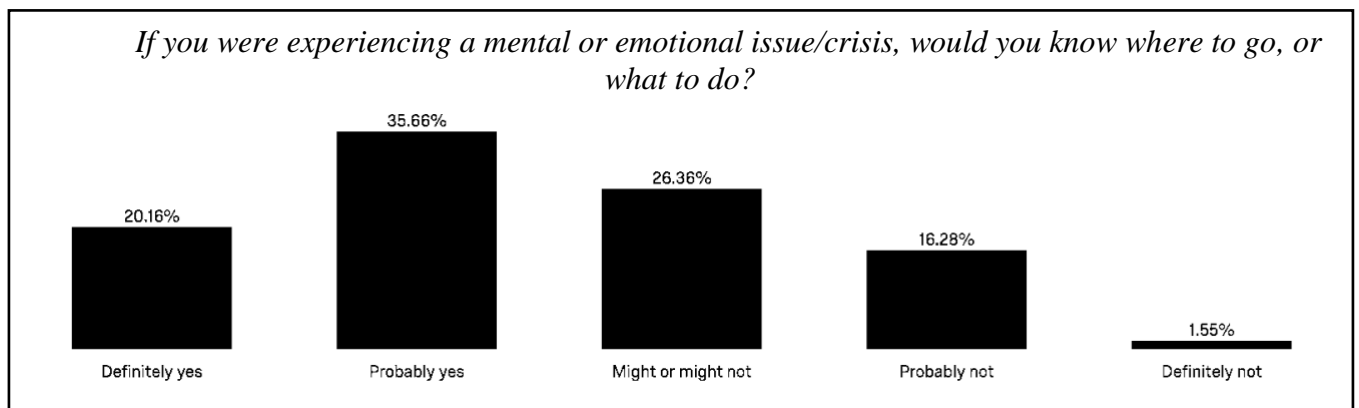
Perhaps one of the most important questions of the survey followed next: “In general, how would you rate your mental and emotional wellbeing?” The results from Question 4 are displayed below:



When filtered by class year, the class year that answered with the highest percentage of the answer choice “poor” was the class year “senior”. According to the report, 22.22% of senior respondents answered the question with “poor”.

After students rated their current mental/emotional state, they were asked two questions about their comfort level and knowledge regarding mental health-related services available at URI. Question 5 asked respondents, “If you were experiencing a mental or emotional issue/crisis, would you feel comfortable talking to someone on campus about it (peer, professor, faculty member, RA, counselor)?” The majority of the respondents - 31.78% - replied that they “might or might not” feel comfortable. Meanwhile, 22.48% responded with “definitely yes”, 29.46% with “probably yes”, 10.85% with “probably not”, and 5.43% with “definitely not”. When filtered by class year, freshman students gave the highest percentage of negative answers: 13.51% they would “probably not” feel comfortable talking to someone, and 8.11% said they would “definitely not” feel comfortable.

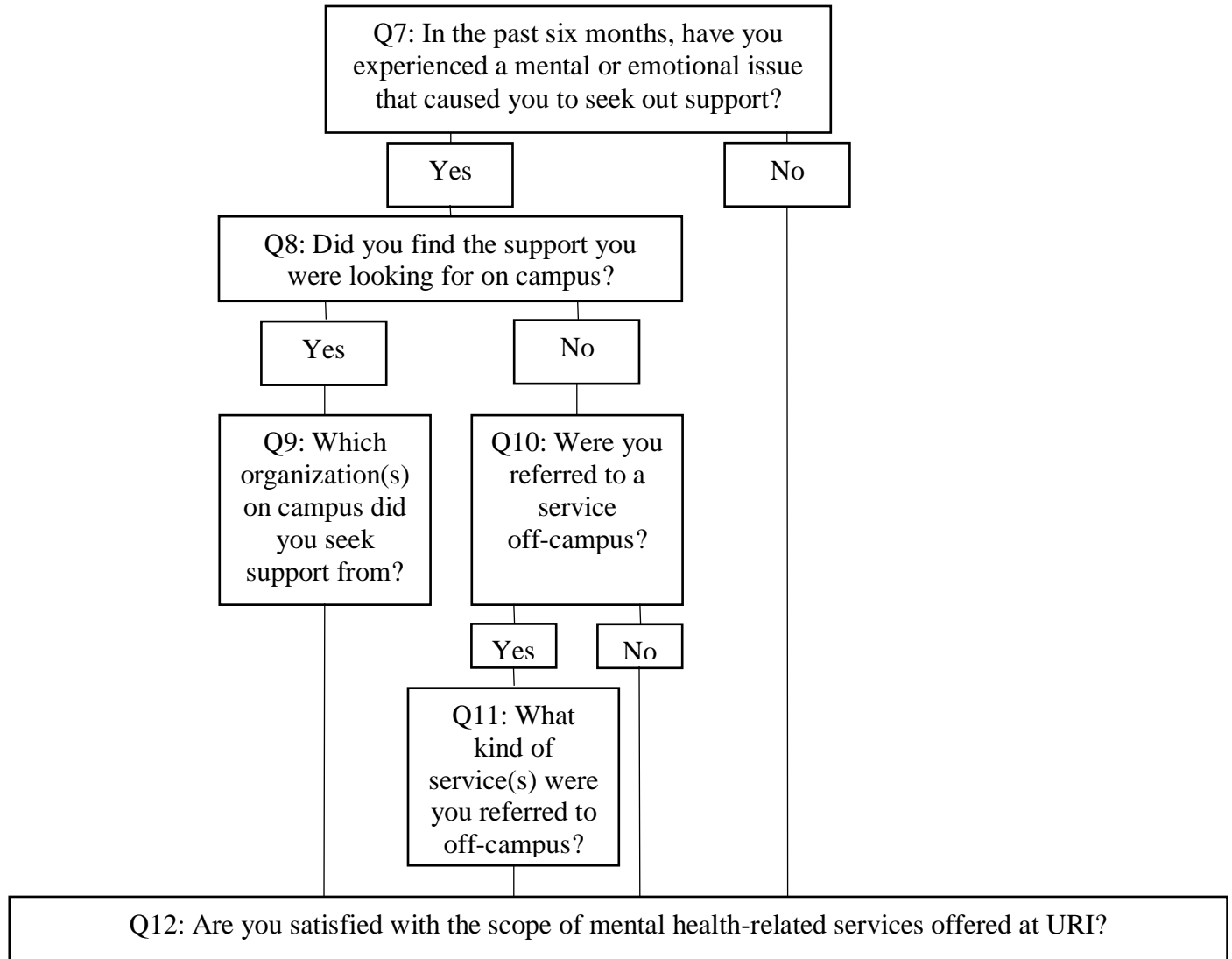
Question 6 asked if the respondent would know what to do, or where to go, if he/she were experiencing a mental or emotional issue. Overall, the majority of respondents replied to the question with the “probably yes” answer choice. The breakdown of answer choices is provided below:



When the responses were filtered by class year, those respondents who identified as juniors were the most likely to answer with the negative answer choices “probably not” and “definitely not”.

Specifically, 18.75% of juniors replied with “probably not”, while 3.13% of juniors replied with “definitely not”.

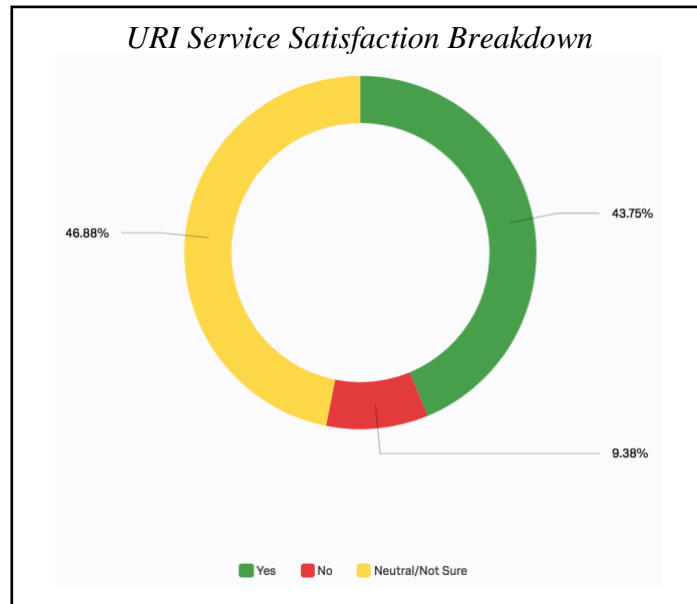
The next portion of the survey initiated a display logic sequence to help guide respondents through logical question order. The following flow chart describes the display logic for the remaining questions 7-12:



The results from Question 7 indicated that within the past six months, 43.75% of respondents replied that they had experienced a mental or emotional issue that caused them to seek out support. Of these respondents, 64.29% said they found the support they were looking for on

campus. Health Services, student clubs and organizations, the Psychological Consultation Center, and Housing and Residential Life were among the more frequently sought out organizations by students. Of the 35.71% of respondents, or five students, who replied that they did *not* find the support they were looking for on campus, only one student stated that he/she had been referred to an off-campus service. When asked what kind of service that respondent had been referred to, he/she replied with the answer choice, “Counselor/Therapist”.

The final two questions in the survey asked respondents opinion-based questions about the mental health services URI provides. Question 13 asked: “Are you satisfied with the scope of mental health-related services offered at URI?” The breakdown of the answer responses is displayed below:



The majority of participants replied with the answer choice “Neutral/Not Sure”. When prompted with Question 14, which asked for suggestions as to how URI could improve upon its delivery of mental health care to the student population, many students voiced a need for more awareness and education about mental health services. Others believed that an increase of counselors on campus was needed, as well as regular dorm meetings to familiarize students with the resources

URI has to offer. One student called for a change to the URI101 curriculum: “When I went through the course [URI101], [they] did not cover the options available. I feel that if the instructor went over resources for mental health, it would improve awareness greatly.”

Discussion

While it should be noted that the responses received from the distribution of this survey are not representative of the entire student body population, the implications from the data may be widely inferred to represent a more general issue at the university. The total number of survey respondents, 130, represents a statistically significant population of individuals.

Question 4, which asked respondents about their general mental or emotional wellbeing, yielded interesting results worth discussing. While the majority of respondents replied with the median response choice, “good”, 14.73% of the students selected the answer choice “poor”. Breaking those percentages down by physical survey respondents, this amounts to nineteen students who belong to the “poor” response category. While the extraneous variables affecting a student’s mental or emotional wellbeing are numerous and typically out of the control of the university which that student attends, ideally, the goal for this response category is zero percent. Students with a generally “poor” mental or emotional state represent an untapped segment of the broader population that have not been effectively targeted and served by the various mental health-related organizations available. This segment represents those students who may be unaware of, doubtful of, or adverse towards the mental health services URI offers.

Perhaps the most important findings came from Questions 5 and 6, which began with the phrase “If you were experiencing a mental or emotional issue/crisis”. It is disheartening that only twenty percent of the respondents replied that they would “definitely” feel comfortable talking to someone on campus should they find themselves in need of mental health first aid or support

services. Even more disappointing is the meager twenty-two percent of students who would “definitely” know what to do, or where to go, in such a situation. Those other students who replied with “probably yes”, “might or might not”, “probably not”, or “definitely not” are failing to grasp the full scope of mental health care available to them. One of the more frequent suggestions yielded by the final survey question was better advertising of the services offered by URI. With a heightened focus on awareness, education, and proactive behavior surrounding mental health illnesses and disorders, more students would feel confident seeking help for themselves, or someone they know who may be struggling.

Conclusion and Recommendations

Mental health is one of the most heavily stigmatized topics among the U.S. teen and young adult population. As an institution that cares about the success and wellbeing of its students, URI must be an active participant in the crucial conversations surrounding efficient and effective mental health care delivery to the student population. While it seems the university is not lacking in the number and variety of services it offers to students, awareness of these services appears to be relatively low. In contributing to the betterment of the mental health services offered, URI administration should consider developing a marketing campaign aimed at educating students about mental health and promoting the values of proactive intervention and self-help. It would be a shame to let the university’s vast array of services go to waste simply because students are unaware of the full breadth and depth of help that exists. Open up the conversation about mental health between students and faculty members. Encourage students to not only support themselves, but to support one another. Focus on education and awareness, for it is not a problem of presence, but rather one of reach.