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60-SECOND SUMMARY

Levels of mental illness, mental distress and low wellbeing among students in higher education in the UK are increasing, and are high relative to other sections of the population.

Around three-quarters of adults with a mental illness first experience symptoms before the age of 25. As the student population comes to more closely reflect the UK's wider socioeconomic and demographic make-up, a growing proportion of students are affected by mental illness. Over the past 10 years there has been a fivefold increase in the proportion of students who disclose a mental health condition to their university.

Students can be at added risk of experiencing poorer mental health and wellbeing, due to factors relating to academic, financial and social pressures. This is evident in the high levels of mental distress reported by students, and the extent to which universities have experienced dramatic increases in the number of students seeking counselling support.

KEY FINDINGS

Today's generation of young adults – and particularly young women – are more likely to experience mental illness than previous generations.

- In England, 19 per cent of 16–24-year-olds experience a mental health condition, up from 15 per cent in 2003. Among this age group, 28 per cent of women experience mental health problems, compared to 10 per cent of men. This difference between the sexes is also evident in Scotland, Wales and Northern Ireland.

The number of students who disclose a mental health condition to their university has increased dramatically in the past 10 years.

- In 2015/16, 15,395 UK-domiciled first-year students disclosed a mental health condition – almost five times the number in 2006/07. This equates to 2 per cent of first-year students in 2015/16, up from 0.4 per cent in 2006/07.
- Mental health conditions account for an increasing proportion of all disability disclosed by first-year students (17 per cent in 2015/16, compared to 5 per cent in 2006/07).
- Female first-year students are more likely than male first-year students to disclose a mental health condition (2.5 per cent compared to 1.4 per cent) (2015/16). In 2009/10, male and female students were equally likely to disclose a mental health condition (both 0.5 per cent).

RECOMMENDATIONS

Poor mental health and wellbeing can affect students' academic performance and desire to remain in higher education (HE). In the most severe and tragic circumstances, it can contribute to death by suicide – levels of which have also increased among students in recent years.

The HE sector and government both have an interest in helping to improve the mental health and wellbeing of students. Universities should make the issue a strategic priority, as there is currently too much variation in how well equipped universities are to meet this challenge.

1. The HE sector should collectively adopt student mental health and wellbeing as a priority issue, with individual institutions developing their own 'whole-university' approaches subject to audit and quality assurance, and underpinned by common principles which draw on best practice.
2. HEIs should increase the funding dedicated to services which promote and support the mental health and wellbeing of students, in line with an open and robust analysis

- Undergraduates are more likely than postgraduates to disclose a mental health condition (2.2 per cent compared to 1.4 per cent) (2015/16).
- Just under half of students who report experiencing a mental health condition choose not to disclose it to their university

Where support and treatment is lacking, poor mental health can lead to increased risk of students dropping out of university, or in the most severe and tragic cases, death by suicide.

- A record number of students died by suicide in 2015. Between 2007 and 2015, the number of student suicides increased by 79 per cent (from 75 to 134).
- In 2014/15, a record number of students (1,180) who experienced mental health problems dropped-out of university, an increase of 210 per cent compared to 2009/10.

Universities have, over the past five years, experienced significant increases in demand for counselling and disability services.

- 94 per cent report an increase in demand for counselling services, while 61 per cent report an increase of over 25 per cent. In some universities, up to 1 in 4 students are using, or waiting to use, counselling services.
- 86 per cent report an increase in demand for disability services, while 31 per cent report an increase of over 25 per cent. In some universities, up to 1 in 4 students are using, or waiting to use, disability services.

There is variation in the ways in which universities design their strategic response to student mental health and wellbeing.

- A range of prevention and promotion activities are widespread across the HE sector. 'Buy-in and direction from senior leadership' is considered by universities to be the most important factor in helping to improve student mental health and wellbeing. However:
- Less than one third (29 per cent) have designed an explicit mental health and wellbeing strategy
- Less than half (43 per cent) design course content and delivery so as to help improve student mental health and wellbeing
- Two thirds (67 per cent) do not provide students access to NHS mental health specialists who can deliver interventions onsite;
- 23 per cent do not work closely with NHS secondary mental health services.

of current student need and reasonable future projections.

3. Government should facilitate new place-based coalitions to improve student's health through greater integration across local services. Including the introduction of a new Student Health Fund into which local health and education partnerships can bid, and new pilots of 0–25 mental health services in places with high student populations.
4. Government should introduce a new Student Premium to top-up the funding of GP practices with high proportions of student-patients, given that students have been recognised by NHS England as an 'atypical' population likely to lose out from current funding arrangements.
5. Government should pilot a new digital Student Health Passport, to improve the continuity of healthcare and treatment among students who move between home and university, and ensure that they have control over their own health data.

The progressive policy think tank

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