

College Students facing Psychological Issues

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Abstract: Academic success for college students is a challenge and is not coming without predispositioned personal and psychological problems. The onset age for higher education is full of complications. Many researchers suggest that colleges' environment may be a primary and contributing factor for psychological disorders, although not very obvious. Many factors like gender, socioeconomic status, victimization through sexual harassment, childhood adversities leading to emotional imbalance, lack of social support, the capacity to bear peer pressure, and getting along with friends, roommates, and other relations affect the students' well-being and performance in the college. For example, gender-based studies on psychological issues show that females have a higher prevalence of depression and anxiety disorders, whereas male students show a higher risk of suicide. Regarding mental health, there are certain variables, such as demographic factors and social factors. Not many studies related to assessing factors that are more specific to the college realm or educational environments, such as academic workload, high-performance demands, examination anxiety, and competitiveness pressure. Various research shows that characteristics, namely perfectionism, etc., also accelerate students' psychological distress as they try to do the best in their college studies. Some studies suggest that the school settings are hugely stressful for minority group students at primarily white colleges. It was tough to find any investigations that were realized on how mental health affects the various variables such as enrollment numbers, the field of study, competitiveness, college employee supportiveness, and the selection of study area.

Keywords: Mental Health, psychological issues, anxiety, counseling, services.

1. Introduction

The transition between high school to college and the adult age can be stressful for many as they have to face many challenges and various changes. They meet with new situations in an ever-changing environment where they may have to acquire new skills and should develop new personal and professional relationships. Many studies indicate that college students experience more psychological problems compared to their same-aged peers who are not attending college [4]. The main issues found among these students include depression, anxiety, fear of failure, alcohol abuse, and difficulty in making and maintaining social interactions [2]. Various research shows that 50% of college students go through some type of psychiatric disorders, such as mood swings, personality, and anxiety disorders [1]. These psychological problems can harm their academic performance, relationships, and time management skills [3].

Various issues:

- Racial diversity and multicultural experiences affecting mental health in different ways
- Coping mechanisms
- Individual psychometry

The progression from high school to college corresponds with the critical period of students' rapid social and psychological development [6]. While it's the peak term for the risk of onset for severe mental illnesses. The sensitivity to risk exposures that many college students face include stress, alcohol and drug abuse, and sleep problems. Stressors that college students face include financing for their studies, making new friends, and adapting to a new environment [5]. International students are not the only people confronting the obstacle of not having their support network close to them, as many more students are studying away from home [7]. The competition to enroll and graduate in higher education institutions has increased, making another stressor for students.

Several reports have proven that the mental health services on campus and their dynamism are not reflective of tackling the growing spread and extent of the students' mental health needs. There is also no universal benchmarks of care standards, as the student mental health services vary fundamentally over institutions on many things like how they are resourced and organized [8]. Mental health services at universities are usually developed for the short-term, with inadequate resources, and poorly organized so that they can not appropriately respond to all students [9]. Many services do not provide the proper amenities and assistance to

deal with impairing and distressing systems because they are typically not included within their services criteria [10]. To improve these problems that students face, we must reorganize and strengthen the services that are already provided while developing new services geared towards campus issues and obtaining partnerships with specialty programs.

There are two models of coping that one can follow. One model of coping is described as problem-focused coping. This coping occurs when an individual senses progress in a stressful situation [11]. The awareness of the possibility of change allows the individual to choose specific behaviors to lead them to a resolution. The other model of coping is emotion-focused coping. In this type of coping, the individual does not recognize that the possibility of change can occur [12]. There can be positive or negative outcomes in either of these coping mechanisms and interlinked in most cases.

In college students, we have seen an increase in mental health issues. Studies reveal that in the last 18 years, a considerable rise in mental health issues as well as the severity of the problems for college students. Various counseling centers at the colleges have reported a rise in the number of students who approach to seek services [13]. Higher education institutions are concerned about their students. Findings from Lyketsos et al. confirm our concern with evidence that 47 percent of students reported at least one mental health problem [14]. The most protuberant issues that have been shown are depression, anxiety, and psychotic disorders [15]. While these are the most common mental disorders, another serious problem that seems to get overlooked is the increase in the number of students having a hard time with sexual assault and self-injury [16]. As reported in the National Survey of College Counseling Centers, forty-three percent of college counseling centers have seen an increase in their patients going through some sexual assault. Thirty-five percent have seen an increased number of patients suffering from self-injury. Thus, there is evidence to show that coping behavior has a target outcome on the development of mental illness and mental wellness [17]. The coping type that was found to be a key indicator of mental health issues like depression was avoidance based [18]. Besides, research implies that dealing is a facilitator for mental health outcomes in late adolescence [19].

One indicative predictor of adaptation in adolescents is self-esteem. Haine et al.'s findings show that morale interposed the interconnection between internalizing problems and stress in the students [20]. Coping is linked to adjustment. However, most studies display a constructive correlation in emotion-focused and avoidant coping and a negative relationship between problem-focused coping [21].

2. Analysis

The following data displays what type of service was available for students on campus. Only over four percent of schools had contracted psychiatrists. Most schools supported their students' mental well-being via counseling centers or student health centers without a psychiatrist's direct access.

A psychotherapist may evaluate mental and emotional disorders and recommend behavioral therapy. Still, only a psychiatrist can provide a medical prescription, taking into account the level of depression, alcohol and drug abuse, or suicidal tendencies [22]. The contribution of unconscious and experiential factors can only be evaluated by a medical professional. Generally, on-campus students face depression, anxiety, or ADHD, etc. and antidepressant drugs need to be prescribed under the supervision of some medical practitioner [23]. Thus, prescription and monitoring of medication-related to specific case management, especially for anxiety and ADHD, bipolar disorder, SSRI's should be regulated as there could be potential abuse of such medication.

For the above reasons, it is suggested/opined that each campus should have at least one psychiatrist. Counselors mainly focus on performance and personality development and may not be trained for specific cases, psychologically impacting students' lives that need more care. Psychological professionals can better handle mentally disordered orientation among the students. Thus to build emotional resilience, it is advocated that the universities should house at least one psychiatrist per 5000 students.

The following graph presents what type of support is available to students on campus. About forty-one percent of the colleges have counseling centers. Around fifteen percent support their students with health centers. Almost five percent of colleges hire psychiatrists. However, thirty-one percent of them do not have psychiatric service; instead, they provide private referrals to this service outside the campus.

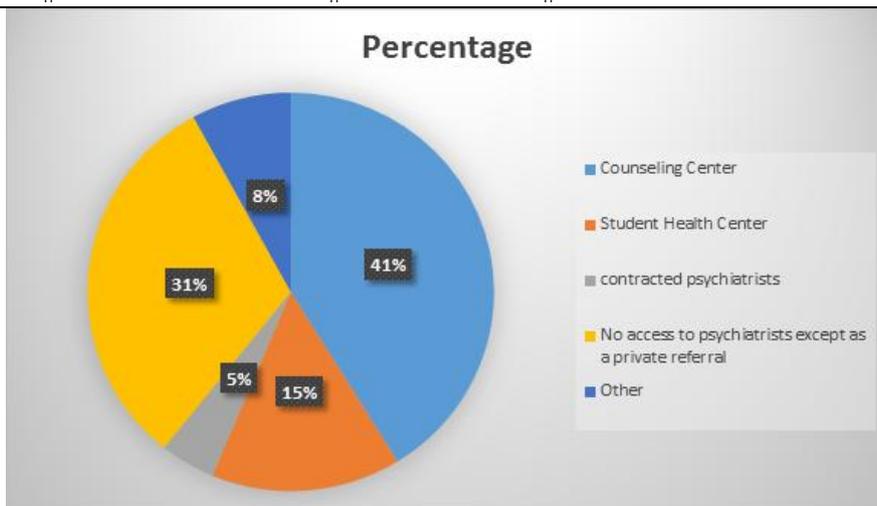


Fig. 1 What type of support available to students on campus

Some campuses are supporting both the health center and psychiatric services.

The study is conducted to evaluate how well these two services work together. The following chart presents the relationship between the counseling centers and the psychiatrists. It is shown that almost 91% of psychiatrists and counseling centers shared a good or excellent relationship with the students, 7% had a good relationship, and only less than 1 percent had a poor relation. It signifies that the presence of a psychiatrist in the counseling centers was beneficial to students.

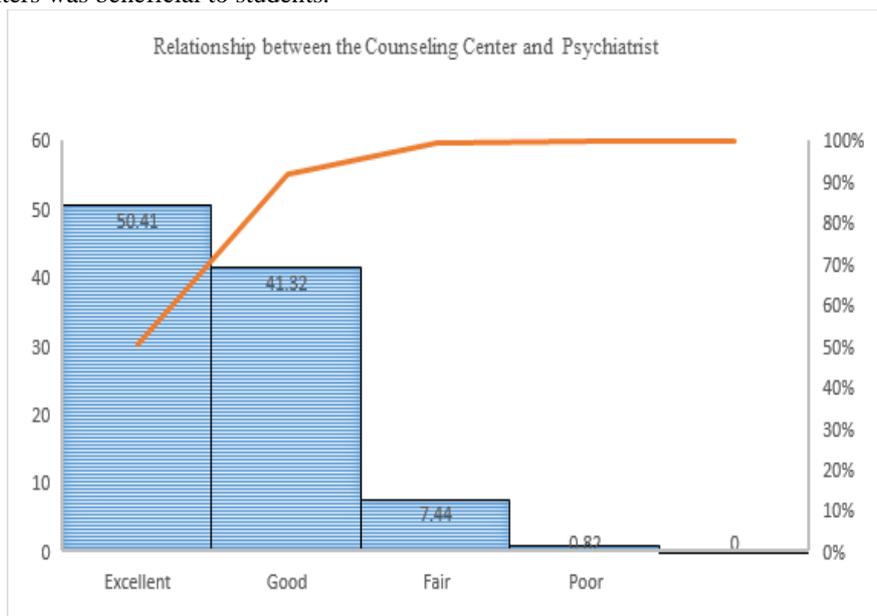


Figure 2: Types of relationship -Psychiatrist and counseling centers

The following Table 1 presents how many after hour calls were received as per the campus's size. This table represents how vital this service is for the students, as they need this service twenty-four seven.

Table I:

Number of students in college	After hours calls handled
Under 1,500	33
1,501 - 2,500	41
2,501 - 5,000	29
5,001 - 7,500	27
7,501 - 10,000	43

10,001 - 15,000	50
15,001 - 20,000	61
20,001 - 25,000	99
25,001 - 30,000	49
30,001 - 35,000	78
35,001 and over	315

Limit on the allowed sessions per month: Out of 397 centers - 53 had a limit on the number of sessions per month. One hundred forty-two centers had limits, but they were flexible as well. Two hundred two centers had no limit.

The following Table II presents the service being provided by the center for specific consultation and its average fee

Table II:

Service type	Charges Average Fee	Number of Centers providing/not providing service	
		Yes	No
Basic counseling service	\$16.60	38	356
Psychiatry service	\$35.38	68	172
Career counseling	\$13.00	16	162
Psychological assessment and testing	\$79.00	48	165
ADHD assessment and testing	\$102.46	47	78
Learning Disabilities assessment and testing	\$114.38	32	62

While the services' charges are minimal, some students cannot even afford a single visit. These services are costly for them, so they do not make use of such services and keep struggling with their mental health issues.

Conclusion

The most common mental health issues prevalent in college students are anxiety, panic attacks, and depression. The latest studies by researchers suggest that mental health issues are increasing in students. Therefore, the need is sufficient assurance of diagnostic symptoms related to academic stress, awareness creation, and interactive assistance through counseling. Students often downplay or because of inferiority complex or fear of standing out, so they never talk out. The data presented also suggest that colleges and universities are providing resources and help to the needy students, however, more needs to be done to bring students out of their mental health issues.

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