



BRIEFING PAPER

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Support for students with mental health issues in higher education in England

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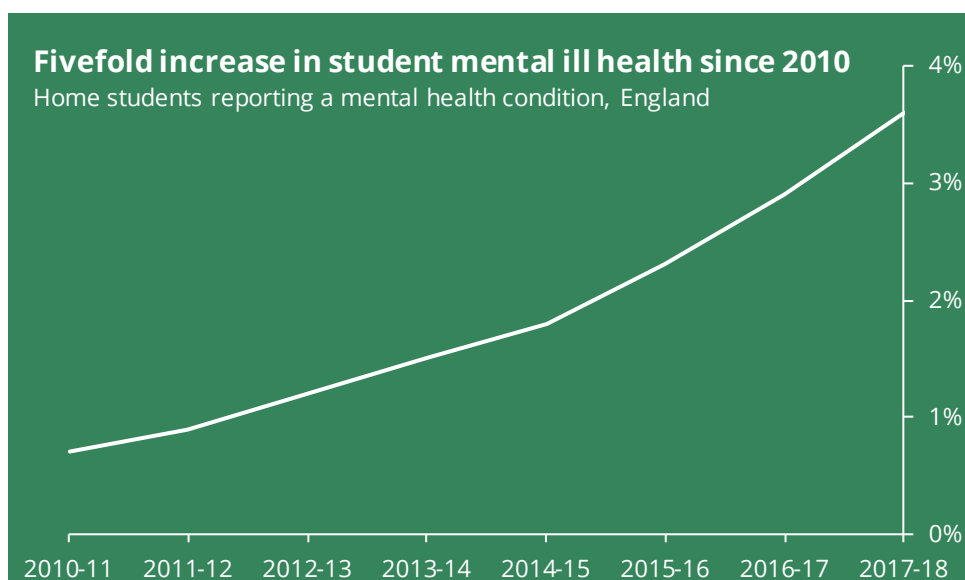
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Summary

Student mental health has been the subject of a number of reports as students are increasingly declaring mental conditions and reporting issues with stress and poor mental wellbeing. It has been suggested that student mental health is in 'crisis'.

The proportion of students who disclosed a mental health condition to their university has increased rapidly in recent years.



Source: [Equality and diversity data](#), OfS

Surveys of students have found much higher rates of mental ill health than those disclosed to universities. A recent survey found that 21.5% had a current mental health diagnosis and 33.9% had experienced a serious psychological issue for which they felt they needed professional help. Survey responses are confidential and are likely to give a better idea of the full extent of mental ill health.

Many factors have been suggested as contributing to the rise in cases of mental ill health among higher education students – work pressures, moving away from home, financial worries, or more generally higher education institutions are said to be feeling the impact of the rise in mental health conditions among the 16-25 age population.

The effect of mental health issues on students can be serious and can lead to consequences such as: academic failure, dropping out of education, poorer career prospects and in the worst cases suicide.

Concern has been expressed about the availability of support for students with mental health conditions and the response of universities and higher education institutions.

In 2017 Universities UK, published [Stepchange Mental health in higher education](#). Stepchange provides a framework to help higher education providers embed good mental health across all university activities.

This briefing sets out data on the prevalence of student mental health conditions and outlines what action higher education providers, the government and the Office for Students are taking to help students with mental health issues. It also flags up how students can get support.

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Library briefing, [*Mental health services for post-16 students in England*](#), 7 December 2017, also covers student mental health.

1. Background: Mental health and students

Increasing numbers of students are reporting mental health conditions, mental distress and low levels of wellbeing. As a result, universities health and welfare support systems are experiencing increases in demand for mental health services.

Student mental health has been the focus of a number of reports:

- Higher Education Policy Institute, [Measuring well-being in higher education](#), May 2019
- Insight Network, [University Student Mental Health Survey 2018](#), March 2019
- Education Policy Institute, [Prevalence of mental health issues within the student-aged population](#), 10 September 2018
- Universities UK, [Minding our future. Starting a conversation about the support of student mental health](#), 11 May 2018
- IPPR, [Not by degrees: Improving student mental health in the UK's universities](#), September 2017
- Higher Education Policy Institute, [The invisible problem? Improving students' mental health](#), September 2016

These reports suggest that student mental health and wellbeing has declined in recent years and that "higher education institutions need appropriate action and contingency planning to manage crises and risks associated with mental distress and illness".¹

In 2017 Universities UK, published [Stepchange Mental health in higher education](#). Stepchange provides a framework aimed at supporting university leaders to help embed good mental health across all university activities.

The impact of mental health issues on students can be serious and can lead to consequences such as: academic failure, dropping out of education, poorer career prospects and in the worst cases suicide.

Data on students in England from the [Office for Students](#) shows that students with a declared mental health condition were less likely than average to:

- continue in higher education after their first year
- achieve a first or upper second degree
- 'secure higher level employment' or go on to study as a postgraduate

The Office for Students pages on [Mental Health](#) give background on the issue, their role (in England) and advice for students.

• ¹ Universities UK, [Stepchange, Case for Action](#) - Risks

2. Prevalence of mental health problems among students

2.1 Student population reporting mental health conditions

The Higher Education Statistics Agency collects data from students on any disability that they have, including mental health conditions. In 2018/19 308,000 students said they had a disability of some kind - this was 16.2% of all home students. Within this **82,000 said they had a mental health condition; 4.3%** of all home students. The number saying that they had a mental health condition **was two and a half times as high as in 2014/15**. Higher rates of mental health conditions were reported among:²

- Women
- Undergraduates
- Full-time students
- Those in their second or later years

In 2018/19 59,200 female students said they had a mental health condition or 5.3% of all female students. This rate was almost double the rate for male students of 2.8%.³

It is possible that some of the increase is due to students with mental health conditions being more likely to *report* this. This increase in disclosure may be because of greater public awareness and reduced stigma associated with mental ill health.

UCAS [reported](#) an increase in home applicants who 'declared' they had a mental health condition on their application between 2014 and 2018. This was up by nearly 10,000 to around 17,000.

2.2 Other evidence

A [survey by the Insight Network⁴](#) of almost 38,000 students in 2018 found that:

- 9% think about self-harming often or all the time.
- 43% are worried often or all the time
- 33% reported suffering from loneliness often or all the time
- 45% use alcohol or recreational drugs to cope with problems in their life

21.5% of students have a current mental health diagnosis. **33.9%** have experienced a serious psychological issue for which they felt they needed professional help.

Insight
University Student
Mental Health
Survey 2018

² [Higher education student data, HESA. Who's studying in HE?: Personal characteristics](#)

³ [UK domiciled student enrolments by disability and sex 2014/15 to 2018/19](#), HESA

⁴ [Largest survey of its kind reveals extent of university students' struggles with thoughts of self-harm, loneliness and anxiety](#), 5 March 2019

- 34% reported having a serious personal, emotional, behavioural or mental health problem for which they felt needed professional help. The most common diagnoses were depression (10%) and anxiety disorders (8%).

A [report](#) by the Institute for Public Policy Research (IPPR) in September 2017,⁵ looked at a wide range of different data sources and research on the subject and set out the following findings:

The number of students to disclose a mental health condition to their institution has increased dramatically over the past 10 years.

- In 2015/16, 15,395 UK-domiciled first-year students at HEIs in the UK 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).
- 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 HEI.

Students experience lower wellbeing than young adults as a whole, and experience lower wellbeing than was the case in previous years.

- Young adults aged 20–24 are less likely than any other age group to record high levels of wellbeing (life satisfaction, feeling that things done in life are worthwhile, happiness and low anxiety). In 2017, less than 1 in 5 students reported high levels of each of these four key wellbeing indicators.

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).
- Suicide is, in general, often linked to the presence of mental health conditions, although just 25 per cent of

⁵ IPPR, [Not by degrees: Improving student mental health in the UK's universities](#), 4 September 2017

people to die by suicide in the UK were in contact with mental health services during the year prior to their death.

- 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.

[...]

Higher education providers 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 HEIs, 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 HEIs, up to 1 in 4 students are using, or waiting to use, disability services.

The author concluded:

While it is not possible to conclude from this data that overall prevalence of mental illness is increasing, it is evidence that a **growing number and proportion of students are seeking support and adjustments from their HEI in relation to a mental health condition...**

There is a significant level of mental distress among the student population, as demonstrated by surveys of self-reported mental health problems...

Students experience lower wellbeing than is the case among young adults as a whole, and would appear to experience lower wellbeing than was the case in previous years.

IPPR 2017

3. Factors contributing to the rise in students with mental health conditions

A number of factors may be leading to the increase in the number of students reporting a mental health condition. One contributory factor is the rise in the number of **young undergraduates** - adults aged 16–24 today are more likely than previous generations of young adults to experience common mental health conditions. The 2017 IPPR report commented that “a large and growing proportion of people are choosing to enrol in undergraduate courses in the UK, with a majority falling within the age range in which there is an added risk of experiencing mental health problems”.⁶

The IPPR also commented on the increase in numbers of **disadvantaged students** and stated that, “while mental illness, mental distress and low wellbeing can affect all kinds of people, they are more common among those from more deprived socioeconomic backgrounds”.⁷

Students also report difficulties with **academic demands** and the pressure to get a high-class degree as a factor with mental health issues.

Social pressures, moving away from home and coping with **living independently** also cause problems for some students.

Some students also struggle with **financial worries** - increased tuition fees and the prospect of graduating with considerable levels of debt has also been found to cause stress among students.⁸

⁶ IPPR [Not by degrees: Improving student mental health in the UK's universities](#), 7 September 2017

⁷ *ibid* p32

⁸ *ibid* p35

4. Suicide among students

There is a strong connection between mental ill health and suicide or self-harm. The ability to identify students who are at risk of suicide is difficult. The [Stepchange](#) website states that only 12% of students who died by suicide were reported to be seeing student counselling services.

In September 2018 Universities UK (UUK) and PAPYRUS, a national charity dedicated to the prevention of young suicide, published [Suicide Safer Universities](#). This guidance provides a framework to help university staff understand student suicide, mitigate risk, intervene when students get into difficulties, and respond to deaths. The document also aims to help university leaders develop strategies to prevent student suicides.

A number of higher education institutions have introduced suicide prevention strategies. The University of Wolverhampton and the University of Cumbria employ [Connecting with People](#) and the Columbia Suicide Severity Rating Scale (C-SSRS) – these approaches are preventative and include training for students and staff.

4.1 Statistics on student suicide

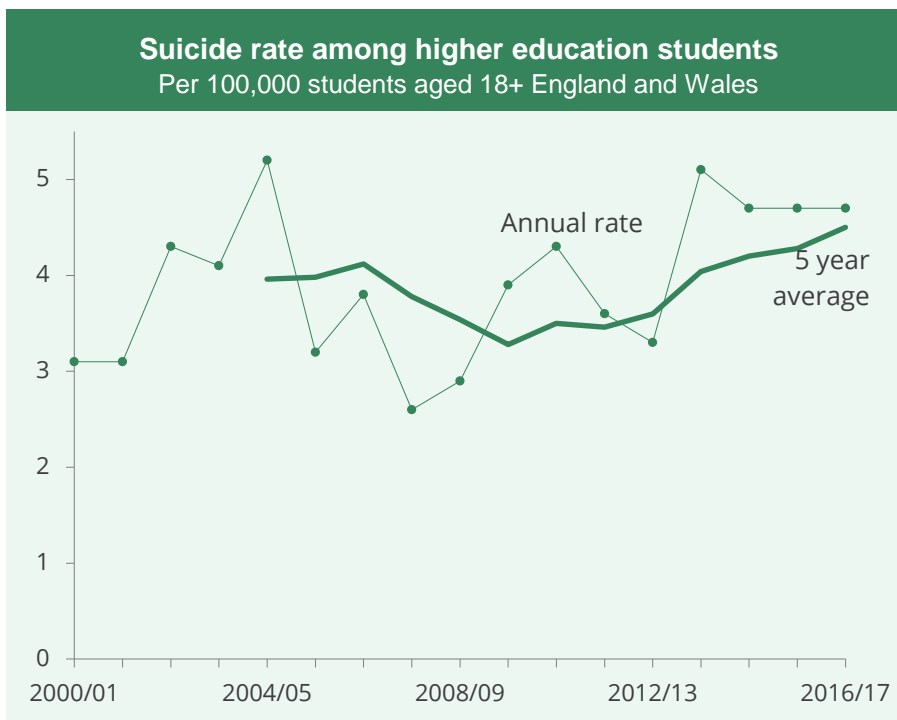
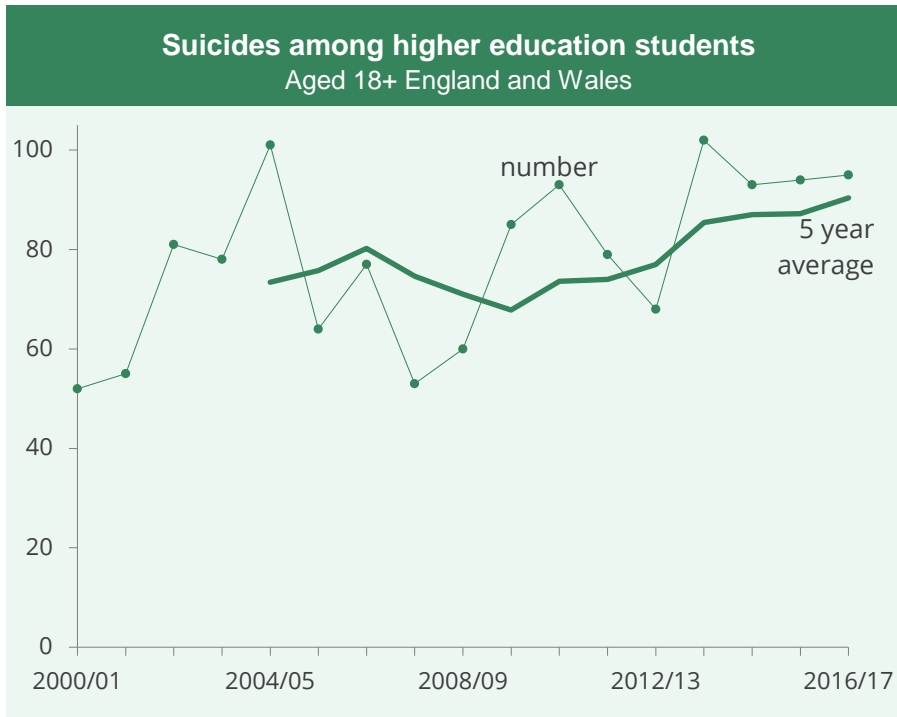
The Office for National Statistics (ONS) published an analysis of reported suicide among higher education students from England and Wales up to July 2017. This found that there were **95 suicides** amongst this population in the most recent 12 months and **1,330 in the 17 years to July 2017**.⁹

The latest figure was an estimated rate of **4.7 per 100,000** students aged 18+. It is important to look at rates such as these when making comparisons to other groups of people and to past levels of suicide. The 2016/17 rate was the same as in the past two years. It has been above 5.0 per 100,000 in 2004/05 and 2013/14 and below 3.0 per 100,000 in 2007/08 and 2008/09. According to the ONS it is difficult to identify statistically significant differences over time due to the small numbers per year.

The charts below look at trends in the total number and rate since 2000/01. They also give a five year rolling average to help identify underlying trends.¹⁰

⁹ [Estimating suicide among higher education students, England and Wales: Experimental Statistics](#), ONS June 2018

¹⁰ Note the rates for 2011/12 are calculated from an estimated population of students from England and Wales. Later figures use the actual student population from England and Wales.



In the five years to July 2017 **the suicide rate among the general population was 'significantly higher' than among students.** This applies when the data are broken down by age group and by gender. For instance, it was 2.4 times higher among the general population aged 18-20.

Analysis of suicides among different groups of students in the five years to July 2017 found that the suicide rate was:

- Significantly higher among men at 6.7 per 100,000 compared to 2.8 among women

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- Significantly lower among those aged 20 and under at 2.8 per 100,000
- Significantly lower among Black students (compared to White students) at 2.7 per 100,000
- Significantly lower among postgraduates in their 20s than undergraduates of the same age.
- Not significantly different when analysed by mode of attendance or year of study.

5. Higher education institutions' action on student mental health

Universities are autonomous institutions and the way in which mental health provision is organised and delivered varies across the sector.

5.1 Legal requirements

Universities are generally accepted to have a **duty of care** towards their students and this includes a duty to ensure the health and welfare of their students.

HEIs also have duties under the Equality Act 2010 to provide '**reasonable adjustments**' for students with disabilities, which includes people with mental illnesses. The Act also protects individuals from discrimination based on their disability.

5.2 Mental health strategies

Most HEIs have a **mental health policy** which sets out the institution's approach to mental health services and provision for students. Mental health policy documents generally show a commitment to providing a supportive environment for students with mental health difficulties, however this does not always extend as far as providing dedicated on-site mental health services.

Universities UK, [Stepchange](#) *Mental health in higher education*, provides guidance for higher education institutions on mental health strategies. The Stepchange **Framework** states that universities should adopt mental health as a **strategic priority**, and that institution should implement a **whole university approach** with students and staff involved at all stages. The [Framework](#) gives guidance on leadership, data, staff, prevention, early intervention, support, transition and partnerships.

HEIs, Student Minds, UUK, NUS and the DfE are collaborating together to develop a [University Mental Health Charter](#). The Charter will be a UK-wide scheme to recognise and reward institutions that demonstrate good practice, make student and staff mental health a university-wide priority and deliver improved mental health and wellbeing outcomes. The content of the Charter aims to be published on the Student Minds website in December 2019, before assessment development and piloting in 2020, with a view to launching the scheme later in 2020. Further information on the Charter is available on the Student Minds website at [University Mental Health Charter FAQs](#).

5.3 Support for students

In most HEIs support for students with mental health issues is delivered through the **Student Services department**. Support may be provided through a specific Wellbeing Service, Counselling Service or Disability

Universities cannot address these challenges alone and we are working closely with the NHS locally and nationally to make sure that students get the care they need

[John de Pury, mental health policy lead at Universities UK, March 2019](#)

Service. HEIs may provide counselling, student advice services, support networks, mental health workshops, or other resources. Students should look on their university's website to find out what specific support is available.

Students unions may also provide **student-led services** such as peer support groups and advice lines. Other student led organisations are:

- [Student Minds](#) this is the UK's student mental health charity, their webpage, [Support for me](#), sets out how students can access support.
- [Students Against Depression](#) is an organisation which helps students with the effects of depression and suicidal thinking.

Contacting parents

In June 2019 the Higher Education Policy Institute published their annual [Student Academic Experience Survey 2019](#). The report questioned students about their wellbeing and asked if they would be happy for their institution to contact their parents if there were a concern about their mental health, most of students said that they would:

Overall most students (66%) were happy for their parents to be contacted in the event of extreme circumstances, with a further 15% happy in any circumstances and only 18% not happy for their parents to be contacted at all. This shines a light on the role institutions are expected to play in protecting students in the light of mental health issues and a general recognition among undergraduate students that parents may reasonably be expected to become involved. P49

The University of Bristol, which has experienced a number of student suicides, runs a scheme in which students can opt-in to allowing parents or trusted adults to be contacted - the scheme has a take-up of 95%.¹¹

¹¹ ["Students want parents to be told in mental health crisis"](#), BBC News, 13 June 2019

6. Office for Students (OfS) support for mental health projects

The OfS administers a collaborative programme with higher education providers which aims to find innovative ways to combat the rise in student mental health issues and instigate a change in student support across the country. The OfS has awarded £6 million, with co-funding of £8.5 million, to ten collaborative projects. The programme covers 67 different universities, colleges and other organisations – including NHS, police and charities – across the ten projects.

Examples of funded projects include:

- early intervention scheme led by Northumbria University, in partnership with nine other organisations, which aims to reduce student suicide by using data analytics
- the University of the West of England, Bristol are leading a project to understand and advance the impact of partnership working between higher education and the NHS at both a regional and national level to improve mental health support for students
- work led by the University of Lincoln will focus on supporting students through the transition from school to university – the first year at university a time of additional vulnerability for students
- the University of Nottingham will address the specific mental health needs of international students
- Keele University will develop a ‘whole community’ approach to mental health and wellbeing for students by developing links with local authorities, police and NHS providers.

Details of the funded projects are in the OfS website at [OfS Challenge Competition: Achieving a step change in mental health outcomes for all students](#).

7. Government policy on student mental health

The Government's actions to improve student mental health were outlined in a [PQ response](#) on 23 May 2019:

Mental health is a priority for this government, which is why we continue to work closely with Universities UK (UUK) on embedding the Step Change programme within the sector. Step Change calls on higher education (HE) leaders to adopt mental health as a strategic priority and adopt a whole-institution approach to mental health, embedding it across all policies, cultures, curricula and practice.

In addition, the government actively backs the introduction of a sector-led University Mental Health Charter, launched in June 2018. This will drive up standards in promoting student and staff mental health and wellbeing. It will invite universities to meet high standards of practice, including in areas such as leadership, early intervention and data collection.

HE institutions (HEI) have legal responsibilities under the Equality Act 2010 to support students, including those with mental health conditions. It is for HEIs to determine what welfare and counselling services they need to provide to their students to offer that support.

The information requested is not held centrally regarding student suicide. However, in June 2018, the Office for National Statistics released experimental statistics estimating suicide among higher education students in England and Wales which can be found following this link:

<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/estimating-suicide-among-higher-education-students-england-and-wales-experimental-statistics/2018-06-25>.

The government has worked with UUK, the Office for Students, and other stakeholders to develop guidance on measures to help prevent suicide and deal sensitively with issues that may arise when tragedy does occur. This guidance was published in September 2018, ahead of the 2018/19 academic year.

As independent and autonomous bodies, HEIs are responsible for decisions regarding required training for their staff and have a duty of care to their staff, like all employers, as well as to their students.

7.1 Disabled Students' Allowance

The Government also provides support for students with mental health conditions through the **Disabled Students' Allowance**. DSAs cover some of the extra costs incurred as a result of a mental health problem, long term illness or any other disability. This funding is paid on top of other student finance and does not need to be repaid. The DSA can pay for:

- specialist equipment, such as a computer, if you need it because of your mental health condition or another disability

- non-medical helpers
- extra travel as a result of your mental health condition or disability
- other disability-related costs of studying

Information on DSAs and eligibility requirements are on the GOV.UK website at [Help if you're a student with a learning difficulty, health problem or disability](#).

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