UNIVERSITY COLLEGE CORK

FINAL YEAR PROJECT

INVESTIGATING THE MENTAL HEALTH OF THIRD LEVEL STUDENTS IN IRELAND AND HOW TO IMPROVE IT

NOFISAT FOLASHEWA MOGAJI

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ABSTRACT

This study investigates the mental health situation of third-level students in Ireland, identifying relevant causes and providing treatments. The study uses mixed-methods approach – quantitative and qualitative method, to identify common challenges and advocate for focused interventions.

The findings show a high prevalence of depression and anxiety symptoms, which are caused by academic expectations, social separation, and inadequate support availability. Treatments proposed include targeted initiatives, stigma reduction efforts, and increased service availability.

The study highlights the necessity of prioritizing student mental health, advocating for supportive environments, and working together to promote well-being and academic performance.

Keywords: Mental Health, Third level students, Ireland, Treatments, College, University

TABLE OF CONTENTS

1. __INTRODUCTION__

General aspects of the problem

The state of mental health has become a growing concern, especially in third level education (Abelson, et al., 2022). Studies indicate that globally, 12-50% of college students meet at least one diagnostic criterion for one or more mental health disorders (Ramón-Arbués, et al., 2020). The transition from high school to college is an important phase in students' lives, characterized by a desire to pursue both personal and academic objectives and a sense of freedom. It's like going from depending on someone to depending on or figuring almost everything out yourself. Still, during this shift, there are unspoken concerns about juggling social obligations, staying true to oneself, and handling academic pressures. At times, it can feel like too much to handle the demands of maintaining one's identity, making friends, and achieving academic success.

Particular aspects of students mental health

What is mental health? The World Health Organization (WHO) defined mental health as the ability to manage life's stressors, reach one's full potential, work and learn effectively, and give back to one's community. It is a crucial aspect of wellbeing and health that supports both our individual and group capacities for decision-making, forming bonds with others, and influencing the environment in which we live (WHO, 2022). However, the college experience brings many stressors that might affect our mental health, ranging from academic pressures to social shifts and other responsibilities that place students at risk of mental health problems such as anxiety, stress, depression, and many more, as we all know. Research suggests that before the age of 25, 75% of adults suffering from mental illness initially exhibit symptoms, which peak between the ages of 18 and 25. The beginning of and duration of third-level education correspond with this high-risk phase (Price, 2018).

Research questions and objectives

The main goal of this project is to give an in-depth understanding of the state of the mental health of students in Irish higher education institutions. The project aims to answer the following research questions:

- What are the most common mental health disorders among third-level students?
- What factors contribute to these issues among third-level students?

6

- What sorts of initiatives can be put in place to improve mental health services and encourage the wellbeing of students?

To achieve the objectives of this study, a mixed-methods approach will be employed. The project aims to deepen our understanding and provide evidence-based suggestions to encourage third-level education student mental health and improve the general standard of higher education in Ireland.

Structure of the report

The report is divided into various sections, with each focusing on different aspects of the research. This structure's comprehensive approach guarantees broad examination and evaluation of the various difficulties surrounding students mental health, resulting in in-depth knowledge and practical recommendations for effectively resolving these challenges.

2. <u>LITERATURE REVIEW AND BACKGROUND</u>

Research indicates that in Europe, Ireland is among the countries with the highest rates of mental health disorders in the annual Health at a Glance report, with an estimation of 18.5% of the Irish people suffering from a mental health condition, including bipolar, anxiety, depression, schizophrenia, bipolar disorder, or drug or alcohol use (Cullen, 2018). This literature review aims to provide insights into the common mental health challenges experienced by third-level students, an explanation of factors that contribute to these issues, an evaluation of treatment options, and a review of emerging patterns and areas for further research. Most research papers do not have data on third level students in Ireland.

A study titled 'mental health at third level: what are the issues facing students and what can we do about them' explores the increasing prevalence of mental health issues, emotional strain, and reduced levels of overall well-being among students in higher education, with a specific emphasis on those with disabilities. It points out the importance of seeking help for mental health conditions and highlights the importance of support services in assisting students to thrive academically despite these obstacles. It also talks about how mental health problems can affect students ability to do well in college, stressing the importance of support services to help students succeed academically despite these challenges. The study also talks about the difficulties students encounter in asking for assistance, such as stigma and a lack of knowledge about accessible resources (Price, 2018). Additionally, research conducted by the Association for Higher Education Access and Disability (AHEAD) looked into the figures of students enrolled with disabilities in third level education during the academic year 2016-17.

The result indicates there has been a significant 46% rise in the number of recently enrolled students who have disclosed a mental health disorder (Price, 2018).

Sawatzky et al. (2012) explore the complex relationship between stress, depression, and university students perceptions of their own ability to manage stress. The research uses NCHA survey data from a Canadian institution utilizing latent variable mediation modeling to examine the connections between stress, depression, and self-efficacy in managing stress while accounting for demographic variables. Insights into possible intervention techniques are provided by the findings, which imply that stress management self-efficacy influences the connection between stress and depression to some extent. The study includes some strengths, including thorough psychometric assessments and results replicated over several study periods, but it also has several drawbacks, such as cross-sectional survey data and a low response rate, which may restrict how broadly the findings may be applied. The results also highlight how important it is to support resilience and manage stress in college students in order to lower their chance of developing depression. It also encourages more colleges to promote and prioritize interventions focused on boosting students' stress management self-efficacy, as these efforts could protect students' mental health and academic success.

Limone & Toto (2022) identified that the common mental health illnesses among undergraduate students include anxiety, depression, suicidal thoughts, addiction, and eating disorders. Storrie et al. (2010) also evaluated some common themes about the emotional and mental health difficulties that college students encounter, their consequences, coping strategies, and obstacles to getting assistance. It highlights that some significant proportions of students were suffering from emotional discomfort, which included depression, anxiety, and psychotic illnesses like Limone & Toto (2020) mentioned in their article. It also sheds light on the rising rate of severe mental health disorders among college students. Another point made is the importance of knowing how emotional discomfort affects academic performance.

According to the American Psychiatric Association, **anxiety** is defined as the perception of impending danger or an unfavourable event, accompanied by tension-related bodily symptoms or dysphoric feelings (Giulio, 2019). Studies have reported high rates of anxiety among college students in the past year (LeBlanc & Marques, 2019). The most prevalent anxiety disorders are panic disorder, social anxiety, and generalized anxiety disorder (GAD).

Not everyone has the same symptoms of anxiety; it can vary from person to person, and these symptoms include feelings of restlessness, muscle tension, poor concentration, feeling out of control, sleep difficulties, sweating, rapid breathing, trembling, shaking, etc. (psychcentral, 2022).

Depression is a prevalent, long-term medical condition that can impact one's emotions, thoughts, and physical well-being. It is characterized by a depressed state of mind, low energy, melancholy, sleeplessness, and a failure to appreciate life (Cui, 2015). Academic performance, social relationships, physical health, and general well-being can all be significantly impacted by depression in third-level students. A lower quality of life, relationship difficulties, physical issues, social disengagement, substance misuse, and suicidal thoughts can all result from it. Roldan-Espinola et al. (2024) said in their study that research indicates one-third of college students experience mental health disorders within a year, with depression emerging as the most common condition among this demographic. It is also stated in this article that the prevalence of major depressive disorder (MDD) among university students over a 12-month period is estimated to be around 18.5%, according to the World Mental Health International College Initiative, which involves 19 universities across eight nations.

Suicidal ideation (SI), often known as ideas or thoughts of suicide, is the term used to describe a variety of reflections, desires, and obsessions with self-harm and death. Researchers, educators, and clinicians continue to face difficulties in comprehending and addressing the ongoing challenges of SI since there isn't a definition that is widely accepted (Harmer, et al., 2020). Researchers from Harvard Medical School at Brigham and Women's Hospital examined over 67,000 college students from over 100 institutions for a study that was published online in Depression and Anxiety. While they found that certain groups, such as racial or ethnic minorities and sexual or gender minorities, exhibited heightened vulnerability, all of the students surveyed reported high rates of stress events, mental health diagnoses, and the risk of suicide or suicidal thoughts (Universities, 2018). Korczak (2015) said that the typical triggers for suicidal behaviours among students are conflicts within family or friend groups, academic disappointment, romantic relationship breakups, revealing one's homosexual orientation, legal entanglements, or pending court cases. He also said suicidal behaviour is also more common in youth with a history of physical or sexual abuse when they are exposed to events or people that have triggered memories or emotions related to the abuse.

Addiction is another urgent issue affecting the mental health of third-level students. Addiction is a complex health issue that affects people both mentally and physically. It involves a combination of factors like brain chemistry, genetics, environment, and personal experiences. Those struggling with addiction find themselves unable to control their use of substances or certain behaviours, even when they know it's harmful (Medicine, 2019). Studies have reported a significant drug consumption trend among college students, with cannabis emerging as the most commonly used drug, according to 94% of users indicating its usage on a regular basis. In addition, a sizable segment of the drug-using population had also tried additional substances like cocaine, nitrous oxide, and ecstasy (Boden & Day, 2023). In another survey conducted according to gov.ie in 2021 in Ireland, over 11,500 student responses from 21 higher education institutions were analysed by the Drug Use in Higher Education Institutions (DUHEI) to provide a nationwide picture of drug use among Irish university students. The result indicates that more than half of participants said they have utilized illegal drugs, more than one-third said they had used drugs within the previous year, and one-fifth said they had used drugs within the previous month. Along with those who said that drug use has a moderately unfavourable or highly negative impact on student life, over half of the respondents thought that drug use is a typical aspect of being a student. The drugs that are frequently used are cannabis, which is 52%, cocaine, which is 25%, ecstasy, which is 23%, ketamine, which is 16%, mushrooms, which is 12%, amphetamines, which is 9%, and other new psychoactive substances, which are 8% (Department of Further and Higher Education, 2022).

Psychiatry.org (2023) defined **eating disorder** as a serious mental health condition marked by ongoing and significant disruptions in eating habits, along with troubling emotions and thoughts. They can have severe effects on mental well-being, physical health, and social interactions. The various kinds of eating disorders were also mentioned, but the most common ones are bulimia nervosa, anorexia nervosa, avoidant restrictive food intake disorder (ARFID), binge eating disorder, and other specified feeding and eating disorders (OSFED). Jacobson (2023) explains the National Eating Disorders Association (NEDA) states that full-blown eating disorders usually start between the ages of 18 and 21. According to the organization, rates of eating disorders are rising, affecting 10–20% of women and 4–10% of males enrolled in college. Eating disorders can be very serious among college students and sometimes be life-threatening. She emphasized a concerning lack of awareness regarding the severity of these disorders, pointing out the misconception that they solely arise from vanity

or a desire for beauty. She stresses that these disorders are not simply extreme diets but legitimate medical illnesses.

Factors that contribute to mental health issues and their impact on academic performance

The article "Profiling third-level student mental health: findings from My World Survey 2" in the Irish Journal of Psychological Medicine aims to figure out what affects students mental health and help improve mental health services. They looked at data from My World Survey 2-Post Second Level (MWS2-PSL), which involved nearly 10,000 students aged 18-65 from 12 different colleges in Ireland. These risk factors include drug and alcohol use, exposure to stressors, and risky sexual behaviours (Mahon, et al., 2022).

Alcohol and drug use are factors that contribute to third-level students mental health. Martin et al. (2021) mentioned that college students who drink too much alcohol face the danger of experiencing poor mental health, low grades, and physical safety hazards. According to Seigers & Carey (2010) eighty percent of the 14,115 college students in a nationwide sample reported drinking alcohol in the previous year. It is commonly known that stress increases the likelihood of undergraduates using and abusing alcohol. Eighty percent of the 14,115 undergraduates in the national sample had drunk alcohol in the previous year. In the past month, 45% of students between the ages of 18 and 24 had a severe (binge) episode. Thirty percent of undergraduates satisfy the criteria for the diagnosis of alcohol abuse, and six percent of them fulfil the full criterion for alcohol dependence.

Based on my knowledge as a third-level student myself in Ireland, the factors that contribute to mental health issues are academic pressures, financial stress, social isolation, social media, and the availability of mental health supports. Limone & Toto (2022) also mention some factors to add to what Price said, which are academic factors, social factors, psychological risk factors, lifestyle factors, and physiobiological factors. The academic factors mentioned include academic stress, performance and grades in college, social connections, and lastly, interactions with campus mentors or teachers, which is similar to what I said. The social factors include financial worries, friendships, housing and living conditions, and relationships. Psychological risk factors include self-efficacy, stress, motivation, and test anxiety.

Pascoe et al. (2020) defined **academic stress** as stress connected to education and included pressure to earn high scores and worries about getting poor results. An example was also

included in this study of the survey conducted by the OECD (Organisation for Economic Co-operation and Development) across 72 countries, consisting of 540,000 students. The results of this survey showed that, on average, 66% of students stress about getting bad grades, and 59% worry about taking tests. Other results include 55% of students getting anxious about tests even if they are prepared to take the test, and lastly, 37% feel super tense when they study, with the percentage of girls being higher than that of boys. Just this data alone shows that academic stress is one of the major factors that contribute to anxiety and stress, which are mental health issues among third-level students in Ireland. A study by Kindbridge behavioural health linked this stressor to academic competition. It said academic rivalry cannot only spur students to put in more effort and earn better scores, but it can also lead to unhealthy stress levels, which can worsen anxiety and depression and have a negative impact on academic performance (Kindbridge, 2022).

Suicide Prevention Resource Center (2020) said students quality of life, academic performance, physical health, and contentment with their college experience can all be adversely impacted by mental health issues. They can also have a negative impact on relationships with friends and family. Additionally, these problems may have an impact on students long-term work prospects, income, and general health. With this information, it's clear that addressing mental health concerns among students is essential not only for their academic success but also for their overall happiness and future prospects.

Financially stressed students are among the most susceptible to mental health problems. Students who struggle financially and have concerns about debt are more likely to experience depression and alcoholism, according to recent research from the University of Southampton and Solent NHS Trust (YMCA, 2016). According to a 2018 survey of more than 3,000 students in the UK, 3 out of 5 were concerned about repaying their loans, 84% were concerned about having sufficient funds for daily needs, and 50% thought that having financial troubles had a negative impact on their mental health (McCloud & Bann, 2019).

According to data from the National College Health Assessment, nearly a quarter of undergraduates (24%) said that their inability to pay for classes had an adverse impact on their performance. This can be the result of needing to put in more hours at work to cover living expenses or bill payments, which lowers the amount of time that can be spent studying (Moore, et al., 2021). To add to that, financial strains can also result in mental health issues like depression and anxiety, which makes academic success even more difficult. In addition,

financially challenged kids might find it difficult to pay for necessary supplies like technology or textbooks, which would place them at a disadvantage in comparison to their classmates.

Taylor et al. (2023) defined **social isolation** as an objective state defined by a reduced level of interaction with others and a sense of disengagement from social groups and activities. As college students, social isolation can affect academic achievement. It causes students to participate less in class discussions, work less cooperatively on group assignments, and generally get disengaged from campus life. Cherry (2023) mentioned in a Verywell mind article some signs of social isolation, which include giving up on social interactions or gatherings you used to attend, being alone and without someone to turn to for support, guidance, or just a chat with, the absence of deep, personal, and meaningful relationships with other individuals, being sad, hopeless, or rejected, and many more. Taylor et al. (2023) points out that a meta-analysis conducted recently within Europe found Eastern European nations had the greatest rates of loneliness, while Northern European nations had the lowest rates. According to college student mental health statistics by Bryant & Welding (2023), 25 percent of students said they frequently felt isolated. Students who responded to the poll revealed that 19% of them frequently felt alone, and of the pupils surveyed, 22% said they frequently felt excluded.

Based on general knowledge, we all know **social media** offers different opportunities, like forms of communication and connections with friends, family, and loved ones, but at the same time, it can have negative effects on third level students. Students in their third year can experience substantial mental health effects from social media. Research by Capital University indicates students usage of social media can make their anxiety, despair, loneliness, and stress levels worse. Constant exposure to edited and perfected versions of other people's lives on social media can lead to unfavourable comparisons, fear of missing out (FOMO), and feelings of unworthiness. Students low self-esteem, anxiety, and depression can also be caused by cyberbullying, harassment, and the harmful effects of social media (Buzenski, 2024).

The availability of mental health support is also a crucial factor that contributes to the mental health of third-level students. It's widely known that students who have easy access to mental health resources are most likely to seek treatment or assistance, which could promote early detection and successful symptom management. Mahon et al. (2022) draw attention to

the fact that one of the most important factors influencing students' mental health is their availability and accessibility of support services. It highlights that one of the top three obstacles listed by students is the difficulty in making appointments for mental health services available on campus. Students general health and well-being are diminished as a result of this lack of availability. The study indicates that students who experience symptoms of anxiety and sadness are more likely to turn to informal support systems than official ones.

Students attending college may suffer greatly from the lack of support services on campus. It implies that individuals might not receive treatment for mental health issues such as sadness or anxiety. Without assistance, their grades could suffer, they might experience increased stress and loneliness, and they might even encounter dangerous circumstances like suicide thoughts. Additionally, it gives students the impression that mental health is not a serious concern on campus, which is a poor attitude. In general, students may find college far more difficult if they lack support resources.

The poor level of **socioeconomic status (SES)** is one of the global elements that contribute to mental illness. In addition to having an impact on the community, this phenomenon is said to be impeding students ability to complete their education. Both philosophers and researchers concur that students' mental health problems, such as stress, anxiety, and depression, can be predicted by their socioeconomic situation (Khan & Nadeem, 2020). Being socioeconomically disadvantaged is one of the factors that contributes to the mental health issues of students based on general knowledge because they may have limited access to mental health resources, e.g., therapy and counseling services. They might also worry about their living expenses and school fees. An individual's mental health is influenced by the social, environmental, and economic circumstances they experience throughout their life, including their upbringing, living conditions, employment, and aging process. Khan & Nadeem (2020) said university students live an extremely competitive lifestyle. Thousands of students attend university, and they come from wealthy, medium-, and lower-class homes. It is normal for each of them to compare themselves to others. Having an inferiority complex might lead to mental health difficulties.

Price (2018) said in the ahead journal that it has been discovered that studying and the obligations of academic life in third-level education might lead to mental distress because higher education courses generally call for a certain amount of self-directed learning, which

can be a significant departure from the student's typical educational experience. This may have an impact on a student's capacity for adjustment.

Finding out potential strategies

Different articles mentioned different strategies on how to improve the mental health of students in higher education.

ABELSON et al. (2023) listed some strategies or interventions that have shown promising results in improving the mental health outcomes of college students based on research studies, which are peer health education programs, peer support programs, supportive learning environments, mental health focused courses, and mentoring. **Peer educators** are increasingly being trained in mental health, and this is a practice that is being adopted by many colleges. Increased participation in the peer organization Active Minds over a school year was linked to advancements in students' understanding of mental health, a decrease in stigma, and a rise in supportive actions, according to a longitudinal study involving 12 California colleges.

Studies have demonstrated the effectiveness of **peer support initiatives**, such as group therapies and peer counseling, in enhancing a range of health outcomes among a variety of ethnic groups. Research from clinical settings outside of higher education demonstrates the effectiveness of peer-led counseling sessions, which have been shown to improve confidence and self-efficacy while lowering depressive symptoms. Belonging-focused interventions have been demonstrated to improve academic performance and student health while lowering disparities (ABELSON, et al., 2023). Abrams (2022) also suggested workshops addressing time management, stress, sleep, and goal setting could be beneficial for students who are experiencing difficulties with the demands of their academic schedule. Peer therapy can be beneficial for individuals who are experiencing adjustment problems, including low self-esteem, loneliness, or interpersonal conflict, or who are lamenting the loss of a traditional college experience due to the pandemic. And lastly, students who are experiencing more serious issues, such as depression, trauma from a sexual assault, or disordered eating, can still meet with counsellors one-on-one.

The **financial help** students receive should also be reconsidered so that students don't need to sacrifice academic performance for the stress of struggling financially. University staff should be trained to properly recognize when students are in financial strain and how to recognise when this is impacting them mentally (YMCA, 2016). These findings show how much

financial worries weigh on students, highlighting the need for universities to offer support. By providing resources on managing money, helping students create budgets, and offering mental health counseling, universities can better support students and help them succeed both academically and mentally.

Research also indicates that colleges have many chances to establish **helpful learning environments**. Studies suggest that alterations to curricula, classes, and classroom environments might benefit students' mental and overall well-being. Organizations, divisions, and teachers can implement educational strategies that promote students' wellbeing, lower stress levels in the classroom, and provide curricula with a mental health focus (ABELSON, et al., 2023). These initiatives foster the development of a supportive learning environment whereby students feel encouraged to reach their full potential both personally and academically.

Studies reveal that small-group programs held outside of school do not produce the same level of success as in-class **mental health programs**. Research comparing the pre- and post-intervention impacts has demonstrated favourable results in several domains, including mental health literacy, depressive symptoms, quality of life in general, hopefulness, worldwide mental health, and stress relief. Mindfulness-based stress reduction and seminars about psychosocial wellness have also been proven to be beneficial in improving the wellbeing, compassion for oneself, stress management ability, and awareness of first-year students based on thorough investigations. Well-researched evaluations have also shown that taking positive psychology classes has a beneficial effect on students' mental health (ABELSON, et al., 2023).

Increasing the number of **mentorship opportunities** appears to have potential benefits for mental health, particularly for college students from historically marginalized backgrounds. Studies reveal that during their first year of college, students who have close ties with their mentors report fewer symptoms of depression. This change is thought to be the result of improved self-worth perceptions, which reduce mental anguish. Students express a lesser amount of anxiety and sadness when they feel emotionally linked to their mentors than when they don't feel that way (ABELSON, et al., 2023).

In addition to standard support services, using online resources and tools can help promote student well-being. Several mental health applications have been designed specifically to

meet requirement of college students and include a variety of functions for managing stress, anxiety, and depression.

Review of mental health apps

These are some mental health apps relevant to college students:

Breeze

Breeze is a comprehensive mental health app created to help people deal with different emotional challenges they may face. Breeze provides a variety of tools and features to help users become more self-aware and develop better coping strategies. These features include mindfulness exercises, mood tracking, stress management, and community support. It's also user-friendly. Users have shared positive reviews of this app and noticed improvements in their mental health. Breeze provides both free and premium subscriptions, with various levels of access to features and content. The cost of this app's premium is reasonable compared to other mental health apps. Breeze can help solve specific concerns that college students encounter, such as academic strain, social pressures, and transitional issues. The app's affordability makes it suitable for college students (Breeze, 2021).

Headspace

Headspace is a famous mindfulness and meditation app that provides instructions for meditation sessions, aids for sleeping (sleep sounds and stories), and stress-reduction exercises. The app's user-friendly layout and wide collection of meditation sessions make it suitable for users with varying levels of expertise. The instructions were clear and easy to follow. However, some users have complained about the app's subscription approach and limited free content. Headspace can help third-level students manage academic stress, anxiety, and sleep difficulties, which are very common during their academic journey (Headspace, 2010).

Sanvello

This program provides numerous tools and information for managing stress, anxiety, and depression and can be really useful. First off, it's very easy to navigate. Everything in the app is very organized, its easily to find all features. Guided meditations, mood tracking, and support groups were all just a tap away. The guided meditations covered a lot of topics and were led by a soothing voice that could help relax. The exercises based on CBT (Cognitive Behavioural Therapy) gave practical strategies for challenging negative thoughts and

managing emotions. The feature Daily Mood Tracker allows for checking in with oneself every day. It offers both free and premium options; the free version provides basic tools, while the premium version gives access to all features. The app's integration with therapy services, as well as its emphasis on positive psychology principles, make it an excellent resource for students seeking mental health care (Sanvello, 2015).

Review of the mental health calculator

Depression Anxiety Stress Scales (DASS)

It's major function in treatment settings is to determine the root cause of emotional distress as part of the clinical assessment. The questionnaire was straightforward and easy to understand, with clear instructions on each item. It consists of 42 questions. The scale assesses the severity of the key symptoms of depression, anxiety, and stress, allowing researchers and physicians to measure current conditions or changes over time. Users will rate each statement based on how much it applied to them the previous week, on a scale of 0 to 3. There is also a scoring guide to determine the severity or normality of the mental health issue (healthfocus, 2018).

Generalized Anxiety Disorder 7 (GAD-7)

The GAD-7 is a tool for assessing symptoms of generalized anxiety disorder. It aims to measure the seriousness of symptoms experienced by the user over the past two weeks. Each question is evaluated on a scale of 0 to 3, with higher ratings indicating greater severity of anxiety symptoms (Spitzer, 2005-2024).

3. <u>DESIGN</u>

Webpage structure design

This study includes the development of a web-based platform for addressing mental health issues among third-level students in Ireland. During the development process, the goal is to create a user-friendly interface that provides support and is easy to navigate, so students with mental health issues can easily access resources. The platform consists of several linked pages, each with a specific purpose related to mental health care and education. The pages include the homepage, about page, self-help tools page, research findings, and support. These pages provide structured content and interactive elements. The homepage is a welcoming introduction, presenting a summary of the platform's services and directing users to the

appropriate areas. The "About" page provides in-depth information regarding mental health, which includes definitions, common disorders, and many more. The self-help tools page includes interactive materials aimed at encouraging students to take care of and manage their mental health. These tools include stress management exercises, stress relief strategies, and exercises to help reduce anxiety and depression. The research findings page includes findings from academic research and surveys. And lastly, the support page includes relevant resources and services for students in need of help. The webpage structure is designed to match the research objectives of offering easily accessible mental health support for third-level students. The platform's goal is to encourage students to seek help and utilize services effectively.

Research design

This study is done using a mixed-methods approach to investigate factors that contribute to the mental health issues of third-level students and also explore possible solutions. The combined use of both qualitative and quantitative data collection techniques facilitated a greater understanding of the research topic being studied. The questions in this survey addressed a range of topics that are associated with the mental health of third-level students in Ireland: how they cope, the availability of mental health supports on campus, their experiences with mental health issues, and many more. A cross-sectional research design is being used to collect data from a group of college students. This method allows students to examine variable relationships and gain insights into their mental well-being in college. Additionally, using a structured questionnaire means we gather information in a consistent way, making it easier to compare and analyse data from various groups of people.

Participant selection criteria and data collection method

The only criteria required was that they had to be third-level students – students currently in third-level education in Ireland. Recruitment efforts included sharing survey links with friends, group chats, and also sending them to other friends. The data gathering process involved the distribution of an online survey via Google Forms. Participants received full details about the study's goals, methods, privacy measures, and participant rights before filling out the survey. The survey comprised closed-ended questions, which yielded quantitative data regarding various aspects influencing mental health concerns, including academic pressures, social support networks, and awareness of available mental health resources. Furthermore, the survey included brief, open-ended questions, enabling participants to share qualitative insights concerning their mental health experiences,

perceptions, and attitudes. These qualitative inputs enhanced the dataset by providing subtle viewpoints and personal narratives.

Although the initial target sample size was 100 participants, data collection efforts were limited by time and resources, which led to a sample size of 69 respondents.

Ethical considerations

This study has obtained ethical approval from the UCC Social Research Ethics Committee. Before they completed the survey, each participant provided their informed consent. Participants in the research were made aware of their voluntary involvement, their freedom to withdraw at any moment without incurring penalties, and the anonymity and confidentiality of their answers. No personally identifying information was gathered, and the data will be analysed and reported in a way that maintains anonymity to respect participants' privacy.

4. <u>DATA ANALYSIS</u>

In this section, the findings of the investigation on the factors affecting the mental health of third-level students and suggestions for improvement will be presented. A survey was used to collect data from 69 participants on a variety of mental health-related topics, as well as possible contributing variables. The data we gathered was both qualitative and quantitative. The analysis will be guided by the following research objectives stated above:

The analysis of the data is important for various reasons. Even though the study's total comprised 69 responses, it nevertheless offers insightful information about the experiences third-level Irish students have with their mental health. These results have the potential to direct future research or actions as well as add to the body of knowledge already available on mental health in third-level education. In addition, the study will show how valuable even a smaller sample size can be for revealing patterns and guiding future interventions.

The data analysis section includes:

- Descriptive statistics
- Qualitative data
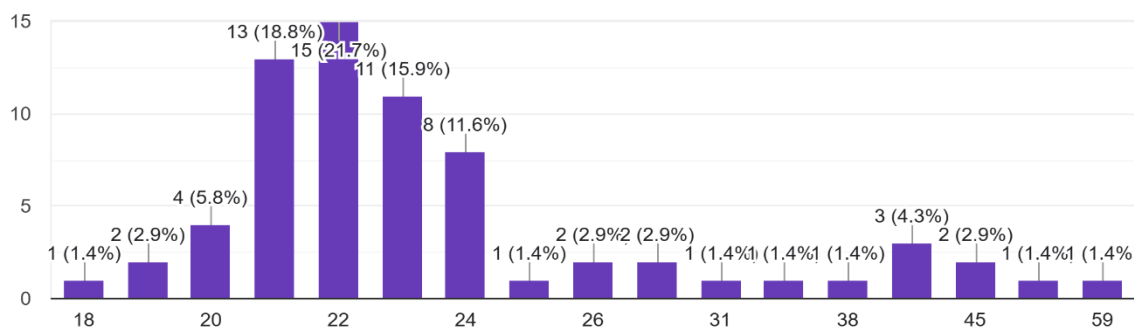- Discussion

Descriptive statistics

What best describes your gender

69 responses

● Male
● Female
● prefer not to say

71%   8.7%

20.3%
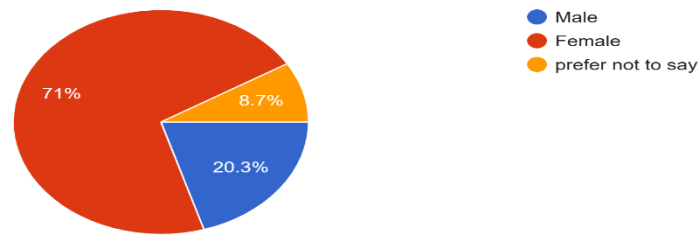
4. 1

Diagram 4.1 shows the percentage of males and females that took part in this survey. 71% of respondents are female, which is more than half; 20.3% are male; and 8.7% of respondents prefer not to say.

What is your age

69 responses

4.2

Diagram 4.2 presents the result for the age group that took part in this study. It shows that the majority of respondents are 22 years old, which is 21.7%; 18.8% of the respondents are 21 years old; 15.9% of the respondents are 23 years old; 11.6% of the respondents are 24 years old; 5.8% of the respondents are 20 years old; 4.3% of the respondents are between the ages of 39 and 44; 2.9% of the respondents are between the ages of 19, 26, and 45 years of age; and lastly, 1.4% of the respondents are 18, 25, 31, 32-37, 46-59 years of age. Central tendency measures were computed to analyse the age distribution of research participants and estimate the average age of responses. It was determined that the sample's mean age is 21.47, indicating that, on average, participants were approximately 21 years old. Furthermore, it was discovered that the median age, which stands for the middle of the age distribution, is 22,

which indicates that the median value of the dataset is 22 years of age. Additionally, the age that occurred the most frequently in the sample, or the modal age, was 22. This suggests that the majority of respondents belonged to the 22-year age range.

How would you rate your overall mental health
69 responses
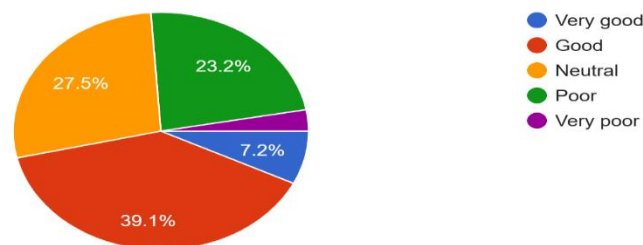
4. 3

Diagram 4.3 presents the results of how the participants (third-level students) would rate their overall mental health. 39.1% of these participants rate it good, 27.5% rate it neutral, 23.2% rate it poor, 7.2% rate it very good, and 2.9% rate it very poor.
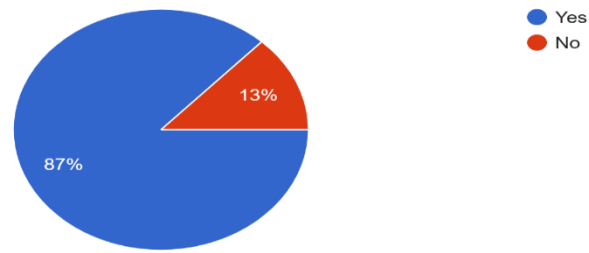
Have you experienced symptoms of depression in the past month?
69 responses
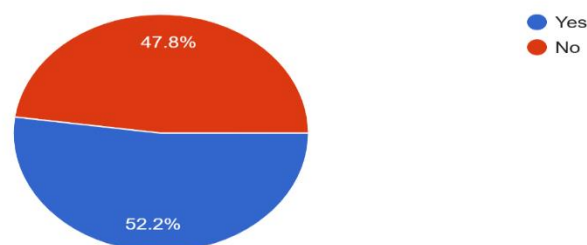
4.4

Diagram 4.4 shows the percentage of students that have experienced symptoms of depression in the past month. 52.2% of these participants answered yes, which is more than half, and 47.8% of these participants answered no.

Have you experienced symptoms of anxiety in the past month
69 responses

Yes
No

13%

87%

4. 5

Diagram 4.5 shows the percentage of students that have experienced symptoms of anxiety in the past month. 87% of respondents answered yes, and 13% of students answered no.

Have you ever sought professional help for mental health concerns while attending uni
69 responses

Yes
No

53.6%

46.4%
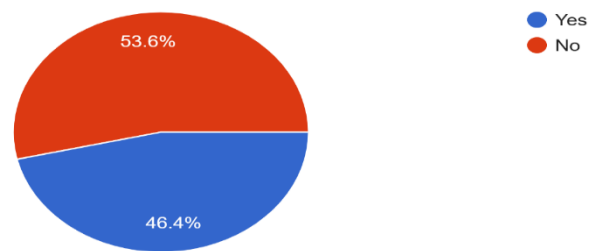
4.6

Diagram 4.6 presents the percentage of students who have ever sought professional help for mental health concerns while in university. 53.6% of participants answered no, and 46.4% of these participants answered yes.

Have you experienced an increase in stress levels since starting your studies
69 responses

Yes
No

7.2%

92.8%
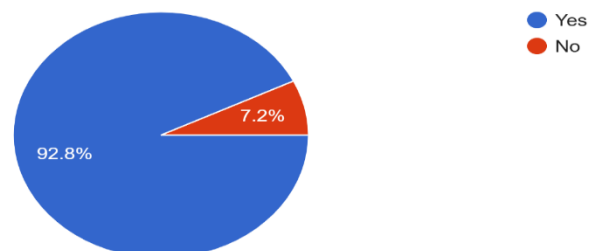
4.7

Diagram 4.7 shows the percentage of students that have experienced an increase in stress levels since starting their third-level education. 92.8% of students answered yes, and 7.2% of students answered no.

Do you feel supported by your university/college in managing stress
69 responses

- Yes
- No

75.4%

24.6%
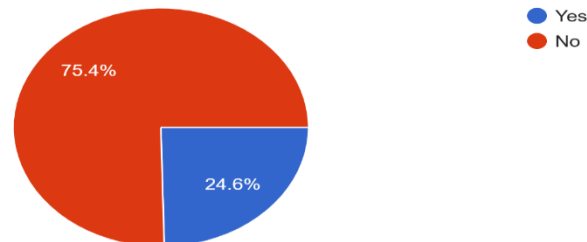
4.8

Diagram 4.8 shows the results of students who answered the questions about whether they feel supported by their universities or colleges in managing stress. 75.4% of students answered no, and 24.6% of the students answered yes.

Have you experienced feelings of loneliness or isolation during your studies
69 responses

- Yes
- No

20.3%

79.7%
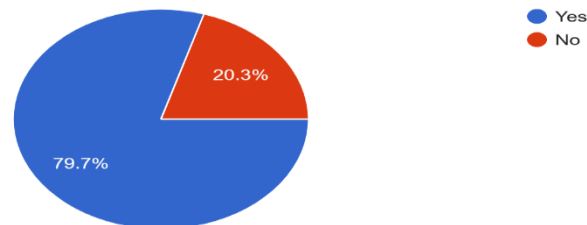
4. 9

Diagram 4.9 shows the results of the question about whether students have experienced feelings of loneliness or isolation during their studies. 79.7% of students answered yes, and 20.3% of students answered no.

Are you aware of mental health services available on campus
69 responses

Yes
No

26.1%

73.9%
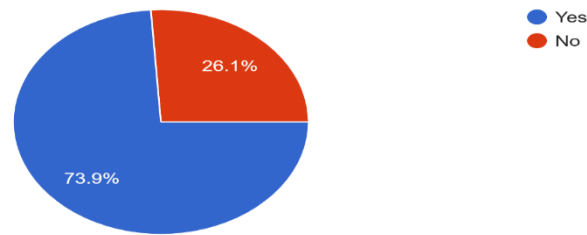
4.10

Diagram 4.10 shows the results for the question about students awareness of the mental health services available on campus. 73.9% of participants answered yes, and 26.1% of participants answered no.

How satisfied are you with your social life at your institution?
65 responses

Very satisfied
Satisfied
Neutral
Dissatisfied
Very dissatisfied

27.7%

9.2%

16.9%

38.5%
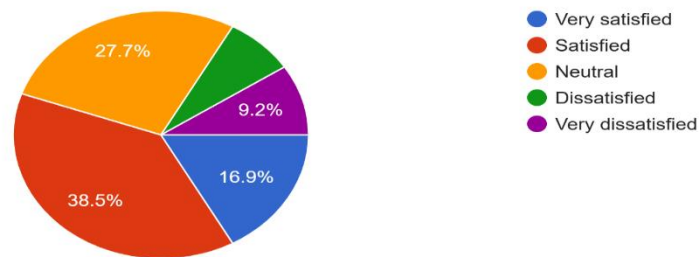
4.11

Diagram 4.11 shows the results of student satisfaction with their social life in school. 38.5% of participants are satisfied with their college social life; 27.7% are neutral, which means they are not satisfied, nor are they satisfied; 16.9% are very satisfied; 9.2% are very dissatisfied; and 7.7% are dissatisfied.

How often do you engage in social activities with peers outside of academic settings?
65 responses

Legend:
- Daily
- Weekly
- Monthly
- Rarely
- Never

27.7%
16.9%
9.2%
44.6%
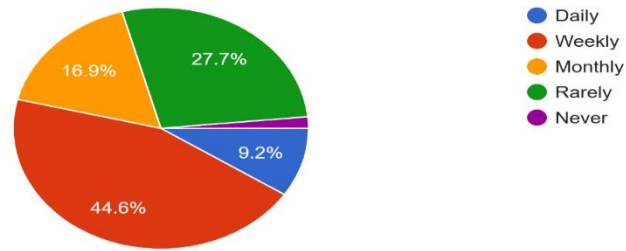
4.12

Diagram 4.12 shows the results of how often students engage in social activities with peers outside of college. 44.6% answered weekly, 27.7% answered rarely, 16.9% answered monthly, 9.2% answered daily, and 1.5% answered never.

Do you feel that your social interactions positively impact your mental health?
65 responses

Legend:
- Yes
- No
- Unsure

21.5%
73.8%
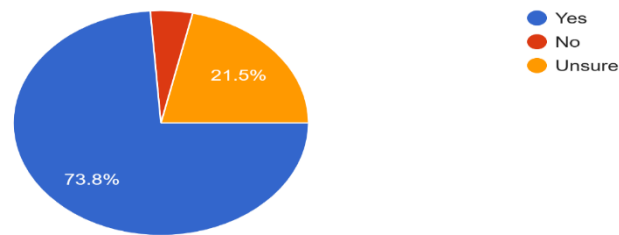
4.13

Diagram 4.13 shows the results of how students feel about how their social interactions positively impact their mental health. 73.8% of respondents answered yes to this question, 21.5% of students answered unsure, and 4.6% answered no to the question.

How do you perceive the level of stress caused by exams at your institution?
65 responses

Legend:
- Extremely stressful
- Moderately stressful
- Not stressful at all

38.5%
58.5%
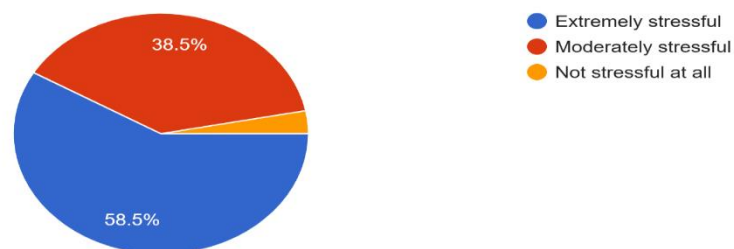
4.14

Diagram 4.14 shows the results about how students perceive the level of stress caused by exams in college. 58.5% answered that it was extremely stressful, 38.5% answered that it was moderately stressful, and 3.1% of these participants answered that it was not stressful at all.
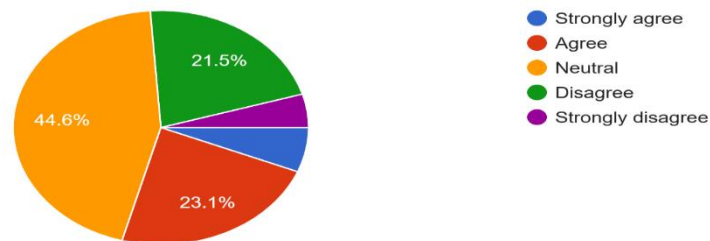
Do you feel adequately prepared and supported by your institution during exam periods?
65 responses

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree

4.15

Diagram 4.15 shows the results of how students feel about the support the school gives during exam periods. 44.6% of participants answered neutral, 23.1% answered that they agree the school supports them, 21.5% answered that they disagree the school gives any support, 6.2% of participants answered they strongly agree, and 4.6% of participants answered they strongly disagree.

How often do you experience stress related to financial concerns (e.g., tuition fees, living expenses) affecting your mental health?
65 responses

- Frequently
- Occasionally
- Rarely
- Never
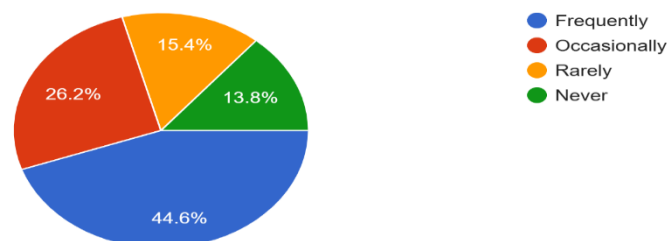
4.16

Diagram 4.16 shows the results of how often students experience stress related to financial concerns like tuition fees, living expenses, and many more. 44.6% of respondents answered frequently, 26.2% answered occasionally, 15.4% answered rarely, and 13.8% answered never.

Have you ever utilized mental health services provided by your institution
69 responses

Yes
No

72.5%

27.5%
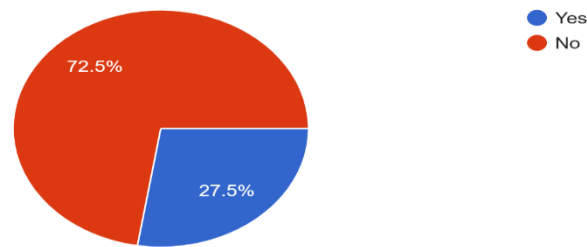
4.17

Diagram 4.17 shows the results of whether students have ever utilized the mental health services available on school campuses. 72.5% of respondents answered no, and 27.5% of participants answered yes.

Qualitative data

Participants were invited to share their thoughts and experiences freely through open-ended questions, allowing for a deep and detailed understanding of their personal backgrounds. One of the questions is about their field of study. The purpose of the matter was to shed light on the many academic fields that the participants represented.

Participants in the study came from a variety of academic backgrounds, and it provided insights into how mental health and academic fields interact. The following is a breakdown of the study fields of the participants:

Digital humanities and IT: 12 participants

Pharmaceutical science: 6 participants

Nursing: 5 participants

Occupational therapy: 5 participants

Med and health: 3 participants

Medicine: 3 participants

Public health: 3 participants

Science: 3 participants

Computer science: 3 participants

Physiotherapy: 3 participants

Languages: 2 participants

Social care practices: 1 participant

STEM: 1 participant

Audiology: 1 participant

International relations: 1 participant

International development: 1 participant

Law: 1 participant

Business and accounting: 1 participant

Accounting: 1 participant

Audiology: 1 participant

Dentistry: participant

Archaeology: 1 participant

Chemistry: 1 participant

Psychology: 1 participant

Biochemistry: 1 participant

Criminology: 1 participant

Museum studies: 1 participant

Nutrition: 1 participant

Government and politics: 1 participant

Biotechnology: 1 participant

Arts: 1 participant

Midwifery: 1 participant

Astrophysics: 1 participant

Education: 1 participant

Public health sciences: 1 participant

Electronic engineering: 1 participant

Participants discussed a range of issues that contribute to their mental health as third-level students in Ireland. Themes included academic pressure such as balancing classes, tests, assignments, doing well in exams, and final year projects. Stressors such as worries about time management, financial strains, and future goals were also often reported. A significant number of students voice concerns about their financial circumstances, both during and after their time as students. This involves being worried about being able to pay living expenditures and being unsure of one's financial situation in the future. Students stated that they were having issues with their educational experiences, such as difficult schoolwork and minimal lecturer support. A few individuals also brought attention to social stresses, like the need to blend in and difficulties in forming connections and relationships. Others included not having enough time for anything else except college, the pressure of master's degree, and moving away from home.

Answers to the question on barriers to getting mental health help identified several reasons why participants might be reluctant to make use of the resources that are available on campus. These included worries about the judgment and misconceptions around mental health disorders, a lack of awareness of the mental health services available on campus, perceptions regarding their restricted accessibility or availability, and unfavourable experiences with or perceptions of mental health services.

The participants were also asked to discuss whether they believed that social connections improved their mental health in one of the open-ended questions. The responses and narrative evaluation showed that participants had a variety of viewpoints and experiences. Numerous participants highlighted the value of social connections as a way to unwind and alleviate stress. They talked about how hanging out with friends, family, and peers allows them to temporarily forget about the stresses of college in general and relax. Others emphasized the value of relationships and interaction in improving mental health. Participants talked about how spending time with loved ones helps them feel less alone, cherished, and supported. They stressed the value of having a solid support system to fall back on in difficult situations. And lastly, many participants mentioned how social contacts had a favourable emotional influence. They stated that they felt happier, more positive, and more optimistic after

interacting with others. The humour, companionship, and shared experiences that come from social encounters were highly valued by the participants.

Many requests for more mental health resources and assistance at the institution were made by the survey participants. Requests were made for additional workshops and online resources, more counseling services with sessions that are more accessible, less wait time, and better access to prescription drugs and psychiatrists. There were also ideas for dedicated weeks without homework, more social events and physical activities, and greater support and understanding from professors and staff. Overall, the responses stressed the importance of broad and accessible mental health support to meet the different needs of students.

Respondents were also asked how they typically deal with stress related to exams. A common strategy emphasized thorough preparation and study, with many students highlighting the value of hard work in overcoming exam anxiety. On the other hand, others acknowledged turning to cramming, indicating a less successful coping strategy motivated by pressure at the last minute. Some preferred to take a more calculated strategy, spreading out their study time so as not to get overwhelmed. Some admitted to having emotional reactions, including crying, which shows how much emotional toll exams can take. To temporarily escape the tension, several students resorted to distractions like gaming or binge-watching movies. On the other side, some people use physical activities like walking or jogging as a way to release their tension. Several relaxation methods were mentioned as useful for reducing stress, such as deep breathing, meditation, and music listening. Seeking social support via talks with loved ones or via spiritual activities like prayer has been identified as one of the most important coping mechanisms for certain people. A few people admitted to being dejected, accepting the pressure, and concentrating only on passing the tests. A passive coping strategy was demonstrated by those who acknowledged using avoidance strategies and putting off the tension until the tests were about to happen.

5. <u>IMPLEMENTATION</u>

Code explanation for the webpage

This section includes a detailed explanation of the HTML (Hypertext Markup Language) and CSS (Cascading Style Sheets) code used to design and structure the mental health webpage. This is to clarify the functionalities and the layout of each component of the webpage.

The header section <header> of the webpage contains the title and navigation menu. The key sections <section> of the webpage contain details about mental health, various mental health issues, tools for self-help, research findings, and support choices. CSS styling in the <style section> in the html code controls the appearance and arrangements of items in the webpage, such as the text alignment, padding, colour and many more. Each section contains headings <h2> and paragraphs <p> to present information in a clear and structured manner. It also includes interactive elements such as navigation links <a>, YouTube videos embedded in it <iframe>, and self-help tools.

6. **TESTING AND EVALUATION**

Interpretation of the study

After a thorough examination of the answers collected from the data, some patterns and insights were identified. It's clear that participants are studying a range of courses, including humanities, sciences, health-related fields, tech fields, and others. This mix shows that this study involves different areas of expertise, which offered various viewpoints and ideas in the data analysis.

The data analysis carried out for this study provides insightful information on the state of the mental health of third-level students and possible directions for improvement by revealing a number of variables influencing the mental health of Irish third-level students. This study used a combination of qualitative and quantitative methodologies to investigate the complex relationship between students experiences and perceptions of mental health in academic settings.

The survey showed that most of the students who took part in this survey were women, highlighting a big difference between the number of male and female respondents. Concerning the respondent's mental health indicators and demographics, the quantitative analysis produced several important conclusions. The sample's age distribution shows that students in their early 20s make up the majority of the student body, with a mean and median age of about 22. This shows that most respondents are in this age range, which is consistent with the demographics of most third-level students. It is important to keep in mind, though, that because older students might not be as well represented in the sample, this age distribution may not accurately reflect the wide range of the student body.

The results show that participants self-reported mental health was perceived in a variety of ways. Although half of the participants generally assessed their mental health as good, a

significant fraction of the participants stayed neutral, while smaller percentages reported choosing extremely good and extremely poor ratings. The differences in how participants rate their own mental health show that mental health experiences can vary greatly from person to person. This emphasizes the importance of providing personalized support and interventions that address each student's unique needs. In addition, more investigation could explore the things that affect how students see their own mental health, like how much schoolwork they have, the support they get from friends and family, and how they handle stress.

As stated in the study by Pyschcentral (2022) 'anxiety and depression are common among college students'. This is consistent with our findings, as significant numbers of students were found to be experiencing symptoms of anxiety and depression, according to the data. Approximately 85.7% of students reported having had symptoms of anxiety, and over 39.3% had experienced symptoms of depression in the previous month. These results highlight the frequency of mental health problems among students in third-level education and stress the need for early action to address these difficulties and advance wellbeing. To better target interventions and support services, more research into the precise causes and effects of anxiety and depression symptoms may be necessary.

Insights regarding students use of mental health services, stress experiences, and opinions of institutional support were also disclosed in this data. Only a few students sought professional assistance for mental health issues, even though a large number of them reported feeling stressed and alone or isolated. This disparity brings to light potential obstacles to receiving support services, such as stigma, ignorance, and the perception of limited availability. Higher education institutions ought to focus on tackling these obstacles and improving the effectiveness and accessibility of mental health services in order to promote the well-being of students in higher education. This result is in line with Patte et al. (2024) study, which has shown insights into students use of mental health services, views regarding institutional support, and information on how only a few students seek help despite many reports of students having mental health issues.

The qualitative analysis offered deep insights into students points of view and interactions with mental health and wellbeing. Participants talked about a range of stressors and obstacles they deal with, such as pressure from their studies, financial obstacles, social pressures, and difficulties in getting mental health care. The results provide important insights into how students overcome educational challenges by emphasizing the complex range of coping

strategies they use to control their stress during exams. The impact that social ties have on students mental health is also particularly noteworthy in these survey responses. The participants high agreement about the beneficial effects of social interactions on their well-being was evident from the qualitative data. A lot of people stressed the importance of socializing with peers, family, and friends as a way to unwind, get support, and feel better emotionally. These results highlight the value of building social networks and support systems among students in academic communities in order to improve their resilience and mental health. This result is consistent with Wickramaratne (2022) study on the relationship between social connectedness and depression and anxiety symptoms. The result of this study showed that social connectedness acts as a protective factor against disorders and depressive symptoms.

It demonstrates a comprehensive knowledge of the broad nature of student mental health needs, emphasizing the significance of proactive and thorough institutional support structures. This study also indicates that many students may not be fully aware of the mental health services offered at their school, highlighting a significant lack of knowledge and awareness among them. This highlights the need to spread more word about the important mental health services available on campus. This is important so that students can get the help they need to take care of their mental health while in third-level education.

Implications

The results of this study have important implications for many organizations, including mental health professionals, academic institutions, and students.

Knowing the negative effects and impacts of academic pressure, financial stress, and many more factors on the mental well-being of students highlights for colleges the need to act quickly to support students mental health. The fact that there are more female respondents than males highlight the importance for colleges and universities to create mental health services that understand and address the specific concerns and experiences of female students. This could mean giving out materials that deal with stressors specific to each gender, setting up support groups or workshops specifically for women, and making sure there are enough female counsellors or mental health experts around for people to talk to. Colleges and universities can allocate resources to establish a wide range of mental health services, such as counseling centers, peer support programs, and wellness initiatives. These services are meant to offer students accessible resources to help them cope with anxiety, stress, and depression and enhance their overall well-being.

The findings of our study can help mental health professionals make more informed decisions about their treatments and practices. When mental health professionals acknowledge the particular challenges that college students deal with and adjust their services accordingly, they can effectively address the various needs of students. This could mean creating specific programs to help students manage stress, become more resilient, and learn effective coping strategies that are tailored to the challenges they face in academic settings.

This research also emphasizes the value of taking care of oneself, self-awareness, and seeking assistance for students in preserving their mental health. Students can better manage their mental health and deal with the difficulties of college life by identifying the warning signs of stress and getting help when they need it. In addition, in order to promote an environment of care and support among their academic communities – universities and colleges - students can advocate for better mental health resources and services on their campuses.

To sum up, this study emphasizes that universities, mental health professionals, and students all have a role to play in supporting student mental health and well-being. Together, we can establish stronger and more resilient college communities for current and future students by recognizing the importance of mental health for academic achievement, implementing successful interventions, and creating supportive environments.

Limitations

There are a number of study limitations that need to be noted. One major drawback of this study is that it had fewer participants compared to the expected number of participants. With 69 participants involved, the findings might not apply to a broader group of students. Having more participants would give us a better idea of what the whole population is like and make the results more dependable. There's a chance that the sample may not accurately represent all Irish third-level pupils. The gender differences in the sample may be due to biases in survey recruiting procedures or the rate of participation. It is important to recognize that the survey results may not accurately reflect the gender diversity of the student population, which could restrict the universality of the findings for all students. Since most participants chose to participate independently, sampling bias may have been introduced, limiting the findings' generalization. The accuracy of the results may also be impacted by the sample's overrepresentation or underrepresentation of particular demographic groups. This study's data collection method was self-report measures, which have several biases and limitations. For instance, it's possible that participants gave answers that were socially acceptable or that they

had trouble remembering and recounting their experiences precisely. This may result in biases and errors in the data, compromising the reliability of the conclusions. It's possible that participants were more likely to give answers they thought would be acceptable to society when asked about delicate subjects like mental health. This could cause people to overreport good experiences and underreport symptoms, which could distort the findings.

7. <u>CONCLUSIONS</u>

In conclusion, this thorough investigation into the mental health of Irish third-level students has shed light on the difficulties they encounter as well as areas where they may make improvements in their academic environment. Starting with analysing existing literature, we built a knowledge base by identifying significant common mental health issues among students, factors influencing student well-being, and gaps in current research. Adding to this, the methodology section described how we looked into these problems, using a mixed-methods approach to collect quantitative and qualitative data.

Upon analysing the findings, we discovered some important things about students mental health, backgrounds, and experiences. Many students exhibit signs of depression and anxiety, which indicates that actions must be taken to support them. Also, we learned about how students use mental health services and what they think about the support they get from their school. This shows that it's crucial to make it easier for students to get help when they need it and to break down any obstacles that might be in the way.

This study offers a call to action for improvements to the structure that supports student well-being and places a priority on mental health within the higher education system. By addressing the identified challenges and leveraging the strengths of social connections, educational institutions can create more supportive and inclusive environments that prioritize student flourishing and success. This study broadens our understanding of mental health in academic settings and provides insightful information and solutions for improvement.

To implement these concepts and develop an academic environment that prioritizes well-being, collaboration between educational institutions, legislators, and mental health specialists will be necessary in the future. By cooperating and putting the well-being of students first, we can create a future in which every student gets the resources and assistance they require to thrive in every aspect of life.

In addition to what was already mentioned, this study highlights how important it is to act early and take proactive steps to help third-level students with their mental health. If we can

spot signs of depression and anxiety early and provide the right support and help, colleges can reduce how much these issues affect students' grades and how they feel overall. Furthermore, encouraging students to seek treatment when necessary and removing stigma from conversations about mental health can strengthen their sense of community and belonging on campus.

There are several directions in which more research could go in the future. To learn more about how students mental health evolves during their time in college, follow-up investigations that track students over time are one option. This would make it possible for researchers to pinpoint important variables that influence mental health effects and track changes in them over time. Furthermore, qualitative research techniques like interviews and focus group discussions may offer greater insights into how anxiety and mental health are experienced by students. With the aid of qualitative methods, researchers can find fresh directions for intervention as well as comprehend the context behind the quantitative results. Research in the future could also strive for more inclusive survey designs that cover the entire range of gender identities and experiences. Future research could also examine the efficacy of certain programs designed to lessen stress, anxiety, and depression and enhance mental health among college students. We could also analyse how institutional procedures and policies affect the mental health of students. In a larger and more diverse sample of third-level students, the effectiveness of this platform could be investigated in forthcoming research. It may also investigate the influence of the website on students mental health outcomes, such as a reduction in anxiety and depression symptoms.

Assessing the interplay of identifying traits like gender, ethnicity, and socioeconomic position can also help shed light on the specific challenges that minority student populations experience. It's crucial to tackle the obstacles in systems and structures that create unfair differences in mental health support for students. By examining the quality, availability, and accessibility of mental health services on college campuses, we can pinpoint areas in need of improvement.

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