

Mental Health of University Students: A Review Study

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Abstract: This review study endeavors to give an overview of literatures on mental health of university students and introduces an expansive scope of literature findings related to other related issues among university students. In the current circumstance, the curiosity of the researcher is to review the literature findings of past researches. Research studies from 2001 to 2018 years were used in this study. The earlier researches can assist the researcher to speculate and conceptualize the importance of the study phenomenon, and do discriminating investigation which may give with respect to write summary and suitable conclusion. Remembering these goals, the researcher reviewed the literatures so as to acquire information and the state of work being done in this area. Consequently, in the light of the present research literatures from different sources was extensively reviewed. Furthermore this study incorporates four areas. First introduction, second literatures related to mental health of university students, third summary and conclusion.

Keywords: Mental Health, Students, University.

1. INTRODUCTION

Mental health- “A state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community” (WHO, 2014).

Currently mental health concerns have turned into an emergent issue among students and academics although studying in university can be a spinning point for students. Independent living, self-learning, a lack of organization, fewer and less subtle targets and more talented and competitive companions can all disrupt a student who has been used to excelling at secondary school. Factors such as the number of friends, perceived social support, satisfaction with finances, perceived discrimination were influence the student’s life satisfaction. Self-reported mental health needs were significantly and adversely connected to confidence about one’s financial status, higher functional relationship with one’s advisor, regular contact with friends, and being wealth. In the meantime the expense of educational tuition fees and living, along with the demands to get jobs, can put stress on students. The students’ pressure got raise for later years of university, students endured badly from panic attacks and anxiety. Moreover university students obsessed about their effort not being good enough (Shamsuddin et al., 2013; Banu, 2014; Deb et al., 2016; Botha et al., 2017; Huang, 2018). They would slip study work and have to start over, putting more strain on themselves to get it in on time. To beat this some students are taking smart drugs in order to get higher ranks and experiencing increase mental health problems. Mental health among university students represents a growing and important public health concern. The university years, especially for those traditional college age students between 18 to 24 years of age, are a period of significant self improvement and life transition (Iarovici, 2014) are often extremely stressful for students (Bland, Melton, Welle, & Bigham, 2012). The onset of the majority lifetime mental health issues arises in this particular time period (APA, 2013; Eisenberg, Hunt, Speer, & Zivin, 2011). It is a time of contradictions when an individual experiences numerous progressions and encounter changes, for example, emotional, behavioral, scholarly, sexual, financial, and social, and additionally endeavors of finding one's identity with sexual and psychosocial development. During this period, the university students’ mental health constitutes one of the essential components of social health. The needs of mental health among students are growing in prevalence

and severity. Research indicates adverse academic, occupational and social outcomes for students as a consequence of mental health issues (ACHA, 2013; Eisenberg, Hunt, & Speer, 2013; Gallagher, 2013; Iarovici, 2014). University students are facing more academic stress and pressure may lead to high risk of depression in this population. According to National Crime Records Bureau report (2015), 8,934 students have committed suicide in 2015. In this when compare to other states, Maharashtra students are more 1,230 (14%) followed by 955 students in Tamil Nadu and 625 students in Chhattisgarh. *“Arjun Bharadwaj, a 24-year-old management student, committed suicide by jumping out of a 19th-floor hotel room in Mumbai. Media reporting suggested he had been depressed about failure in exams, but it is no exception: Every hour, one student commits suicide in India, according to 2015 data (the latest available) from the National Crime Records Bureau. In the five years leading to 2015, 39,775 students killed themselves. The number of attempted suicides, many unreported, is likely to be much higher” (NCRB, 2015).* These issues can impact not only the affected students themselves, but also those around them (Iarovici, 2014; Kay & Schwartz, 2010). Peers, faculty, and staff can all be impacted by the presence of untreated mental health issues (Eisenberg, Golberstein, & Hunt 2009). If these issues are not addressed, student retention, persistence, and achievement are at risk (Hartley, 2010). Mental health issues can also adversely affect social connections (Belch, 2011). Stress, depression and anxiety are the mental health issues most commonly accounted by college and university students (ACHA, 2013; Gallagher, 2013). In the topic of mental health there are no much studies among university students. So there is a need for this present study to get a complete understanding of the mental health of university students.

2. LITERATURES RELATED TO MENTAL HEALTH OF UNIVERSITY STUDENTS

The changeover from being a childlike secondary school student to being a university student is an exceptionally difficult or unpleasant. University students are at danger for mental health disorders around the world (Corley, 2013). Contrasted with the all inclusive community MacKean (2011) and Gallagher (2008) demonstrated that university students have expanded mental health problems, for example, stress, anxiety, suicides, psychosis, depression, alcohol addictions and utilization of psychiatric drugs, and other endless chronic mental issue. Studies have point out that female students in the first year of their course are highly susceptible to emotional and mental health problems than their counterpart males (Field, Diego, Pelaez, Deeds, & Delgado, 2012; Price, McLeod, Gleich, & Hand, 2006).

According to Storrie, Ahern, and Tuckett (2010), *“given the global prevalence and burden of mental illness, it is likely there would be a significant number of students with emotional problems enrolled in university both with a formal diagnosis and also with no formal diagnosis but with disabling symptoms”.*

A study by MacKean (2011) found the unfavorable mental health outcomes in university students, in light of the fact that they were presented two distinct wellsprings of transitional stressors, i) stress transferred to the move from youth to adulthood and ii) stress identified with the move from understudy of secondary school to university. Another study by Kessler, Bergland, Demler, Jin, and Walters (2005), supporting the previous study that university students are more at danger for the improvement of mental illness. Moreover, there is evidence that the mental wellbeing of university students are adversely impacted by academic institutional elements that for the most part present inside of that academic environment.

For instance, an increment in stressful events such as failed in examination, or financial issues and strange environments particularly for first year students may result in the development of mental side effects (Corley, 2013; Hicks & Heastie, 2008; Lund, Reider, Whiting & Prichard, 2010; Reifler, 2006). Verger et al. (2009) established that the first-year students are more at risk to elevated levels of stress because they often have poor coping capacity and absence of self-rule when contrasted with students in consequent years of study. The stress and anxiety experienced by first-year students additionally rises to be affected by absence of social support, the isolative way of the university environment. Thus helplessness to adjust appropriately to the anxieties and stresses related to academic demands and desires, and in the end development of mental health problems (Chen, Wong, Ran, & Gilson, 2009; Verger et al., 2009).

To manage stressors inadequate coping strategies were used by many university students. According to Burris, Brechtin, Salsman, and Carlson (2009) a significant number of university students use addictive substances to adapt with academic or environmental stressors. This supposition has been bolstered by Hughes (2012), who ascertains alcohol utilization was the peak during the early part of the first semesters, and decline into the second semesters. Besides, students use tobacco to adapt to obscure stressors within the scholastic environment (Samouilhan & Seabi, 2010; Su, Buys, Stewart, Shum, & Farquhar, 2011). Hamdan and Marmash (2007) found that university students' tobacco use behavior was identifies

interest in life, and failure to develop positive behaviors. Expanded number of self-destructive thoughts and behaviors, depression and feelings of over fatigue and anger among university students were aftereffects of substance utilization (Lund, Reider, Whiting, & Prichard, 2010; Skala et al., 2012).

Yaghoob, Mohmmad, and Khalil (2014) stated that *“Mental Health of university students is the basis for cultivating talents with overall qualities and a historic task of higher education”*. They clarified the concept of psychological wellness and the significance of progressing of the university students, analyzed the current condition of psychological issues. The sample of 289 students (133 girls and 156 boys) was assessed using General Health Questionnaire (GHQ28). 37.37% of the students were suspected of having mental disorders and related issues. Male students endured more symptoms of mental disorders when contrast with their counterparts females. Elements are adding to mental issue were environment, absence of social support, years of age and thinking about future carrier.

Amir, Karimib, and Alireza (2012) stated that *“Students are the most intelligent and talented individuals of society and undoubtedly, their physical and mental health play an important role in growth and the dynamics of society”*. They examined the better mental health status of freshmen university's students. 32% of students were assumed mentally ill. In addition coping mechanism and mental health had a direct and significant link with the rate of suicidal risk and the avoidance stresses and excitement oriented had significant adverse association with the problem oriented method and social support. Further findings revealed that the variables mental health disorders, danger of suicide, social support, and drug misuse had an opposite relationship with benefitting from the religious convictions. Further these variables had a direct link with the coping strategy taking into account on problem orientation and problem solving.

Stallman (2010) studied the university students' psychological distress in two large Australian universities. The assessed predominance of 19.2% of students had mental health troubles and subsyndromal symptoms were 67.4%. These rates were fundamentally privileged than the general population. Psychological sufferings were connected with unfulfilled potential or lack of ability. Full-time students, financial problems, female gender, in a consequent year of their degree and students are in the age ranges from 18 to 34 were the predictive variables for psychological distress. Furthermore this study concluded, university students are vulnerable to mental as well as emotional problems and universal early interventions may prevent the onset of severe mental illness.

Additionally a study by Adlaf, Gliksman, Demers, & Newton-Taylor (2001), showed female students (35%) had elevated psychological distress than their counterpart males (23.6%). A prevalence of 30% of 7,526 university students had elevated psychological distress in Canada. Contrasted with information from the overall public in Canada, the recurrence of raised mental troubles was altogether more and almost the twofold of general population.

Nasrin, Mohsen, Reza, and Shabnam (2010) explored the connections between mental health, self-destructive thoughts, depression, anxiety, resiliency and daily hassles among university students. Mental health, Anxiety, depression, and daily hassles had a positive association with self-destructive thoughts. Resiliency had a negative connection with self-destructive thoughts. Further result revealed daily hassles, mental health, depression, anxiety and resiliency were the causative variables could anticipate 21% of self-destructive thoughts. In addition mental health issues, resiliency, daily hassles and psychological problems are assuming an essential part in self-destructive thoughts.

Abediana, Nasrin, and Hamid (2011) compared mental health status of 5986 Freshmen University students (entered the year 2004 and 2006) in University of Tehran. Mental health and social support had positive relationship. The students were in year 2004 had lesser degrees of this relationship when compare to students in 2006 year. Students are from sufficient family support foundation would do well to emotional wellness and had better mental health. The support from family assumed an essential part in students mental health when contrast with friends and teachers support. Mental health and suicidal risk had negative association and there are no differences in students in both academic years. In addition low or absence of social support was said as one of the directing components in raises the danger of suicide and substance misuse.

Tavolacci, Ladner, Grigioni, Richard, and Dechelotte (2013) highlighted the incidence of substance utilization and behavioral addictions and its association with perceived stress among 1876 university students. A positive connection between female gender, consistent smokers and alcohol utilization, risk of cyber addiction, and particularly dietary issues and perceived stress were observed. Perceived stress on the other hand, was not significantly linked to the academic core curriculum, and utilization of alcohol or other addictive substances. Further study found perceived stress had a noteworthy negative relationship with physical activity; the students with more bodily activity were less inclined to report stress.

Study concluded that perceived stress was additionally coupled with new-fangled risks for example cyber addiction and dietary problems or eating disorders with well-known hazards of alcohol utilization.

In another study by Stecker (2004) examined stress and psychological well-being of 644 students furthermore assessed academic stress, health, psychosocial, and other external stresses among post graduate and professional students in USA. 35% of post graduate students approximately, irrespective of school and gender had severe depressive manifestations. Around 25% of students reported looked for on campus mental health services while about 19% of students showed readiness to accept for such good mental health services did not do as such for a series of reasons, such as shame, time constraints and confidentiality concerns. To cope with stress, 19% graduate students reported utilization of illegal drugs and 80% utilized alcohol.

Holm, Hofmann, Sperth, and Funke (2009) carried out a study in University of Heidelberg to indicate which disorders and psychological issues or problems were more often occur in students who counseled a psychotherapeutic center. Around 60-65% of the students experienced clinically relevant psychological disorders. Exam anxiety was the most widespread issue in student population followed by depression and psychosomatic manifestations.

Bailer, Schwarz, Witthoft, Rist and Stubinger, (2008) gave predominance rates to various mental disorders such as affective, anxiety, somatoform, dietary issues, and alcohol utilization problems among 1600 university students in German. 30.2% of students had alcohol syndrome and it was observed most common among university students followed by 8.1%, 9.1%, 6.0%, and 4.2% had depressive syndromes, somatoform syndrome, depression and hypochondriasis respectively. All above said disorders, except the alcohol syndrome and dietary disorder, were accompanied by functional disabilities. Study considered these findings relatively alarming and demonstrating an extensive requirement for both psychological corrective or curative and preventive interventions in German university students.

Furthermore Benton et al. (2003) found 13,257 students looking for psychological help in an American university counseling center over a period of 13 years. In addition an increase in seriousness of the issues treated at the center. The number of students looking for help for depressive disorder expanded to 42% from 21% and the anxiety rates expanded to 63% from 36% over the stretch of time. And around 3% of students with constant psychological issues, yet, were fairly constant. A marked elevation was noted in the percent of students looking for guiding and counseling for problems related to depression, developmental and situational problems, anxiety, academic skills, grief, and drug utilization.

Akther, Cairns, Massfeller, and Deeth (2010) observed that students search for counseling or psychotherapy service for the most recurrent mental health problems in a large Canadian university were relationship concerns, stress/ nervousness, depression, scholastic, and future career. They additionally investigated academic stress and mental well-being and its association with acculturative stress among 1214 international and Germany students who were essentially selected in the mental health support centers of university student's issues in everywhere throughout the nation. Years of age, native, German language proficiency, and earlier voyaging knowledge as the main indicators of acculturative stress. On the whole, extreme levels of anxiety was experienced and reported by a large portion of the aggregate sample of university students, while almost one quarter of the aggregate students were had higher levels of depression. Socioeconomic and demographic variables and adapting styles significantly anticipated academic stress and psychological well-being among both groups of students.

A study by Pidgeon et al. (2014) examined the attributes of 214 university students from USA, Australia, and Hong Kong universities reported elevated and lower resilience for elucidating its clinical implications in preventing mental health issues or problems, concentrating on possibly changeable psychosocial factors. The difference between the low and high resilience university students represented a significant extent of 36% with perceived social support, university campus connectedness, and mental distress. University students with less significant resilience reported altogether lower levels of university campus connectedness, perceived social support, and elevated levels of mental distress.

Chen, Wong, Ran and Gilson (2009) portrayed the relationship between stress, emotional well-being and coping strategy among a group of students from 6 universities. Stress and emotional well-being had a negative association and positive coping strategy had significant positive buffering consequences for psychological and emotional health problems. Further the male university students accounted more elevated amount of stress, poorer psychological and emotional well-being, and less slant towards utilizing positive coping strategies when contrast with their counterparts.

University students resting and sleeping time is often extremely constrained, thus contrarily impact their mental health status and psychological well-being. Lund, Reider, Prichard, and Whiting, (2010) highlighted that the sleep patterns

changed by the raised levels of stress among university students. In addition to students in second, third and fourth year of the course, the first year students were losing more than two hours of rest a night amid weekends. Field, Diego, Pelaez, Deeds and Delgado (2012) presumed that need or lacking rest prompted to increasing amounts of alcohol utilization in university student. Furthermore, students utilized alcohol and other drugs to enhance sleep and battle feelings of fatigue and perform better scholastically. Chronic risky sleeps prompted the advancement of mental health problems such as depression, increased agitation, weakness and adversely decrease students scholastic and social functioning.

According to the National Center for Educational Statistics (NCES) (2014), females account for the majority of enrolled college and university students. College women are more likely to present for mental health treatment than males (Iarovici, 2014). Mirroring the general adult population, college women are more likely than men to have anxiety (Eisenberg, Gollust, Golberstein, & Hefner, 2007) and depression (Iarovici, 2014). Women have significantly higher than men on depression, general and social anxiety, and eating concerns (Center for Collegiate Mental Health, 2013). Among students who abuse alcohol, it is more common for women to present with a pre-existing mood disorder (Iarovici, 2014).

3. SUMMARY AND CONCLUSION

Evidence clearly indicates that university students' have poor mental health irrespective of Gender, Age, Academic year level, Place of living and period of years will leads to deprived performance and thereby it might affect the future carrier of the university students, also it affects students in terms of becoming victim of depression and developing suicidal ideation. Globally up to 15% of all recognized diseases are formed by mental health disorders (Sakellari, Leino, & Kalokerinou, 2011). World Health Organization (WHO, 2014) recently reported that more than 450 million individuals live with a mental disorder. As indicated by WHO poor mental health is connected with specific issues, for example, "quick social change, unpleasant or stressful work conditions, gender discrimination, social avoidance, and unhealthy way of life, risks of violence and physical ill-health, and human rights violations". India ranked higher in Emerging Economies University Rankings of Times Higher Education (THE) as of contested with 43 nations among 4 continents with forty nine universities on the list, contrasted with forty two in 2018. The 2019 ranking consisted of about 450 universities raised from 378 in 2018 with twenty five universities in the top 200 universities, an increase from seventeen last year (THE, 2019). Thus an increase in the enrollment of students in higher studies has also seen in a substantial increase in mental health issues. At present, enormous resources are invested in education, especially for higher education. Students represent the nation's investment for the future prospects. Their mental and physical well-being is crucial not only for their own development, but also for contributing to the benefit of the nation. There is research evidence of distress or psychological problems in the university context. University students need to cope with psychological and psychosocial changes that are connected to the development of an autonomous personal life and additionally they have to cope with the academic and social demands that they encounter in university studies and in their preparation for professional careers. Therefore, the period of University education is regarded by many as important for the development of students' whole life. Mental health is considered as one of the needed factors for general health. There are several factors that could be possible predictors of students' life satisfaction, their mental health statues are very important. Many previous studies showed that mental health has effect on life satisfaction. The results of studies say that individuals who have better mental health they are more satisfied from their life (WHO, 2013). Given the above situation, identification of nature and extend of the problem would be helpful to take measures to improve mental health and providing psychological support services to the needy students. Thus the severity of this problem on university campus cannot be underestimated. Now time has come to look at the mental health issue of the students with right spirit and arrange mental health support services with qualified and trained mental health professionals.

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