
Current State of College & Student Mental Health

January 2023



NASPA®

Student Affairs Administrators
in Higher Education

Uwill®

Student Mental Health & Wellness

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FOREWORD

We are pleased to share with you the findings from the *Current State of College & Student Mental Health*, a much-warranted survey given the multitude of factors affecting student mental health at colleges across the country and the continued growth in acceptance of mental health and wellness support for students.

Through Uwill's partnership with NASPA, we surveyed student affairs professionals representing more than 150,000 students nationwide to bring you these thought-provoking, informative results.

The findings of our research elicit mixed emotions from college leaders, students, and providers. The stigma associated with students receiving therapy has decreased significantly, giving all members of the campus community reason to celebrate, however, this has led to unprecedented pressure on support systems for both students and staff. Similarly, while many colleges increased their financial commitment to student mental health over the past year, a greater number indicate the need for greater spend moving forward. Despite the passion and impressive efforts of campus leadership and counselors, student affairs professionals suggest that the most important action to improve college mental health involves building relationships with third-party solutions and a greater focus on teletherapy.

As a leader in the field of student mental health and wellness, Uwill is proud of its continued partnership with NASPA and contributions to this year's *Current State of College & Student Mental Health*. We are hopeful that this information proves to be a reference as you further your campus efforts in this highly important area.

MICHAEL LONDON

Chief Executive Officer
Uwill

INTRODUCTION

In September 2022, NASPA and Uwill surveyed NASPA members to gain perspective on the *Current State of College & Student Mental Health*. The results provide a concerning look at the state of campus mental health, as assessed by campus leaders representing more than 150,000 college students at 100+ institutions.

This report provides a summary of findings as well as the survey data included in the appendix.

Our LEADERS



**KEVIN
KRUGER**

President
NASPA



College leaders increasingly acknowledge the critical need to address mental health on campus, especially as more students open up about their struggles with issues like anxiety and depression. Demand for counseling and therapy services is outpacing capacity at many institutions, and our survey findings highlight the fact that more student affairs professionals see a real need to increase investments in mental health and wellness support.



**MICHAEL
LONDON**

Chief Executive Officer
Uwill



Experts recognize the escalating mental health crisis on college campuses – and this crisis will continue to worsen until institutions take the steps necessary to ensure students have immediate and comprehensive counseling and wellness support. While a growing number of colleges are increasing their investment in student mental health, the data confirms more effort is needed.

Current State of College & Student Mental Health

How would you describe the trajectory of campus mental health over the past year?

72% said overall trajectory of campus mental health (students, faculty, staff) worsened during past year, with only 11% claiming campus mental health has improved.

(Table C1 in Appendix C)



The NASPA/Uwill survey data illustrate the very real challenges today's universities are confronting as they address students' mental health needs. The results show that institutional leaders are prioritizing student mental health and that collaborating with partner entities will be increasingly important as they build additional capacity to strengthen student mental health services.

DANIEL J. HURLEY

Chief Executive Officer
Michigan Association of State Universities



How would you rank your institution's strength on the below mental health-related factors?

(Table C2 in Appendix C)

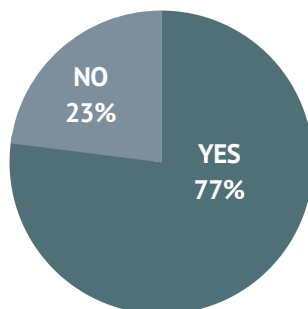
87%

believe president/provost prioritize campus mental health

- 10% said that diversity among counselors is extremely strong
- 4% of leaders say the availability of mental health services for students is extremely strong

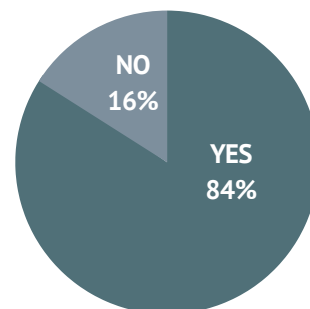
Has your campus increased its financial commitment to mental health services in the past year?

(Table C5 in Appendix C)



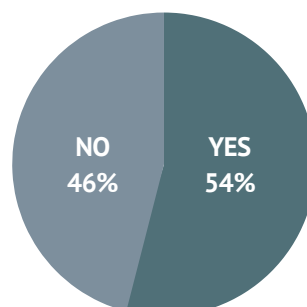
Do you feel your campus should increase its financial commitment to mental health services this year?

(Table C6 in Appendix C)



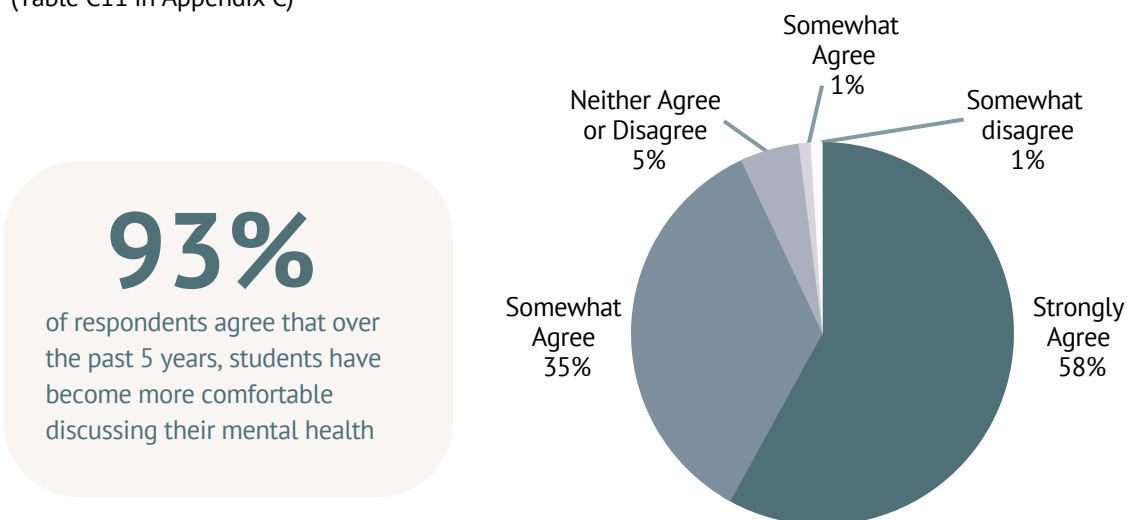
Did your campus make use of federal or state Covid-19 relief funding to support mental health?

(Table C7 in Appendix C)



**How strongly do you agree with the following statement?
Over the past 5 years, students have become more comfortable
discussing their mental health.**

(Table C11 in Appendix C)



The mental health needs of individuals are increasingly receiving the attention they deserve. Declines in a student's mental health may have propagating effects that impact their academic performance, readiness for work, their families, and more. Acknowledging mental health and providing support to students, and the faculty and staff that support them, is imperative to ensuring that individuals persist in their academic endeavors and have pathways to opportunity.

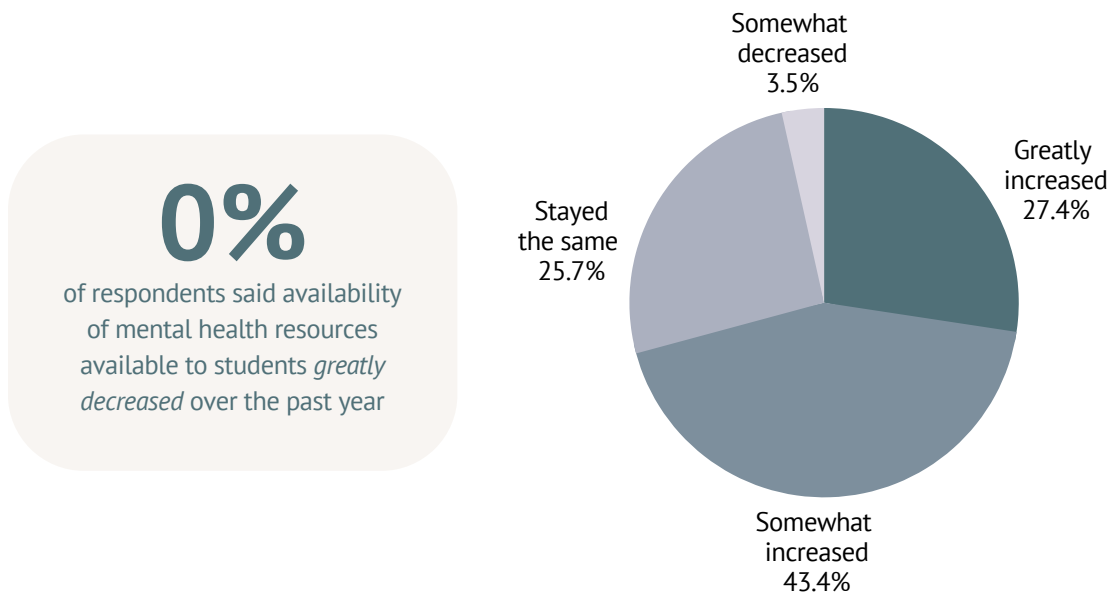
SCOTT PULSIPHER

President
Western Governors University



How has the availability of mental health resources available to students changed over the past year?

(Table C17 in Appendix C)



There is clear agreement that students are now more comfortable talking about their mental health and seeking support to help them manage their experiences. However, available resources seem to be completely at odds with this finding. This discrepancy creates a bottleneck to access, which leaves students waiting while their mental health issues worsen.

ERIN ANDREWS, LMHC

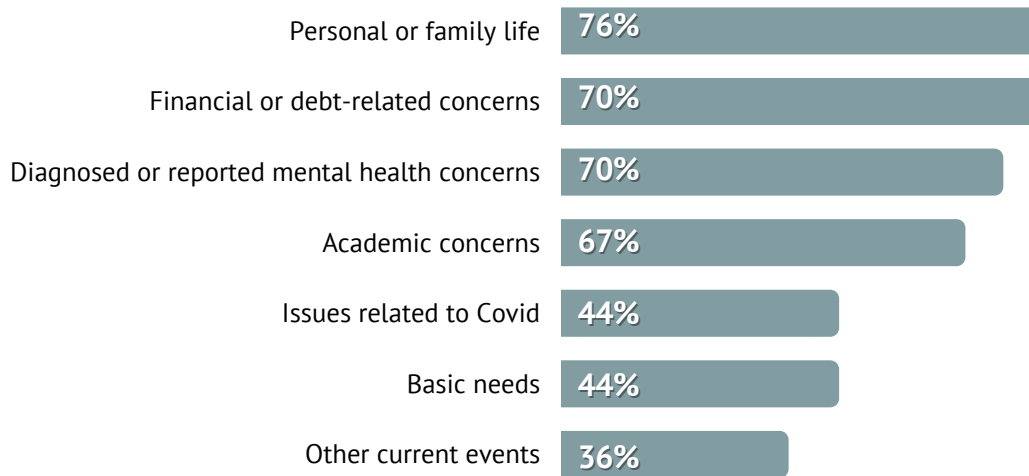
Director, Clinical Affairs
Uwill



Student Mental Health & Wellness

Which of the following were the most significant causes of distress for students during the most recent school year?

(Table C3 in Appendix C)



We know just how much students today need and deserve flexible mental health support, so we've made access to therapy top priority at Bay Path. We partnered with a teletherapy provider to expand access to a broad and diverse network of counselors and to make counseling available whenever and wherever our students need it. I hope other campuses will make similar investments to give their students the tools they need to succeed.

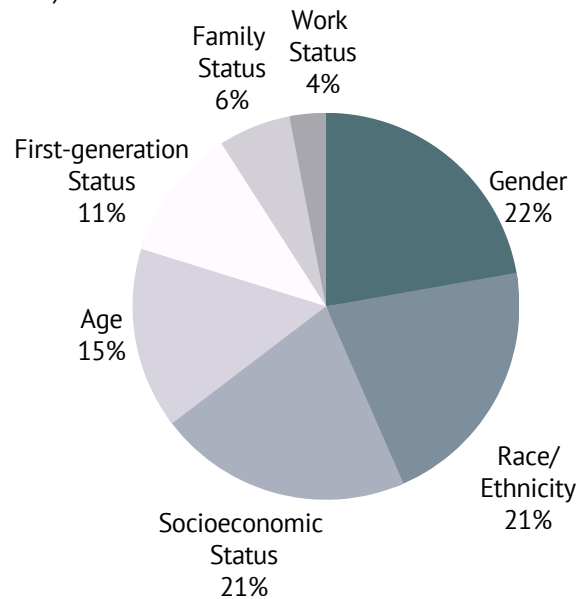
SANDRA J. DORAN, J.D.

President
Bay Path University



Which demographic factors do you think make the greatest impact on a student's likelihood of seeking mental health support?

(Table C12 in Appendix C)



“

Mental health issues are on the rise with faculty, staff, and students, particularly in communities that may not traditionally have had access to the support resources they need or deserve. Hopefully, with this information, institutions and leaders will take action to ensure more resources will be available for all.

DR. SONYA CLYBURN

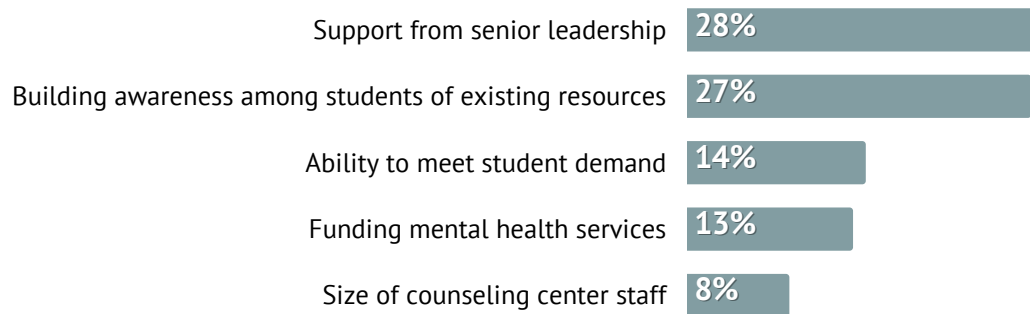
Director

Morgan State University Counseling Center



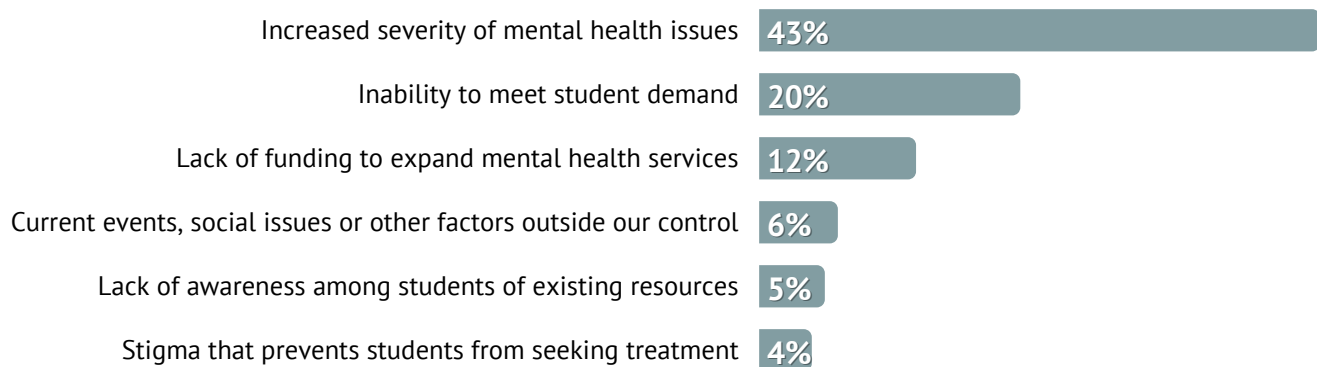
What would you describe as your institution's single greatest *strength* related to supporting campus mental health?

(Table C8 in Appendix C)



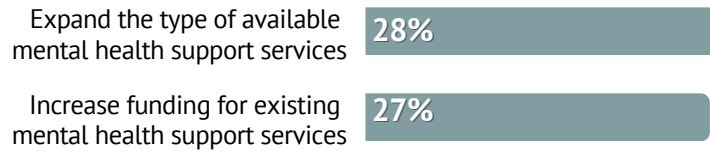
What would you describe as your institution's single greatest *challenge* related to improving the state of campus mental health?

(Table C9 in Appendix C)



What do you see as the top two most important actions that could be taken to improve the state of campus mental health?

(Table C10 in Appendix C)



What makes the findings of this research stand out is the focus on strengths of our systems. Mental health is too often looked at with only a lens of deficits, and now we have some examples of where campus efforts are strong to replicate and invest more in for successful services and better design.

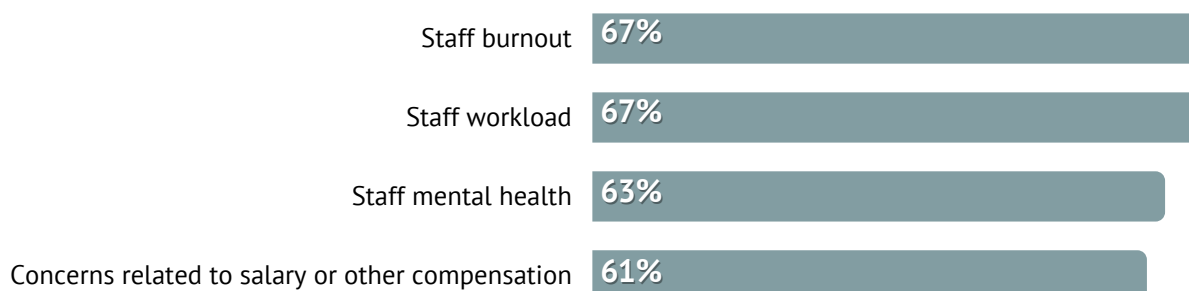
DAVID M. ARNOLD

Assistant Vice President for Health, Safety, and Well-being Initiatives
Incoming Chair for the Higher Education Mental Health Alliance (HEMHA)
NASPA



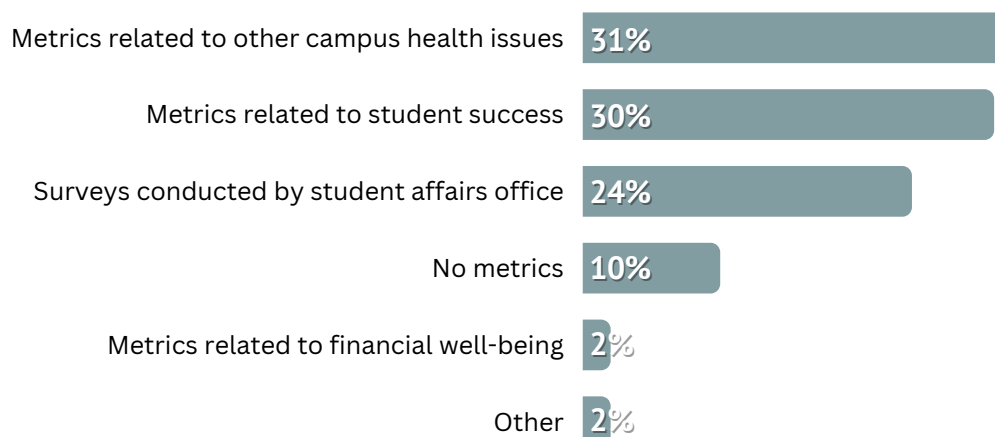
How have the following issues related to your institution's mental health staff changed over the past year?

(Table C4 in Appendix C)



Does your institution have quantitative metrics to determine the success of campus mental health initiatives? If so, what are they?

(Table C18 in Appendix C)



Today's young adults are dealing with more stress and pressure than ever before. From my own experience, therapy taught me that it was okay to tell your truth and not feel ashamed. If more kids had access to counseling and related mental health support, it could help relieve a lot of the load they are carrying. This data should tell us all that we have got to get more serious about ensuring every college campus offers the resources and mental health support students need.

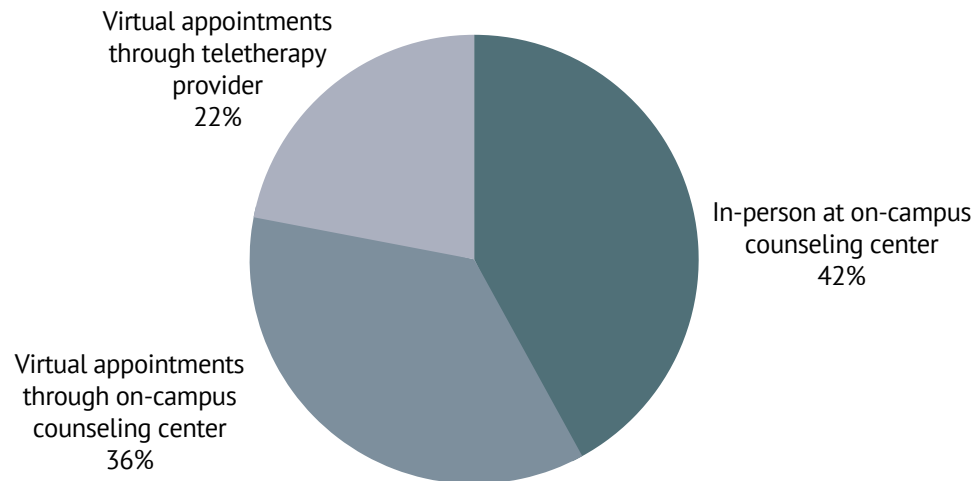
DARRYL "DMC" MCDANIELS

Hip-Hop Legend

Mental Health Advocate

Through what methods can students access mental health support at your institution?

(Table C13 in Appendix C)



Appendix A: **SURVEY METHODOLOGY**

The survey was administered in Qualtrics and invitation emails were sent to the survey audience by NASPA's communications team. The email invitations were sent on September 26, 2022, with reminders sent on October 3, 2022.

The survey was sent to current NASPA members. Membership status was determined as of September 19, 2022. The survey audience included vice presidents of student affairs and heads of counseling centers who consented in their online member profile to receive communications from NASPA. Professionals affiliated with corporations and nonprofit organizations, professionals based outside the United States, honorary members, and emeritus members were not included in the survey audience.

After the survey closed on October 10, 2022, the survey data was analyzed. A total of 131 individuals responded to the survey.

Please see Appendix B for respondent characteristics and Appendix C for results of the quantitative survey questions.

Appendix B: CHARACTERISTICS OF RESPONDENTS

Average age	50 years old
Average tenure of students affairs employment	24 years
Education level/highest degree earned	71% Doctorate 26% Master's 3% Bachelor
Average student full-time enrollment of institution	12,333 students

Appendix C: SURVEY RESULTS

TABLE C1:
How would you describe the trajectory of campus mental health over the past year?

	Much worse	Somewhat worse	Stayed the same	Somewhat better	Much better
Overall	7.2%	64.9%	17.1%	10.8%	0.0%
Students	15.9%	48.7%	16.8%	13.3%	5.3%
Faculty	8.0%	53.6%	30.4%	7.1%	0.9%
Staff	12.4%	57.5%	20.4%	9.7%	0.0%

TABLE C2:**How would you rank your institution's strength on the below mental health-related factors?**

	Extremely strong	Very strong	Somewhat strong	Somewhat weak	Very weak	Extremely weak
Capacity to respond to students' mental health needs	2.7%	38%	41.6%	13.3%	3.5%	0.9%
Availability of mental health services for students	4.4%	40.7%	33.6%	15.9%	4.4%	0.9%
Representative diversity (gender, ethnicity) among counselors	9.7%	8.8%	29.2%	26.5%	18.6%	7.1%
Executive (e.g., president or provost-level) buy-in on mental health as a priority issue	33.6%	30.1%	23.0%	8.8%	4.4%	0.0%

TABLE C3:

Which of the following were the most significant causes of distress for students during the most recent school year?

	Caused extreme stress	Caused significant stress	Caused some stress	Caused little to no stress
Diagnosed and reported mental health concerns	13.3%	56.6%	30.1%	0.0%
Basic needs insecurity	8.8%	34.5%	46.9%	9.7%
Issues related to Covid-19	9.0%	35.1%	48.6%	7.2%
Other current events (e.g., related to politics or other developments)	4.4%	31.9%	56.6%	7.1%
Personal or family life	10.6%	65.5%	23.9%	0.0%
Academic concerns	8.8%	57.5%	32.7%	0.9%
Financial or debt-related concerns	21.2%	54.9%	22.1%	1.8%
Other*	50.0%	30.0%	10.0%	10.0%

***Other noted as:**

- Lack of emotional regulation skills
- Anxiety issues
- Natural disasters
- Children/parenting
- Undiagnosed mental health concerns
- International travel
- Death of student
- Student deaths/suicides

TABLE C4:

How have the following issues related to your institution's mental health staff changed over the past year?

	Much worse	Somewhat worse	About the same	Somewhat better	Much better
Staff workload	14.5%	52.7%	19.1%	12.7%	0.9%
Staff burnout	24.5%	42.7%	18.2%	14.5%	0.0%
Staff mental health	9.1%	53.6%	26.4%	10.9%	0.0%
Concerns related to salary or other compensation	25.5%	35.5%	28.2%	7.3%	3.6%

TABLE C5:

Has your campus increased its financial commitment to mental health services in the past year (e.g., increasing student affairs/counseling staff, using/creating well-being programs)?

	%
Yes	77.0%
No	23.0%

TABLE C6:

Do you feel your campus should increase its financial commitment to mental health services this year (e.g., increasing student affairs/counseling staff, using/creating well-being programs)?

	%
Yes	83.9%
No	16.1%

TABLE C7:

Did your campus make use of federal or state Covid-19 relief funding to support mental health?

	%
Yes	53.6%
No	46.4%

TABLE C8:

What would you describe as your institution's single greatest *strength* related to supporting campus mental health?

	%
Ability to meet student demand	14.2%
Size of counseling center staff	8.0%
Support from senior leadership	28.3%
Funding mental health services	13.3%
Building awareness among students of existing resources	27.4%
Other*	8.8%

***Other noted as:**

- Hiring an additional counselor
- Adding telehealth options
- Created a broader campus support network
- The people doing the work
- Diversity and Availability of off-campus referrals (other health care professionals)
- Attention to prevention, education, intervention and treatment as a part of an overall wellbeing initiative
- Staff commitment to students
- Student support for mental health services
- SA leadership support
- Skills of counseling center staff

TABLE C9:

What would you describe as your institution's single greatest *challenge* related to improving the state of campus mental health?

	%
Inability to meet student demand	20.4%
Increased severity of mental health issues	43.4%
Lack of support from senior leadership	0.0%
Lack of funding to expand mental health services	12.4%
Lack of awareness among students of existing resources	5.3%
Stigma that prevents students from seeking treatment	4.4%
Current events, social issues or other factors outside our control	6.2%
Other*	8.0%

***Other noted as:**

- Lack of institutional/presidential commitment
- Being able to help long term or when students drop out
- Misunderstanding that only counselors can address mental health concerns and/or that faculty play a role in creating them
- Lack of finding people who want to work in the field
- Campus-wide ownership for attending to students' mental health
- Rural location, lack of access to county and state resources to support our operation
- Lack of community referrals and resources for extended mental health care, inpatient or outpatient treatment, psychiatry
- Increasing portion of the population with mental health issues
- Hiring

TABLE C10:

What do you see as the most important action that could be taken to improve the state of campus mental health?

	%
Increase funding for existing mental health support services	22.1%
Increase the number of on-campus counselors available to students	16.9%
Expand the type of available mental health support services (e.g., by offering teletherapy or other services)	27.4%
Boost awareness of existing mental health resources through outreach or on-campus advertising campaigns	15.0%
Remove stigma around counseling among the student body	7.1%
Other*	11.5%

***Other noted as:**

- Increased/improved Facilities resources
- Integration of clinical and especially non-clinical resources
- Ongoing care for long term
- Helping the entire campus community to understand that we all play a role and cannot simply rely on the counseling center
- Remove stigma about the resources available.
- Culturally responsive care for students
- Licensing in my state (California) permits remote/tele/virtual appointments only if the student/client is located within the state - interstate cooperation for licensing requirements would help
- Overnight counselor on campus
- More focus on prevention and intervention
- Increased state and local investment in community services, increase mental health bed count in the state
- We have the budget, but need permission to raise salaries
- Availability of and access to off campus resources to enhance and complement on campus services
- Skill building and culture change

STUDENT SENTIMENT TOWARD THERAPY:

TABLE C11:

How strongly do you agree with the following statement: Over the past five years, students have become more comfortable discussing their mental health.

	%
Strongly agree	57.5%
Somewhat agree	35.4%
Neither agree or disagree	5.3%
Somewhat disagree	0.9%
Strongly disagree	0.9%

TALBLE C12:

Which demographic factors do you think make the greatest impact on a student's likelihood of seeking mental health support?

	%
Age	15.4%
Gender	21.9%
Race/ethnicity	20.9%
First-generation status	11.4%
Family status (married, with children, etc.)	6.0%
Socioeconomic status	20.9%
Work status	3.5%

COUNSELING LOGISTICS:

TABLE C13:

Through what methods can students access mental health support at your institution?

	%
In-person at on-campus counseling center	42.0%
Virtual appointments through on-campus counseling center	36.2%
Virtual appointments through teletherapy provider	21.8%

TABLE C14:

At which hours of the day can students access mental health support through a campus resource? *Campus Counseling Center*

	%
Midnight - 3am	0.3%
3am - 6am	0.3%
6am - 9am	7.4%
9am - 12pm	31.4%
12pm - 3pm	31.1%
3pm - 6pm	26.9%
6pm - 9pm	2.1%
9pm - Midnight	0.6%

TABLE C15:

At which hours of the day can students access mental health support through a campus resource? *Virtual appointment through an on-campus counseling center*

	%
Midnight - 3am	2.1%
3am - 6am	2.1%
6am - 9am	8.9%
9am - 12pm	26.7%
12pm - 3pm	26.7%
3pm - 6pm	24.8%
6pm - 9pm	5.8%
9pm - Midnight	2.8%

TABLE C16:

At which hours of the day can students access mental health support through a campus resource? *Virtual appointments through teletherapy provider*

	%
Midnight - 3am	10.8%
3am - 6am	12.0%
6am - 9am	12.8%
9am - 12pm	13.4%
12pm - 3pm	13.4%
3pm - 6pm	13.7%
6pm - 9pm	12.8%
9pm - Midnight	11.1%

TABLE C17:

How has the availability of mental health resources available to students changed over the past year?

	%
Greatly increased	27.4%
Somewhat increased	43.4%
Stayed the same	25.7%
Somewhat decreased	3.5%
Greatly decreased	0.0%

In what way did the variety of resources increase over the past year?

- Increase of staff and additional resource through campus communications
- Hired 5 counselors (increase of 25%)
- all resources across the board - in-person, community referral coordination tele-therapy, etc.
- moved to a step care model
- # of counsellors and diversity of counsellors
- We were able to institute a mental health fee which infused resources across the wellbeing spectrum
- increase in the following -- in-person, teletherapy, online resources, training, peer groups
- Tele-health added
- change in center model to see more students with short wait times, added ProtoCALL
- Added 24/7 telehealth
- Telehealth and added mental health counselor
- Telehealth increased both availability of services and increased the diversity of counselors available
- Teletherapy added
- Added additional counselors and case management staff
- Expanded tele-therapy offerings
- Access to services through community partner
- Added telehealth
- more counselors and Telehealth resources
- 3 additional counselors paid for by HEERF funds
- we contracted with a virtual tele mental health provider
- We added telehealth counseling and psychiatric services; added two new staff therapist positions
- additional therapists, increased drop-in sessions, increase in teletherapy
- We are in the process of adding in virtual counseling services through a 3rd party vendor to provide services 24/7.
- Teletherapy, additional counselors, outsourced services
- Additional counseling staff, afterhours access to counselors through telehealth, additional groups, establishment of a new Center for Well-being (physical space and also fully staffed), Case manager position
- More staff
- More telehealth options and crisis counseling.
- Entered partnership with third party provider of 24/7 support
- Telehealth/teletherapy

TABLE C18:

Does your institution have quantitative metrics to determine the success of campus mental health initiatives? If so, what are they?

	%
No metrics	10.0%
Metrics related to student success (e.g., persistence, retention, completion)	30.3%
Metrics related to financial well-being	2.0%
Metrics related to other campus health issues (e.g., measuring the increase/decrease in hospital visits or psychiatric emergencies)	30.8%
Surveys conducted by student affairs office	24.4%
Other*	2.5%

***Other noted as:**

- Campus health and wellbeing assessment , counseling center assessment
- The JED Foundation
- Surveys by individual departments
- NCHA, Healthy Minds surveys
- Access stats, caseloads, AOC calls
- Usage rates of online step-care tools
- ACHA-NCHA, HMS

Thank You

For more information, visit
uwill.com/NASPA-college-mental-health-survey

