Emotional wellbeing of first year university students: Critical for determining future academic success.

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Stressors and challenges faced by first year university students were investigated with the aims being to identify issues that may impact on emotional wellbeing of students, and also to assess whether issues impacting on emotional wellbeing affect academic performance. A sample of 181 students at an Australian regional university voluntarily completed a self report purpose made questionnaire. Results indicated that mental health problems and negative experiences for female students were strong predictors of academic difficulties, but similar findings were not found for male students. In male students, positive social interaction predicted less academic difficulties. These unusual findings are discussed in relation to strategy development for support structures provided by tertiary institutions.

First year university students have historically faced a wide range of stressors and challenges whilst embracing new direction in their lives. The complexity of these stressors, however, appears to be ballooning as we enter a new millennium. A number of studies suggest that higher rates of psychological morbidity are being recorded among first year university students throughout the world. Research by Cooke, Bewick, Barkham, Bradley & Audin (2006) in the United Kingdom, identified increased financial and academic pressure as the basis for increased levels of anxiety in first year university students, who they suggest rate far worse than the general population in measures of psychological well-being.

Whilst academic performance is highlighted during this transitional period, Wong, Cheung, Chan, Ma & Tang (2006) suggest many students in Hong Kong are also folding under the pressure and expectations. Students were identified as particularly vulnerable to mental health issues, with rates of depression measured at 20.9% (n=1657) and anxiety at 41.2% (n=3262). The impact of such findings is expected to be seen in poorer academic attainment and quality of life. Another recent study by Price, McLeod, Gleich & Hand (2006) at a Canadian university, suggests that 19% of female students and 13% of male students in their study meet the DSM IV (APA, 2000) criteria for a major anxiety disorder, while 14% of female students and 7% of male students meet the DSM IV criteria for a major depressive disorder. The prevalence of high rates of depression and anxiety identified in these studies are indeed a basis for concern.

The wide spread heavy use of alcohol by university students has also been reported by many studies (Palombi (2006); Smart & Ogborne (2000)), as well as the study by Orford, Krishnan, Balaam, Everitt and Van Der Graff (2004) from the University of Birmingham, that indicated over 20% of student participants experienced serious levels of depression resulting from their levels of heavy drinking, identified by them as being necessary for social functioning. Illicit

drug use is also increasing at a rapid rate with Strote, Lee & Weschler (2002) noting 69% increase in ecstasy use in a 2 year period. Arria et al (2008) suggest that illicit drug use frequently commences at university, following student's first exposure to drug availability.

A review of a decade of Australian studies regarding the first year university experience was undertaken in Australia in 2005 by Krause, Hartley, James and McInnis, with findings suggesting that the transition period to university differs for school leavers as opposed to mature age students, in that school leavers experience a more negative transition than their mature age counterparts. The same study also identified the use of the previously non-used term "emotional health" as an important issue for first year students in 2004, with 50% of the review's respondents identifying it as the most important consideration if considering deferring study. Trotter & Roberts (2000) identify student psychological state as strongly associated with attrition from university, while Pitkethly & Prosser (2001) suggest that Australian universities inadequately identify reasons associated with student attrition.

It is argued by Kenny and Rice (1995) that adaptation to university involves a crisis in stress levels due to changes in attachment patterns (Bowlby, 1973) between caregiver and late adolescent student, suggesting that more positive outcomes occur when higher levels of parental support and family cohesiveness occur. This position is strongly supported by Holmbeck, Grayson & Wandrei, (1993). Adams, Berzonsky and Keating (2006) also suggest that values attitudes and expectations of parents and families remain influential to students, even when a family member is not physically present. In addition, supportive, constructive and positive interactions with university staff and other students have been identified by Adams et al (2006) as laying the foundation for psychosocial maturity, moral development and emotional well-being.

A great deal of previous research into the first year university experience has focused on academic success, as well as enhancement of models of learning and teaching. Whilst financial difficulties remain a constant problem for many university students, mental health and emotional well being issues in first year university students, have now been identified at levels much greater than across general populations (Cooke et al, 2006).

The research study builds on research previously presented as a round table discussion paper to the First Year in Higher Education Conference - 2007(App A).It's focus was on discussion of issues and problems relevant to first year university students in the new millennium.

The purpose of the current study is to identify the issues and problems relevant to 21st century tertiary students and whether specific items can be isolated that impact on academic performance. It is expected that there will be a wide range of difficulties identified by the participants that will include serious mental health issues and emotional problems, and that these issues will have a negative impact on academic achievement.

Method

Participants
The participants were 181 first year university students attending a regional university in rural NSW in 2007, who were enrolled in Psychology, Criminal Justice, Policing and Communication Courses. They voluntarily completed and returned the provided self report questionnaire.Some participants received points towards research participation in their course.

Instrument

A structured self administered questionnaire was especially designed for this study based on previous research regarding students experiences in regard to health and wellbeing and student academic lifestyle (Institutional Research - Ohio University (2005). The first part of the questionnaire focused on demographic information while the second part was designed to gain information about participant's actual experiences. One hundred descriptive statements were compiled from a collection of information gathered from FYHE conference (2007), discussion with university counsellors and academic's personal experiences, regarding areas of academic achievement, social interaction and health issues. Participants were required to circle their response on a scale from 1 (strongly disagree), 2 (disagree), 3 (unsure), 4 (agree), to 5 (strongly agree) regarding the relevance of the experiences described in the statements.

Procedure

Questionnaires were distributed on campus by the researcher after personal approaches to groups of students. An Information Sheet describing the purpose of the research as well as information regarding the anonymous nature of the project was included. All research was conducted under the university and APS ethical guidelines.

Results

Table 1 - Overview of principal components factor analysis.

Principal Component Analysis	1	2	3	4
Positive Social Interaction (Percentage of variance: 17.71)				
I found it easy to form new relationships	.744			
My first year was a very positive experience	.725			
I enjoyed the social life	.688			
My daily life was busy and enjoyable	.682			
I made great new friends	.669			
I built trusting relationships with friends	.624			
I know I can trust my new uni friends	.586			
I had a hectic social life	.584			
I was greatly supported by friends	.581			
My living arrangements had a positive effect on me	.539			
I feel confident and positive after my first year	.530			
I was sad when the uni year ended	.518			
I was able to offer emotional support to my friends	.483			
I formed a romantic relationship	.381			
I was keen to have new experiences	.364			
Mental Health Problems (Percentage of variance: 8.60)				
I suffered from Depression		.708		
Difficulty with personal issues impacted negatively on my study		.703		
I was very anxious a lot of the time		.697		
I suffered from anxiety		.680		
The demands of everyday life got me down		.644		
I was really stressed		.641		
I struggled to live one day at a time		.593		
I had family problems outside uni		.586		

Item	Factor 2	Factor 3	Factor 4
I felt overwhelmed by my responsibilities	.584		
I seriously considered leaving uni due to my personal problems	.513		
I felt I experienced an eating disorder	.509		
I approached my lecturer/s about my difficulties	.504		
I experienced personal self harming behaviour	.497		
I visited a doctor on more than 2 occasions for health issues	.435		
I felt I needed help with my problems but didn't seek it	.409		
I felt very isolated from other people	.406		
I suffered from home sickness	.397		
I sought help with my personal problems from the Uni counsellor	.390		
I was preoccupied with body weight and image	.388		
Negative Experiences Problems (Percentage of variance: 5.90)			
I had a problem controlling my alcohol intake		.662	
A romantic relationship ended		.576	
I experienced drugs on campus		.564	
I had an extremely negative sexual experience		.495	
I experienced sexual harassment		.490	
I felt my lecturers cared about me		-.476	
I maintained a strong focus on my study		-.465	
I was self conscious about my appearance		.377	
I experienced poor eating patterns		.374	
I was able to confide in my parents about difficulties		-.362	
I experienced violence		.350	
I experienced racism or prejudice		.340	
Academic Difficulties (Percentage of variance: 3.55)			
I found it very difficult to study			.651
I experienced difficulties doing my assignments			.617
I felt I had a lack of academic skills			.612
My course was too difficult			.604
I had severe problems concentrating			.581
My course was more difficult than I expected			.576
I questioned whether coming to Uni was the right thing for me			.519
I studied successfully in the dorm/ residence			-.496
I maintained a strong focus on my study			-.465
I was disappointed with my academic achievements			.401

Note : Percentage of variances explained are presented in parentheses after the factor label.

Principal components factor analysis was conducted in order to discover the independent dimensions of responses extracted in the data. A varimax rotation was applied in order to maximize the variance and increase interpretability of the data. Four factor components were extracted which explained 39% of the variance. Only loadings greater than .3 were included in interpretation of the factor and are tabulated. The first factor was labelled Positive Social Interaction, the second Mental Health Issues, the third Negative Experiences and the fourth Academic Difficulties.

Table 2 - Mean Scores for four identified factors

	Chronbach Alpha	Male	Female	Overall
Positive Social Interaction	.88	3.80 (.65)	3.65 (.62)	3.70 (.64)
Mental Health Problems	.90	2.14 (.75)	2.40 (.70)	2.31 (.72)
Negative Experiences	.73	2.37 (.63)	2.22(.56)	2.27 (.59)
Academic Difficulties	.82	2.94 (.77)	2.77 (.71)	2.82 (.73)

Note: higher numbers indicate higher ratings for the scale. Male n = 60, Female n = 127. All ratings are on five point scales. Standard deviations are in parentheses.

Independent-samples t-tests were performed to assess possible gender group differences. Given the exploratory nature of the study, we did not employ significance levels with Bonferroni-corrections, rather, p-values of .05 were considered to be significant. Mean responses for male and female groups did not significantly differ on positive social interaction (t (184) = 1.53, p = .13), negative experiences (t (181) = 1.75, p = .08) and academic difficulties (t (185) = 1.51, p = .14). However, female participants scored significantly higher on the mental health problem dimension (t (181) = -2.17, p< .03). Due to these findings, it was decided in subsequent analyses to split data into two separate entities.

Table 3 - Correlations matrix for male and female samples

	Positive Social Interaction	Mental Health Problems	Negative Experiences
<u>Male</u>			
Positive Social Interaction			
Mental Health Problems	-.525***		
Negative Experiences	.200	.285*	
Academic difficulties	-.423**	.517***	.242
<u>Female</u>			
Positive Social Interaction			
Mental Health problems	-.337***		
Negative Experiences	.122	.275**	
Academic difficulties	-.248**	.486***	.382***

Male n = 59; female n= 127. * <.05, ** <.01, and *** <.001.

Table 3 lists the inter-correlations of the four factors separately for the male and female samples. For males, the largest correlations are between positive social interactions and mental health problems, (indicating an inverse relationship), and also between mental health problems and academic difficulties. The pattern is found to be somewhat similar for the female sample with one exception. In the female sample, the negative experiences tend to have a strong relationship with academic difficulties but for males, negative experiences are not reliably related to academic difficulties. One very crucial piece of information in this correlation matrix illustrates that the positive social interaction and negative experiences are uncorrelated for both groups, suggesting they are separate constructs in this research context.

The following multiple regression analyses will provide a more comprehensive picture regarding how interpretative models are different for males and females in predicting their academic difficulties.

Table 4 - Multiple Regression Analysis for student experience of Academic Difficulties

Predictors	Beta	t	p
Male			
Positive Social Interaction	-.327	-2.23	.030
Mental Health Problems	.275	1.83	.072
Negative Experiences	.234	1.81	.076
Female			
Positive Social Interaction	-.157	-1.89	.060
Mental Health Problems	.343	4.02	.001
Negative Experiences	.304	3.73	.001

In order to examine the unique contribution of the above three factors in relation to reported academic difficulties, two separate multiple regression analyses for male and female samples were performed. Most of the inter-correlations among predictors were moderate as reported in the table 3. For males, overall, the predictors accounted for 34% of the total variance explained in the criterion variable "Academic Difficulties". As apparent in the Table 4, the only significant predictor of reported academic difficulties for males (beta = -.327, p <. .05) was positive social interaction, which depicted an inverse relationship. However, the regression model was substantially different for the female sample. For the female sample, together the three predictors accounted for 32% of the variance in "academic difficulties". The best single predictor of academic difficulties was mental health problems (beta = .343, p <. .001) and the second best predictor was negative experiences (beta = -.304, p <. .001). Positive social interaction failed to predict academic difficulties with any reliable significance for the female sample.

Discussion

The aim of this paper was to explore issues relevant to mental health and emotional wellbeing among a sample of first year university students, with the focus being possible identification of negative issues that may impact on one's ability to succeed in the academic environment.

A large proportion of participants identified as having a positive social interaction (67%). Many also identified a positive relationship with their academics or lecturers (55%). These issues are important for students in assisting the development of stability and success, as identified by Adams et al (2006) who argued that these strong relationships assist in laying the foundation for emotional wellbeing of students.

However, this research also identified several areas of concern. Fifty percent of respondents reported being "really stressed", while 55% cited "poor eating patterns and weight gain or loss". Only 35% of the sample believed that they were "coping with their responsibilities". Of additional concern were reports of 30% "experiencing drugs on campus", 27% "taking illicit

drugs" and 24% "smoking marijuana". Twenty five percent had problems "controlling their alcohol intake" and 10% reported having an "extremely negative sexual experience". All these findings paint a picture of first year university students struggling to cope. These findings support the research by Cooke et al (2006) who identified emotional wellbeing issues at a far higher incidence than in general populations and also Arria et al's (2008) position that first year university often provides the platform that launches young people into drug use.

As reported by Trotter & Roberts (2006), university students appear to find it difficult to seek support for personal and emotional problems. This is evident in the this study with only 8.5% of participants seeking assistance from the university counsellor, despite 27% of participants identifying themselves as "suffering from anxiety" and 23% "suffering from depression". Also, 40 % of participants identified their "need for help with emotional issues but their reluctance to seek it". However, interestingly, 58% of respondents described needing "emotional support" from their friends.

One of the interesting findings of this research revolves around the gender differences identified among the relationships. Female participants showed a significantly high level of Mental Health Problems, compared to male participants. This suggests areas of concern that could be further investigated by institutions, when developing student support programs.

This gender difference is also evident in predicting "Academic Difficulties". While the female data showed the best predictors for academic difficulties were mental health problems and the negative experiences, in the male data academic difficulties are best predicted by the positive social interaction. These incompatible findings imply that support programmes for students aiming to address their academic difficulties, might require different strategies for male and female students. For male students, facilitating more positive interactions may assist with their more positive academic coping, where as for female students addressing mental health issues and negative experiences associated with their campus may facilitate more successful academic outcomes. Further research using wider student populations is needed in order to understand this striking finding.

The apparent increase in mental health and emotional well being issues identified by research studies could possibly suggest that current structures provided by universities to support students, may not be keeping pace with the changing world. Cooke et al (2006) suggest the possible need for tertiary institutions to take a more proactive role in determining the types of support needed by a particularly vulnerable group, such as first year university students. Research by Pitkethly and Prosser (2001) identified the need for university wide social, environmental and intellectual change in addressing issues involving first year student's transition to university. They argue that each individual university needs to address and understand the unique experience of their cohort of students.

Whilst data collected in this study is not based on diagnostic instruments, the researchers believe that the data is indicative of serious issues that warrant further investigation. The researchers are interested in pursuing focus groups involving first year university students as the next step in collecting further data. It is anticipated that highlighted issues from the current research could form the basis for the development of strategic plans to deal with the issues identified, in order to offer a range of support services addressing unique needs of students.

It is of major concern to these researchers that our interaction with students displaying behaviours such as alcohol and drug abuse, as well as perceived issues such as anxiety and depression, is increasing. Whilst universities don't expect academics to deal with students emotional problems, we have found that the academic is often the first port of call for students in distress. As academics, we have a strong belief in duty of care for our students, as do universities and other educational institutions. It is our suggestion that the issue of student – counsellor ratio in all universities is an issue that needs careful consideration.

Emotional wellbeing of first year university students: Appendix A
The challenge of engaging the "whole person".

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Engaging students at first year university level is viewed by these facilitators as a complex multidirectional task, necessary to enhance the overall wellbeing of students and to reduce university attrition rates. We are interested in methods of engaging the "whole person", the cognitive, motivational and especially the affective aspects, that often create complex dilemmas for students facing their first university experience.

Our interest has arisen from the realisation that a large number of students appear prepared to disclose to us the wide range of personal problems and difficulties that they face while attempting to settle into university life. Many of these issues are extremely serious in nature, such as mental health problems, sexual assault and drug and alcohol crises. As grass root lecturers of these often fragile students, we feel strongly that we have a responsibility that goes beyond cognitive engagement. It must also include assistance with emotional stability, as early discouragement due to negative experiences can end an otherwise promising career.

We will initiate open discussion on the concept of engaging a student as a "whole person". After a brief introduction and overview, we will open the following topics for discussion:

1. *What issues and problems do first year students of the new millennium face?*
2. *What strategies can we use to identify students with problems?*
3. *What role should lecturers take after identifying these students? That is, how can we help?*

We will facilitate discussion on Topic 1, by encouraging thought and ideas on:
* *Academic issues* - expectations, lack of skills, level of difficulty, identifying resources
* *Health issues* – drug/alcohol use & abuse, sexual assault, eating disorders, self harming behaviour, other mental health issues (depression, anxiety, etc)
* *Social issues* - isolation, loneliness, living arrangements, lack social skills
* *Personal issues* - family problems, bereavement, relationship difficulties
* *Financial issues* - self funded? balancing work commitments, living expenses, fees etc.

Some suggested strategies as the basis for enhancing discussion on Topic 2 are:
* Careful observation of patterns of attendance, meeting deadlines, maintaining grades
* Identify withdrawn or unusually quiet behaviour
* Identify students who have difficulty in communicating with lecturers
* Direct and indirect information from other students
* Engaging empathetic communication skills

Some helpful approaches listed to generate additional ideas and interaction about Topic 3:
* Employ an open and interested approach – open door policy
* Identify all possible sources of support for students
* Establish direct communication/relationship with university Counsellor/Medical Officer
* Establish strong relationship with Learning Skills Advisors
* Encourage student involvement in university clubs (sporting, social etc)
* Take a concerned and supportive approach to students with severe problems.

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