

Research points to positive mental health outcomes for young people who have attended university

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University attendance appears to produce better mental health outcomes for young people, according to new research led by the University of Surrey. The study also suggests that a university environment has a positive influence on professional outcomes for those with a history of mental distress.

Surrey researchers also found that Black and Asian people were less likely to have declared a [mental illness](#) than their white counterparts. Furthermore, [young people](#) who grew up in a more deprived area and had not attended university were more likely to experience [mental health problems](#).

Dr. Anesa Hosein, Associate Professor in Higher Education from the University of Surrey and Principal Investigator of this research, said, "Experiencing mental [health](#) problems early in life can lead to profound adverse consequences for an individual's mental health outcomes in adulthood, with the potential for further negative impacts on their educational and employment life outcomes. These mental health outcomes are also shaped by social group memberships. For example, trauma exposure and victimization of Black individuals increase their risk of psychosis.

"In England, over 50% of young people now participate in higher education, so exploring differential mental health outcomes data between those who do and those who don't attend university offers the potential to learn lessons for both groups."

The research team analyzed data from the Longitudinal Study of Young People in England, which surveyed people born between 1989 and 1990. The team then used the Multilevel Analysis of Individual Heterogeneity and Discriminatory Accuracy method to predict the odds of whether matters such as [sexual identity](#), ethnicity, gender, and [socioeconomic status](#) were linked with young people's mental health outcomes at age 25,

and whether this differed based on university attendance.

The findings also suggested that while being female or identifying as a [sexual minority](#) increased the odds of young people experiencing mental health problems at age 25, among sexual minorities, the odds of self-harming were half the size for those who had attended university in comparison to those who did not attend university.

Dr. Hosein added, "For [sexual minorities](#), higher education may be seen as an open and inclusive environment in which individuals are freer to explore their sexual identities. Therefore, having a space to express their true sexual identities may alleviate the risk of self-harming behavior in the future."

Dr. Nicola Byrom, Director of the Student Mental Health Research Network, SMARteN, and co-author of the study, said, "Concerns around mental health in [higher education](#) continue to increase, with the sector looking for new and improved ways to support student mental health. This paper reminds us of the wider context; young adulthood is a challenging time for mental health. It is often easier to identify these challenges within the university population but acknowledging the wider context is vital if we seek to reduce the burden of poor mental health among [young adults](#)."

Mr. John De Pury, Assistant Director of Policy at Universities UK (UUK) said, "The public narrative on student mental health can seem relentlessly negative, despite significant efforts made by universities to support students. This new research, based on data from the Longitudinal Study of Young People in England, sets these narratives in the wider context of young adult mental health and finds that university attendance may in fact improve outcomes. Now we need to understand better what is working for students and explore how that learning—about community, about promotion and prevention, about service access and

co-design—might inform interventions for all young adults."

The research was published in *SSM—Population Health*.

More information: Kieran Balloo et al, Differences in mental health inequalities based on university attendance: Intersectional multilevel analyses of individual heterogeneity and discriminatory accuracy, *SSM—Population Health* (2022). [DOI: 10.1016/j.ssmph.2022.101149](https://doi.org/10.1016/j.ssmph.2022.101149)

Provided by University of Surrey

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