Knowledge Exchange Seminar Series (KESS)

Mental health, self-harm & suicide in university students in Northern Ireland

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The study is part of the International College Student Project of the WHO World Mental Health Survey Initiative, under the auspices of the World Health Organisation, led by Harvard University and KU Leuven

(WMH-ICS). The WMH-ICS aims to obtain accurate longitudinal cross-national information about the prevalence and correlates of mental, substance, and behaviuoral disorders among college students worldwide. Goals of the project include assessing unmet need for treatment, identifying students in need of outreach, and evaluating preventive and clinical interventions.

Key Findings

- Lifetime prevalence rates of mental health disorders in Ulster University first year students are high. The overall prevalence rate for experiencing any lifetime disorders was 53.2%. The highest prevalence rates were found for panic attacks (41.2%), suicidality (31%), major depressive episode (24.2%) and generalised anxiety disorder (22.6%).

- Females significantly more likely to report all the mental health problems and suicidality.

- Males had significantly higher rates of drug abuse and dependence but numbers were very low (4.4%).

- LGBT students were five times more likely to have any lifetime disorder.

- Students who were financially poor were more likely to have panic attacks and students who were comfortable were significantly less likely to have any lifetime disorder.

- 24.3% of males and 36.9% of females reported suicidal thoughts with almost 1 in 5 students having made a plan for suicide in the previous year 12 (19.6%, 16.5% of males and 21.6% of females).

- The rates for 12 month attempt were 5.5% for males and 9% of females (7.7% overall).

- Females had a significantly increased likelihood of both self-harm and suicidal ideation. There were no gender differences in the other measures of self-harm and suicidal behaviour.

- There was an increased likelihood of all the self-harm and suicidal behaviours in LGBT students and among those with either moderate or high levels of childhood adversities.

- Preliminary DNA analysis demonstrates differences in the epigenetics of students who have mental illnesses, and who self harm.

- Preliminary microbiome analysis demonstrates differences in the oral microbiome of students with mental illness and who self harm.

Key Policy Implications

- The biological stress response system is an important determinant of later mental health and

wellbeing. Early intervention to promote perinatal and maternal mental health has been shown to promote an adaptive stress response system in children and reduce the risk of mental illness later in life

- Resilience building programmes, delivered in schools is shown to improve pupils' self esteem, coping skills and stress management strategies, which reduces the likelihood of mental illness.
- Additional support is required for students in post-primary schools who are preparing for transition.
- Screening and early intervention for students with a history of adverse childhood experiences (including parental trauma) and the first signs of mental illnesses would minimise the risk of them developing more serious, enduring and debilitating mental illness.
- Evidence based anti-stigma campaigns are required to increase uptake of student support services.
- Financial support and support structures to ensure that students do not experience financial hardship would help minimise financial insecurity as a stressor which increases the risk of mental illness.
- Improved support structures for LGBT students would help promote self worth and wellbeing and reduce perceptions of isolation and societal discrimination.
- The introduction of civil marriage equality legislation led to reductions in suicidal behaviour in LGBT people in other countries, and is likely to have a similar impact in NI.
- Research funding should be directed at understanding the interactions between the biological and psychosocial predictors of mental illness, including the impact of DNA methylation and the features of the microbiome. Investment is required to develop screening and treatments which target the biological correlates and causes of mental illness.

How we did the work

Suicidal behaviour and mental health problems are increasingly common among college students and the rates appear to be increasing globally. The Ulster University Student Wellbeing Study, was conducted as part of the WHO World Mental Health Surveys International College Student Project initiative. The study assessed psychopathology and associated risk and protective factors in 739 first year students and the findings revealed high prevalence rates of mental health and substance disorders, ADHD and suicidal behaviour, with more than half of new undergraduate students reporting any lifetime disorder. Co-morbidity was common with almost a fifth of students reporting 3 or more disorders. Females, students over 21, LGBT students, and those from a lower socioeconomic background were more likely to have a range of mental health and behavioural problems. Self-harm and suicidal behaviour was evident in 31% of students, and being LGBT was associated with the highest risk of suicidal behaviour. The results suggest that student life can be stressful, with financial pressures, social isolation, and social perfectionism impacting on wellbeing and increasing the risk of mental health difficulties. Overall, 10% of new entry students received treatment for emotional problems in the previous year. However, over a fifth of students with problems said they would not seek help. It is important therefore to carefully consider strategies to encourage help-seeking behaviour. This may include anti-stigma campaigns and effective screening programmes. Additionally, the support services available to students, and barriers to help seeking, should be addressed. The study therefore provides important information for universities, policy makers and practice identifying risk factors and highlighting areas for intervention. The findings suggest that policies, interventions and prevention strategies should be prioritised for young people to address mental health issues

before they arise. This presentation highlights the critical role of early intervention and encouraging help-seeking, mental health and behavioural problems may be treated before they escalate into comorbid substance problems and suicidal behaviour.

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