

Results of UCIrvine survey of graduate students' mental health

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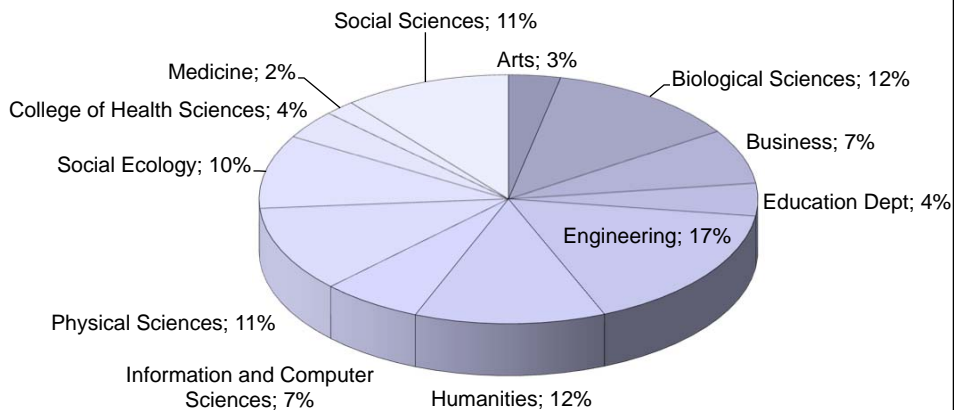
Survey designed to describe:

1. *service need* - the prevalence of mental illness among UCIrvine graduate students;
2. *service access* - students' use of extant services and barriers to use;
3. *service satisfaction* – experiences and satisfaction with extant services,
4. *variation* in service need, access, or satisfaction as a function of students' gender, ethnicity, or school type; and,
5. *service preferences* - preferences for the structuring of future services.

Recruitment & Respondents

- Three emails sent to all UCIrvine graduate and professional students in Winter 2008
- Administered via an anonymous online survey
- Incentive: lottery for two iPods
- **Respondents:**
 - 1,025 total (approximately 20% of eligible students)
 - 52.6% female
 - Age range: 22 to 60 (mean of 29)
 - Largest ethnic group was European-American (59%) followed by Chinese/Chinese-American (13.5%)
 - 70% in a Ph.D. program

Respondents' schools





Aim 1

Service need: *Estimated prevalence of mental illness and substance abuse among UCIrvine graduate students*



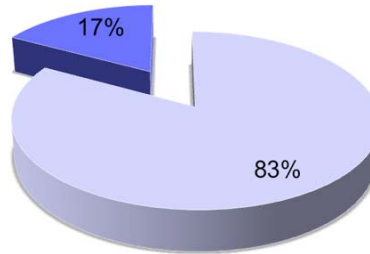
Measures of service need

- Mental health: K-6 (Kessler et al., 2002) is a well-validated 6-item screening tool for current mental disorder
 - Items assess general psychopathology
 - In a study of 155 adults drawn from the Boston community, strongly predicted diagnosis of an Axis I mental disorder that impaired functioning ($AUC = .87$; Kessler et al, 2003)
- Two-Item Conjoint Screen (Brown et al., 2001) is a validated screening tool for substance abuse/dependence disorders within past year
 - Items assess excessive drug and alcohol use, desire to cut down
 - In a study of 1,136 primary care patients, predicted substance abuse diagnoses where 72.4% of those who screened in had diagnoses (Brown et al., 2001)

Estimated prevalence of current, serious Axis I mental disorder

K-6

Screen Out Screen In

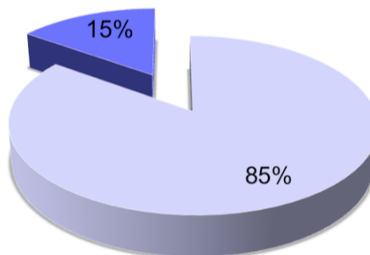


- Compared to what? In a community sample of 1,000 adults, approximately 4% screened in on the K-6 (Kessler et al., 2003)
- Actual prevalence in UCIrvine students may be lower than 17%, as students with mental health concerns may have been more inclined to respond to this survey than students without such concerns

Estimated prevalence of substance abuse disorders

Conjoint Tool

Screen Out Screen In



- Compared to what? In primary care sample, 23% of respondents had a substance abuse disorder (Brown et al., 2001)
 - Actual prevalence in UCIrvine students may differ from 15%, given potential selection bias noted earlier and reluctance to acknowledge substance abuse problems
- n* = 967

Other mental health concerns

- 29.6% reported having a mental health concern that affected their well being or academic performance in the past year [compared to 45% in Berkeley survey]
- 43% reported knowing another graduate student whose academic performance was impaired by major mental health problems
- 30% had ever thought about suicide
 - 8% had ever attempted suicide
- 41% had ever seen a therapist or taken medication for a mental health problem
 - 4% had been hospitalized for a mental health problem

What is the general nature of students' concerns?

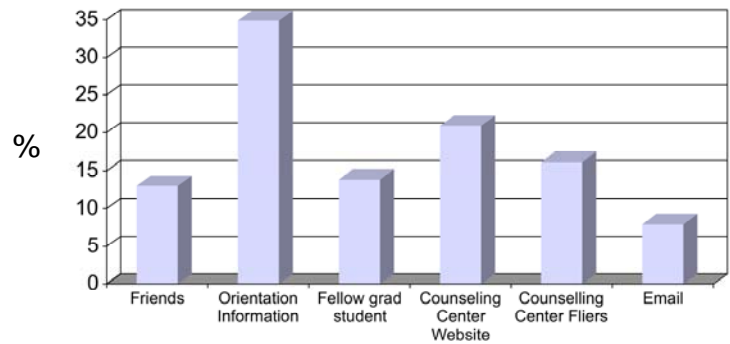
- *Please share any opinions you would like concerning the sources and nature of mental health concerns in graduate school*
- Limited data (only 95 responses)
- Most common responses:
 - General stress of grad school (i.e. feeling overwhelmed; 50.5%)
 - Workload (20%)
 - Financial problems (15.8%)
 - Problems with advisor (12.6%)
 - Isolation (lack of connection with others; 10.5%)

Aim 2

Service access: students' use of extant services and barriers to use

Awareness of services

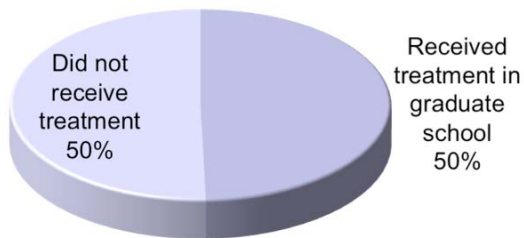
- About 1 in 3 respondents (32%) were unaware that UCIrvine provides mental health services
- Of respondents who WERE aware ($n= 684$), they heard about UCIrvine services from...



Service access

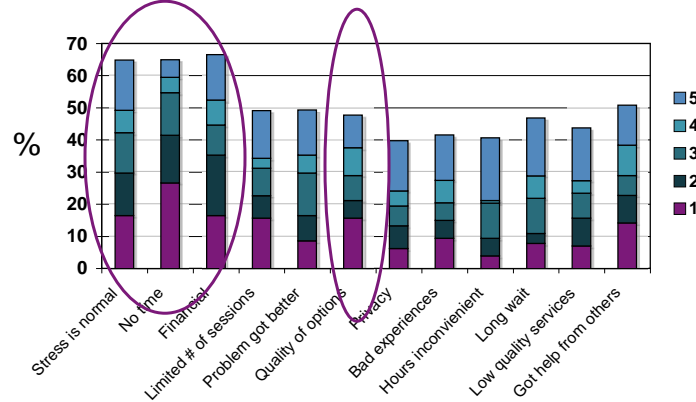
- During graduate school, 1 in 4 respondents (25%) saw a therapist or took medication for emotional or mental health problems
- But, in the past year, about half of respondents (43%) thought they needed help or were told they did. Specifically, in the past year...
 - almost 2 in 4 respondents (41%) thought they needed help for emotional or mental health problems such as feeling sad, blue, anxious or nervous
 - 1 in 5 respondents (22%) had a friend, family member, or other suggest that they seek counseling or psychiatric care

Of students who thought they needed help, or were told to seek help...



Barriers to access

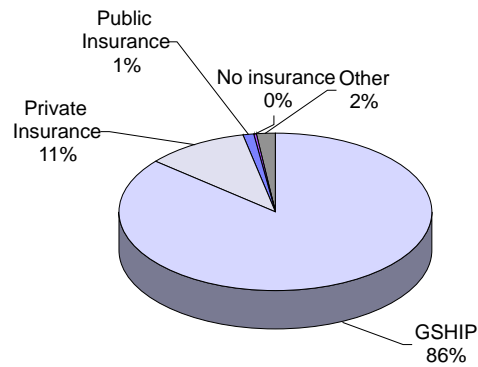
- Those who needed services but did not access them were asked to rank the top five barriers to access
- For those who ranked barriers ($n= 128$), those most commonly ranked in the top five were:



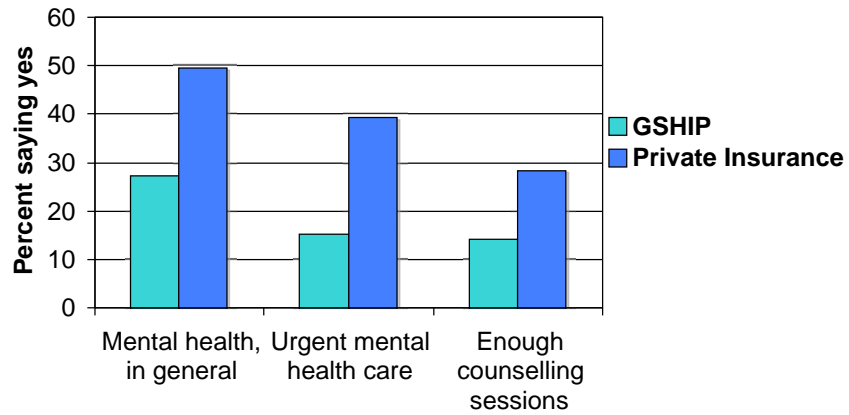
Financial barriers

What type of insurance do students have?

- Most grad students have GSHIP, but a sizeable minority have other private insurance

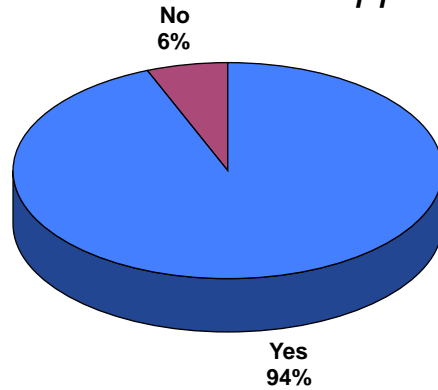


Insurance meets my needs for...



Transportation as a barrier?

- Do you have access to reliable transportation for medical appointments?



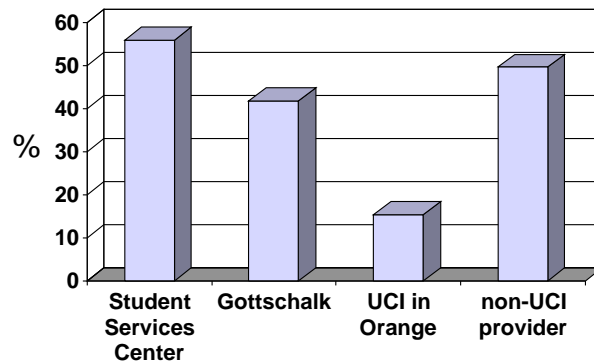
n= 235

Aim 3

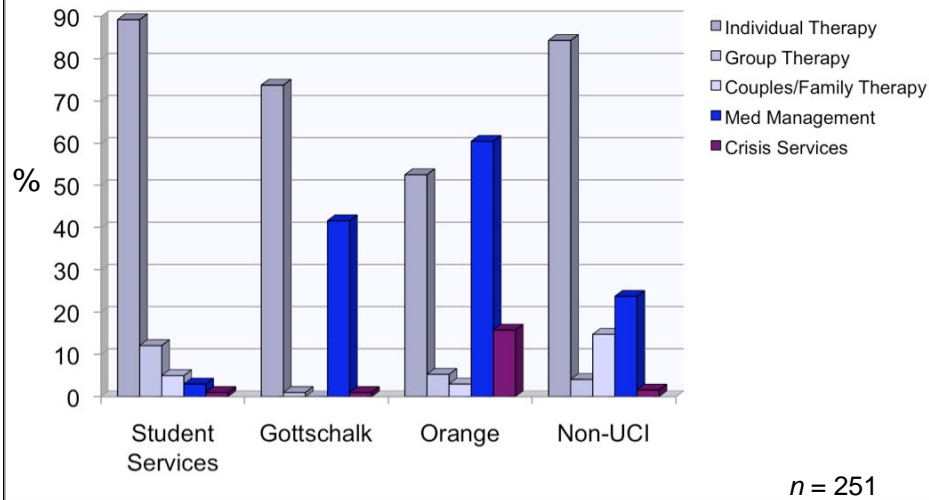
Service satisfaction - *experiences and satisfaction with extant services, and*

Service access and location

- During graduate school, almost 1 in 4 respondents (24.5%) saw a therapist or took medication for emotional or mental health problems
- Of those who received treatment ($n= 251$), the location of services was:



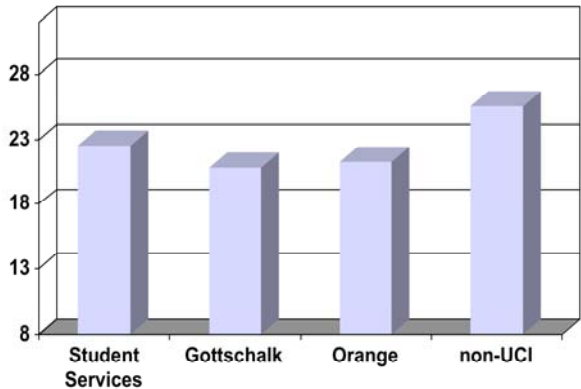
Service type



Measure of service satisfaction

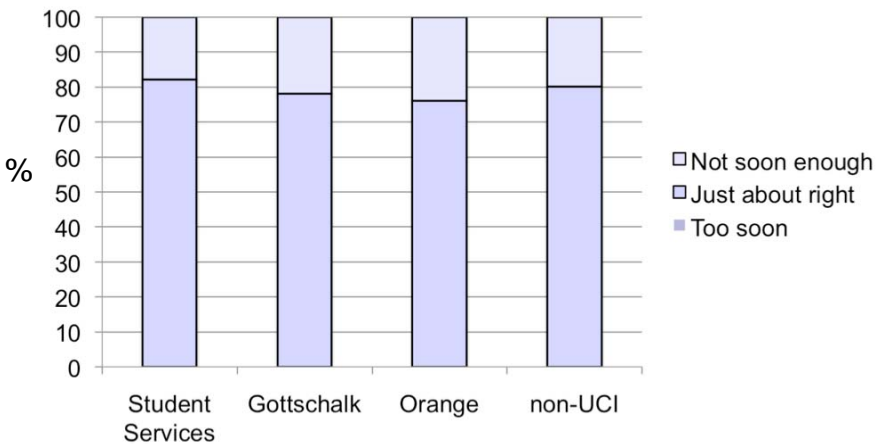
- Client Satisfaction Questionnaire-8: well-validated unidimensional, eight item measure of satisfaction with mental health services
 - Scores range from 8 – 32
- Supplemented with one question about how quickly services were received

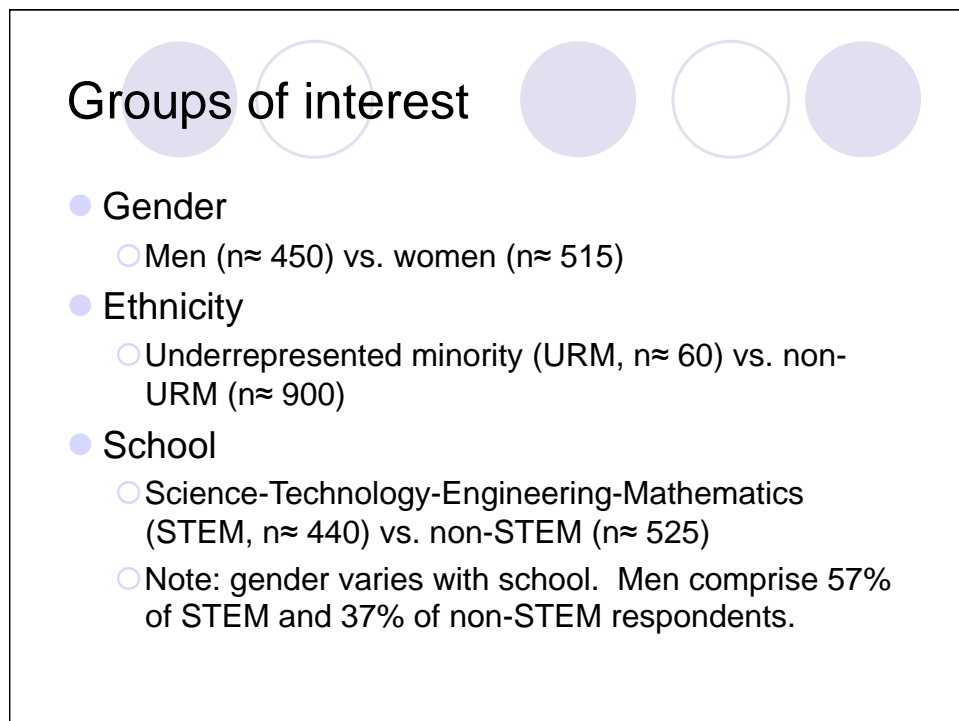
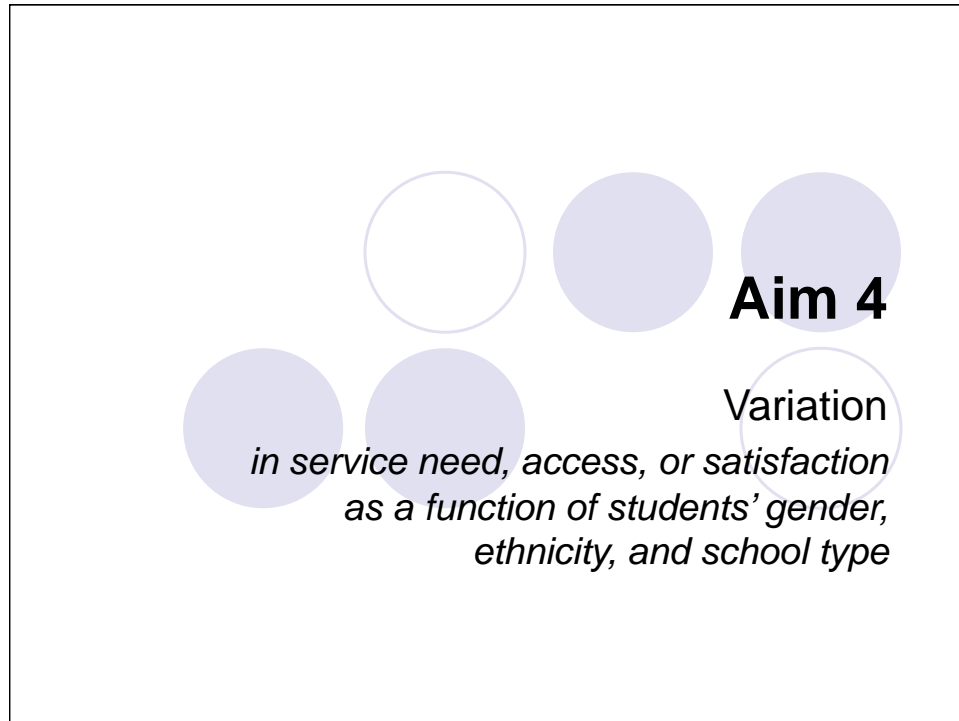
Service satisfaction by site: CSQ-8



- Significantly different across sites, $F(3,388) = 12.76, p < .001$
- Significantly *more* satisfied with non-UCI than any UCI provider
- All sites' CSQ-8 scores fall significantly below those of norms for mental health settings ($M=27, sd = 4$; Atkisson & Greenfield, 2004)

How soon services were received by site







Service need

- Gender
 - Trend toward greater proportion of women screening in with mental illness than men (19% v. 15%), and more men screening in with substance abuse than women (16% v. 13%)
 - Significantly greater proportion of women endorse suicide attempts than men (10% v. 6%)
- Ethnicity
 - Significantly greater proportion of URM screen in with mental illness (28% vs. 16%) and substance abuse (25% vs. 14%) than non-URM
- School
 - Significantly greater proportion of non-STEM screen in with substance abuse than STEM (18% v. 11%); non-STEM less likely to endorse suicidal ideation (27% vs. 37%) and more likely to endorse suicide attempts (10% vs. 6%)



Service access

- Gender
 - Men significantly less likely to be aware of services than women (65% vs. 74%)
- Ethnicity
 - No significant differences in awareness or access as a function of URM status
- School
 - STEM students significantly less likely to be aware of UCI's services than non-STEM (64% vs. 75%)
 - STEM students significantly less likely to have received services during graduate school than non-STEM (17% vs. 33%)



Service satisfaction

- No significant differences in satisfaction with services at any site as a function of gender, ethnicity (URM), or school/department (STEM)



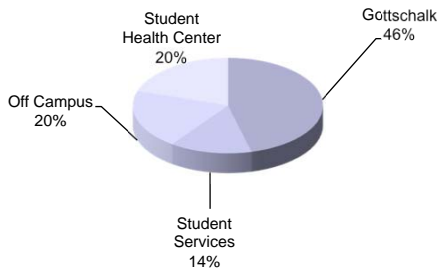
Aim 5

1. Service preferences
*preferences for the structuring
of future services*

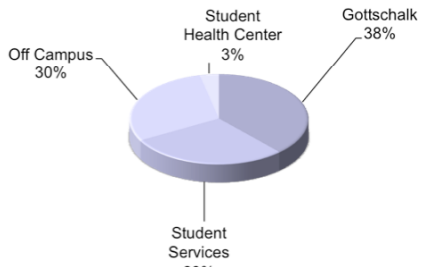
Site preferences

- *Currently, UCIrvine mainly offers mental health services to graduate students at Gottschalk Medical Plaza. Where would you prefer to have your mental health services?*

All respondents



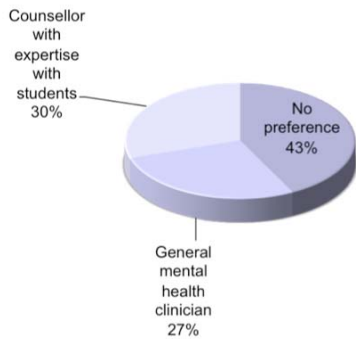
Respondents treated during graduate school



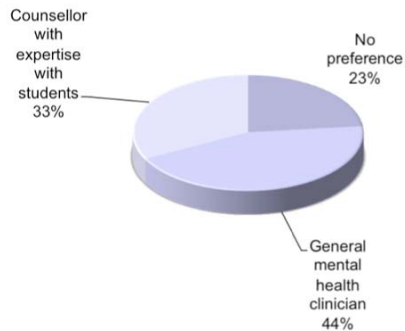
Provider preferences

- *What kind of professional would you prefer to provide your mental health services?*

All respondents

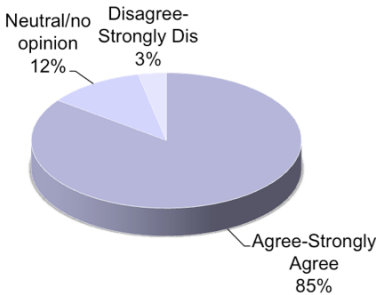


Respondents treated during graduate school



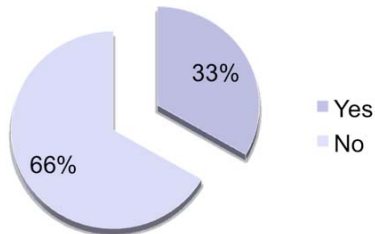
Crisis service preferences

- *How strongly do you agree that UCIrvine should offer crisis services (for acute emotional problems or suicidal thoughts) to students on a 24 hour per day, 7 day per week basis?*



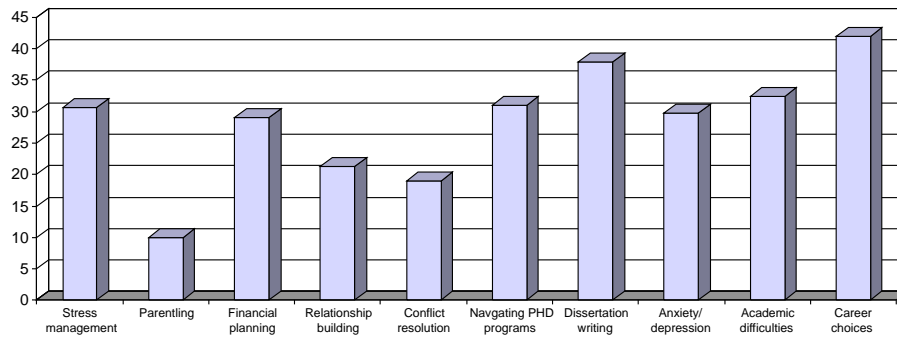
Telemedicine preferences

- *In some settings, psychiatrists and other mental health providers are available through confidential video conferencing. Here, you can hear and see the provider, but you are not in the same room together.*
- *Would you be interested in such a "telemedicine" service as an additional option to "in-person" services?*



Workshop preferences

- To what extent would you be interested in 1-2 hour workshops on the following topics?
- Percent "Very strongly interested" or "Strongly interested"



Other workshops

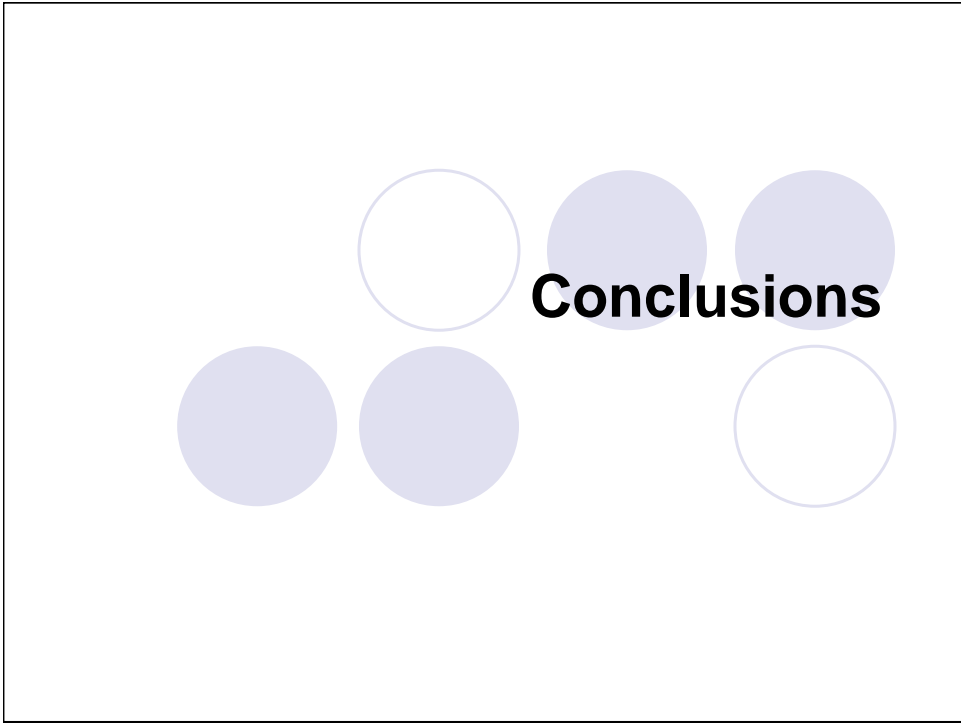
- *Other/specify* (N=105, TOP responses):
 - Issues related to psychotherapy or mental disorder (type of therapy available, eating disorders)
 - Dealing with stresses of grad school
 - Time management
 - Relationship issues
- Of those leaving comments about workshop topics nearly 1 in 6 (17%) said they do not find workshops helpful

Preferences for improving UCIrvine services

- *Please share any suggestions for improving mental health services for graduate students at UCIrvine. Be specific, please. Address what UCIrvine in general...or Counseling Services (on campus), Gottschalk Plaza, or outside providers could do to better meet your needs or those of your colleagues.*
- Students left a wide range of comments and suggestions regarding mental health care at UCI ($n= 259$)

Common open-ended themes

- Advertise services more (20.1%)
- Help me navigate the system (12.4%)
 - Don't know where to go or whom to call for services
- Protect my confidentiality (10.4%)
 - I don't want to go where I will be seen by my undergraduates (Student Services) or will run into my medical school professors (Orange)
- Give me more freedom to see non-UCIrvine providers (12.4%)
- Provide better coverage for mental health (12.7%)
 - More sessions allowed, less co-pay
- Fix GSHIP payment problems (8.5%)
 - Delays in providers getting paid, some disorders not covered



Service need

- Estimated serious mental disorder is disproportionately represented, with respondents' rate (17%) over three times higher than that of community residents
- Almost 1 in 3 respondents (30%) had a mental health concern that impaired their functioning in the past year
 - Some of these concerns relate to the stress of graduate school

Service access & barriers

- 1 in 4 respondents received mental health services at some point in graduate school
- Only 1 in 2 respondents who needed help in the past year received such services at any point in graduate school
- Barriers to accessing services include:
 - Lack of awareness of services
 - Lack of time
 - Perception that “stress is normal”
 - Financial barriers, including limitations of GSHIP insurance in meeting mental health needs

Service satisfaction

- Respondents are significantly more satisfied with off-campus than on-campus mental health services
 - But are less satisfied with all services than community samples of adults who obtain treatment elsewhere
- Most respondents believe services are provided “soon enough,” across sites

Variation across student characteristics

- Service need
 - Estimated serious mental disorder is particularly prevalent among women and URM respondents
 - Estimated substance abuse disorders are particularly prevalent among men, URMs, and non-STEM respondents
 - Self harm and suicide attempts are particularly prevalent among women and non-STEM respondents
- Service access
 - Men and STEMs are particularly unlikely to be aware of UCIrvine's mental health services
 - STEM respondents are particularly unlikely to access services during graduate school
- No differences in service satisfaction across gender, ethnicity, or school

Service preferences

- Respondents prefer to receive services at Gottschalk ($\approx 40\%$), followed by off-campus or student services ($\approx 30\%$ each)
 - The majority of those with treatment experience prefer a mental health clinician over a counselor with expertise in students
- Virtually all (85%) agree UCIrvine should provide around the clock emergency mental health services
- Few (33%) are interested in telemedicine

Service preferences

- About 1 in 3 respondents are strongly interested in workshops dealing with graduate school issues (e.g., career choices, dissertation writing, stress management)
 - But a significant minority do not think workshops are helpful
- Respondents are very concerned about stigma and confidentiality
- Respondents want more freedom to see non-UCI providers

For some comparisons

- See UC Berkeley 2004 survey
 - w.ocf.berkeley.edu/~gmhealth/reports/gradmentalhealth_report2004.doc