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present

Loneliness, Resilience, and Mental Health
A CALL FOR CAMPUS ACTION

Introduction

The U.S. Surgeon General has identified loneliness as a pressing public health concern[1].

During a time when college students experience isolation from others (25%), feel left out (22%), and lack companionship (19%)[2], there is an opportunity for college students to support each other, talk about mental health on their campuses, and work together to improve mental health for themselves and their peers. College students are known for receiving informal support – from family, friends, professors, classmates, and peers – for mental health concerns. In 2023, the Healthy Minds Study found that college students received informal support from a friend (42%), family member (41%), significant other (32%), or a roommate (15%), with one in five college students preferring informal support over professional care[3]. Generally, 67% of youth agree with the statement, "I want to support my friends, but I don't know how"[4]. This brings up for consideration, if college students seek and provide informal support to each other, how concerned are they about mental health, and what is their perception of how other students on their campus view, discuss, and work together to improve mental health at their college or university?

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1   Office of the Surgeon General, 2023

2   Healthy Minds Network, 2023

3   Healthy Minds Network, 2023

4   Morning Consult MTVE Custom Mental Health Study, 2023

67% **OF YOUTH AGREE WITH THE STATEMENT** "I want to support my friends, but I don't know how."

Creating communities of support has been shown to be associated with increases in happiness[5] and self-esteem[6] and reductions in loneliness[7] and anxiety[8]. Additionally, there are implications for academic learning, student success, and retention at colleges and universities. The relationship between the lack of mental health support and severe mental health concerns and dropping and stopping out is well-documented[9]. Exacerbated by the COVID-19 pandemic, emotional stress (55%) and personal mental health reasons (47%) continue to remain the top reasons students report considering stopping out of college[10]. Student perception of mental health, for themselves and others, shapes their college experience. Caring for their mental health is necessary for student engagement, belonging, continuation, and degree completion.

This report seeks to examine how college students value and prioritize their mental health, as well as the mental health of their friends and peers. It explores college students' shared concern for mental health at their college and university, comprising their perception of if and how mental health is an important issue, their recognition of poor mental health in their community, and their belief that they can work together to improve mental health. There is a close relationship between loneliness and mental health concerns[11]. This report investigates the role of family and friends, shared concern about mental health, discrimination, and perceptions of how their college and university prioritize mental well-being in addressing feelings of loneliness and mental health issues. This report analyzes findings from a sample of nearly 1,100 college and university students collected via an online survey in February 2024.

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5   Morelli et al., 2015

6   Li, Albert, & Dwelle, 2014

7   Morelli et al., 2015

8   Jibeen, 2016

9   Eisenberg, Golberstein, & Hunt, 2009; Arria et al., 2013

10   Gallup & The Lumina Foundation, 2023
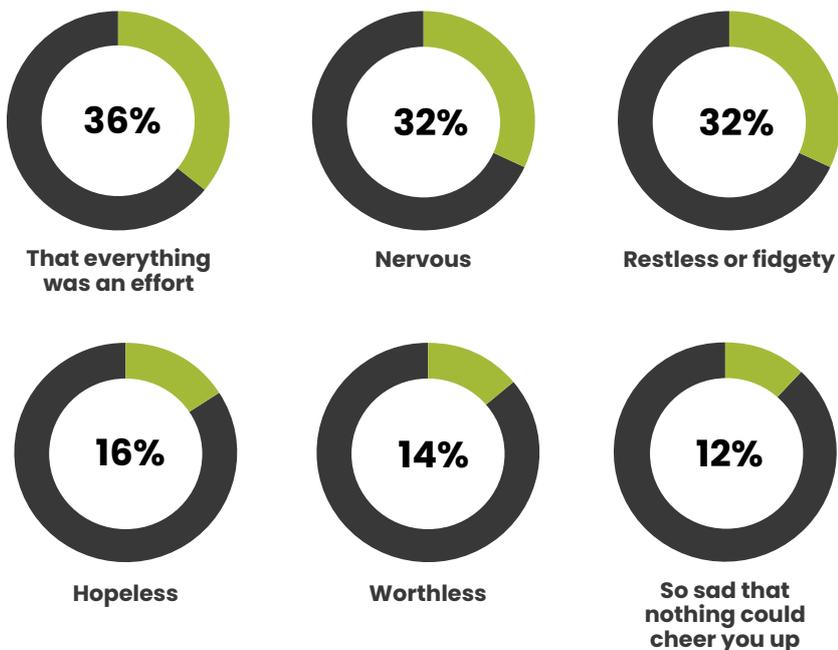
11   Office of Surgeon General, 2023

Key Findings pt.1

College students who report feeling lonely are over 4 times more likely to experience severe psychological distress. More LGBQ+ college students report feeling lonely as compared with their non-LGBQ+ peers.

About three in 10 (28.8%) college students report severe psychological distress as determined by more frequent symptoms on the Kessler K6 psychological distress scale. Indicators of psychological distress include: 35.7% feeling that everything was an effort, 32.4% feeling nervous, 32% feeling restless or fidgety, 15.8% feeling hopeless, 14% feeling worthless, and 11.5% feeling so sad that nothing could cheer them up most or all of the time. Among college students, psychological distress is associated with increased loneliness

(R= .576, *p< .001*) and experience of discrimination (R= .182, *p< .001*). Moreover, those who experienced higher levels of psychological distress experienced less support from friends (R= -.256, *p< .001*) and family (R= -.260, *p< .001*), less shared concern about mental health (R= -.092, *p= .002*), and poor perception of how their college or university values mental health (R= -.156, *p< .001*). College students who report feeling lonely are over 4.3 times more likely to experience high psychological distress than those who do not report feeling lonely.

COLLEGE STUDENTS' EXPERIENCE
WITH PSYCHOLOGICAL DISTRESS

During the past 30 days how often did you feel...

36%
That everything was an effort

32%
Nervous

32%
Restless or fidgety

16%
Hopeless

14%
Worthless

12%
So sad that nothing could cheer you up

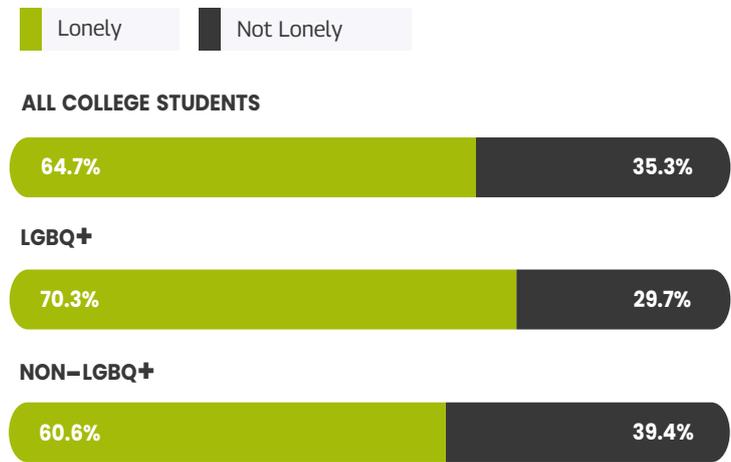**ABOUT 3 IN 10 COLLEGE STUDENTS** report severe psychological distress

Nearly two-thirds (64.7%) of college students report they feel lonely, with 28.4% reporting often feeling isolated from others, 23.1% being left out, and 21% lacking companionship. LGBQ+ college students are more likely to experience loneliness than their non-LGBQ+ peers, with 70.3% identifying as lonely. Among LGBQ+ college students, 33.8% feel like they often are isolated from others, 26.9% often feel left out, and 22.6% feel like they often lack companionship. Among LGBQ+ college students, loneliness is associated with high levels of psychological distress (R= .552, *p< .001)*. There is a negative relationship between loneliness and levels of support from friends (R= -.420, *p< .001)* and family (R= -.274, *p< .001)* with those reporting lower levels of support also reporting higher levels of loneliness.

Additionally, loneliness is associated with less shared concern about mental health (R= -.122, *p= .009)* and lower institutional valuation of mental health (R= -.186, *p< .001)*. LGBQ+ college students who experience higher levels of psychological distress are 20% more likely to report feelings of loneliness than those who experience lower levels.
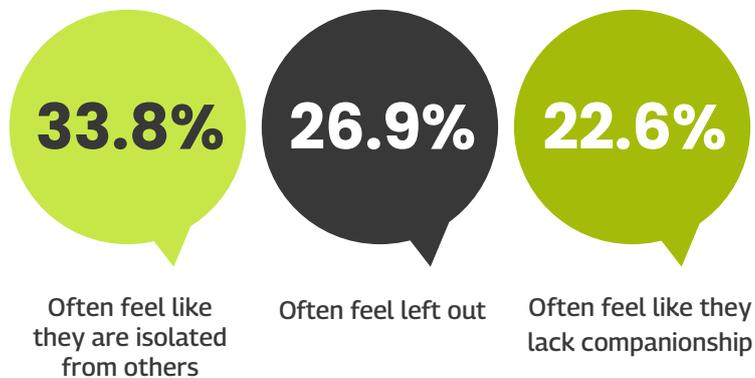
Among **LGBQ+** college students, **loneliness is associated with high levels of psychological distress**

COLLEGE STUDENTS' EXPERIENCE **WITH LONELINESS BY SEXUAL ORIENTATION**

■ Lonely   ■ Not Lonely

ALL COLLEGE STUDENTS

| 64.7% | 35.3% |

LGBQ+

| 70.3% | 29.7% |

NON–LGBQ+

| 60.6% | 39.4% |

Among **LGBQ+** college students

33.8% — Often feel like they are isolated from others

26.9% — Often feel left out

22.6% — Often feel like they lack companionship

Key Findings pt.2

College students value having good mental health for themselves and their friends. Across all racial and ethnic groups, Black and Latino/a/e college students value having good mental health and taking care of their mental health the most. LGBQ+ students were more likely to prioritize their friends' mental health than non-LGBQ+ students.

In general, about two-thirds (62.7%) of college students believe that having good mental health is important. Slightly over half (53.7%) of college students shared that taking care of their mental health informs their decisions guiding their behavior and actions. Similarly, 51.7% of college students are concerned about their friends' mental health. They are less likely to prioritize the mental health of their peers generally, with only 39.2% of college students reporting that their concern about their peers' mental health guides their behavior and informs their decision-making. Among college students, there is a strong positive association between being concerned about their friends' mental health and helping their friends take care of their mental health (R= .734, *p< .001*) as well as being concerned about their peers' mental health and helping their peers take care of their mental health (R= .778, *p< .001*).

COLLEGE STUDENTS' VALUE & PRIORITIZATION **OF MENTAL HEALTH**

63%
Having good mental health

54%
Taking care of their mental health

52%
Concerned about their friends' mental health

39%
Concerned about the mental health of their peers

AMONG COLLEGE STUDENTS
There is a strong positive association between being concerned about their friends' mental health and helping their friends take care of their mental health

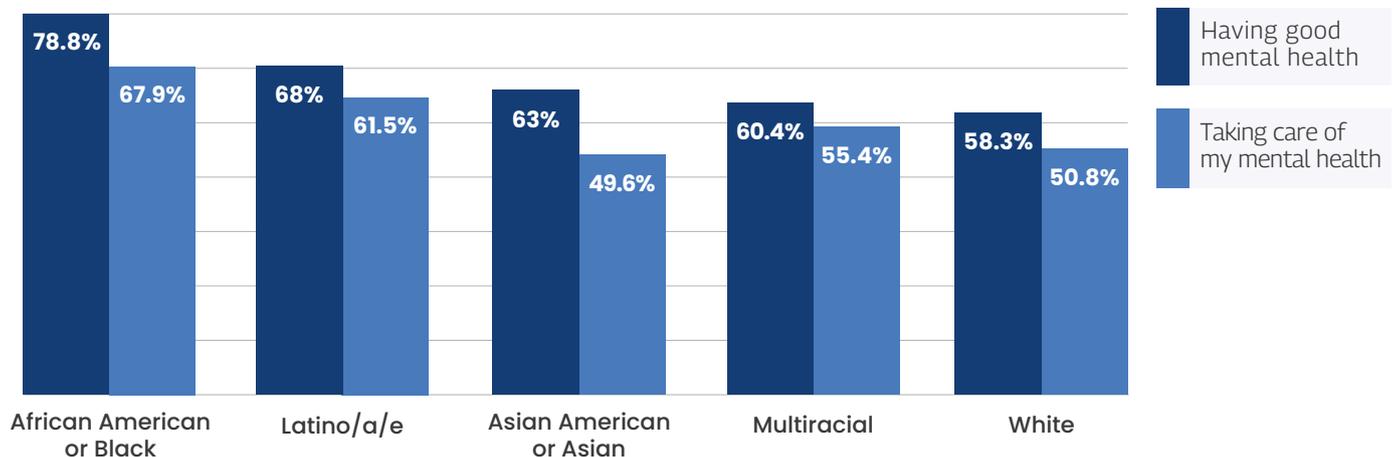**STUDENTS WHO IDENTIFY AS TRANSGENDER, NONBINARY, OR QUESTIONING**
Are more likely to agree that they are concerned about their friends' mental health and that helping their friends take care of their mental health is important

Black and Latino/a/e college students are more likely to agree that having good mental health influences their behaviors and decision-making than their peers in other racial and ethnic groups. They also identify that taking care of their mental health is more of a priority compared to their non-Black and non-Latino/a/e peers. While there are no differences between LGBQ+ and non-LGBQ+ college students in how they value and prioritize their own mental health, LGBQ+ students are more likely to agree that being concerned about their friends' mental health and helping their friends take care of their mental health are important and that they would make decisions to support them. More LGBQ+ students also feel that their friends are concerned about mental health compared to non-LGBQ+ students. Similarly, for college students who identify as transgender, nonbinary, or questioning, there is no difference in how they value and prioritize their own mental health compared to their cisgender peers. However, they are more likely to agree that they are concerned about their friends' mental health and that helping their friends take care of their mental health is important and would guide their behavior. Further, most transgender, nonbinary, and questioning college students believe that their friends are concerned about mental health. Lastly, cisgender men are least likely to be concerned about their friends' mental health or help their friends take care of their mental health.

LGBQ+ students *are more likely to agree that being concerned about their friends' mental health and helping their friends take care of their mental health is important to them.*
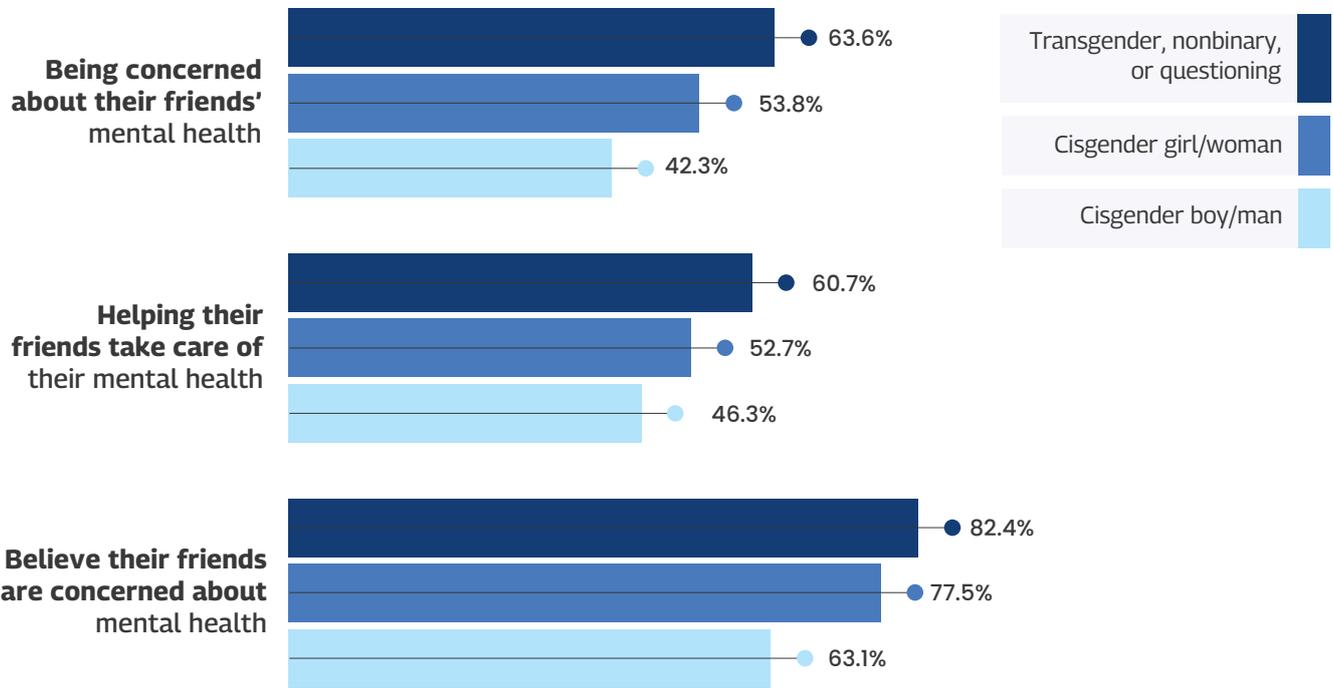
COLLEGE STUDENTS' VALUE & PRIORITIZATION
OF MENTAL HEALTH BY RACE/ETHNICITY

Legend:
- Having good mental health
- Taking care of my mental health

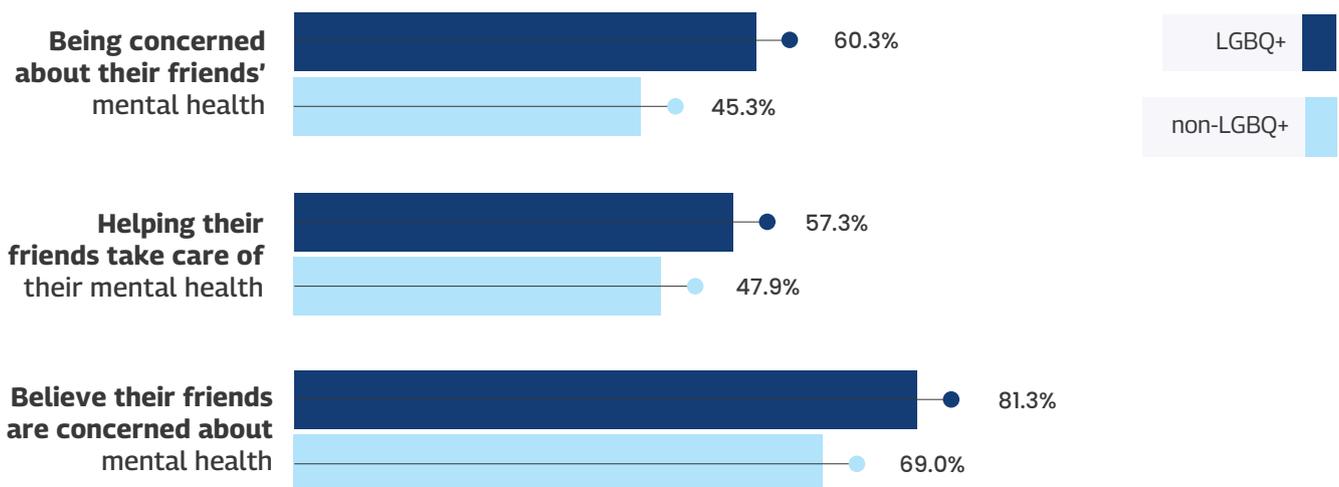| Race/Ethnicity	Having good mental health	Taking care of my mental health
African American or Black	78.8%	67.9%
Latino/a/e	68%	61.5%
Asian American or Asian	63%	49.6%
Multiracial	60.4%	55.4%
White	58.3%	50.8%

BLACK AND LATINO/A/E COLLEGE STUDENTS
Are more likely to agree that having good mental health influences their behaviors and decision-making than their peers in other racial and ethnic groups

COLLEGE STUDENTS' VALUE & PRIORITIZATION
OF MENTAL HEALTH BY GENDER

Being concerned about their friends' mental health
- Transgender, nonbinary, or questioning: 63.6%
- Cisgender girl/woman: 53.8%
- Cisgender boy/man: 42.3%

Helping their friends take care of their mental health
- Transgender, nonbinary, or questioning: 60.7%
- Cisgender girl/woman: 52.7%
- Cisgender boy/man: 46.3%

Believe their friends are concerned about mental health
- Transgender, nonbinary, or questioning: 82.4%
- Cisgender girl/woman: 77.5%
- Cisgender boy/man: 63.1%

Legend:
- Transgender, nonbinary, or questioning
- Cisgender girl/woman
- Cisgender boy/man

COLLEGE STUDENTS' VALUE & PRIORITIZATION
OF MENTAL HEALTH BY SEXUAL ORIENTATION

Being concerned about their friends' mental health
- LGBQ+: 60.3%
- non-LGBQ+: 45.3%

Helping their friends take care of their mental health
- LGBQ+: 57.3%
- non-LGBQ+: 47.9%

Believe their friends are concerned about mental health
- LGBQ+: 81.3%
- non-LGBQ+: 69.0%

Legend:
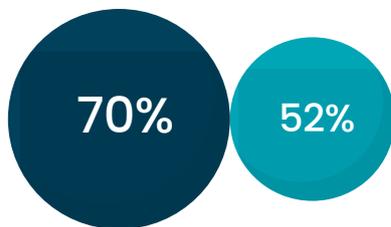- LGBQ+
- non-LGBQ+

Key Findings pt.3

Although two-thirds of college students believe mental health is an important campus issue, only half say students work together to improve mental health in their campus community. Those attending four-year colleges and universities are more concerned about student mental health.

Generally speaking, more than three-quarters (78.4%) of college students agree that mental health impacts their college or university campus community. Yet, only half (50%) believe that students actively identify mental health challenges, brainstorm shared solutions, and collaborate with other students and organizations to work together to improve mental health on their college campus. As

compared to students attending two-year colleges, a greater percentage of students at four-year colleges and universities agree that students on their campus a) are concerned about mental health; b) talk openly about mental health; c) feel that mental health impacts their campus community; and, d) work together to improve student mental health.

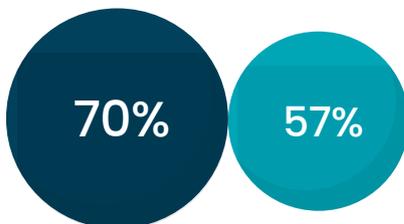## COLLEGE STUDENTS' CONCERN ABOUT MENTAL HEALTH BY INSTITUTION TYPE
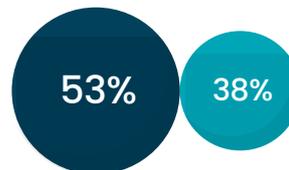
● Four-year
● Two-year

70% **52%**

Believe students at their college or university are concerned about mental health

81% **63%**

Believe students at their college or university feel that mental health impacts their campus community

70% **57%**
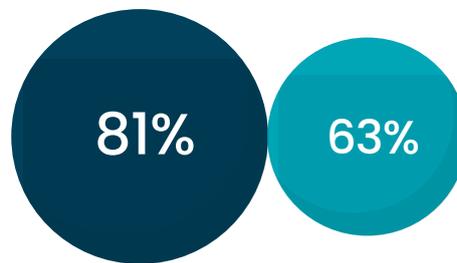
Believe students at their college or university talk openly about mental health

53% **38%**

Believe students at their college or university work together to improve student mental health

College students agree that there is a shared concern among students on their campus about mental health. While more than two-thirds (67.6%) of all college students agree that students at their college or university are concerned about mental health, Latino/a/e college students are the least likely to feel this way with less than half (47.4%) indicating agreement. Multiracial (84.2%) and Asian American/Asian (82.5%)

college students are most likely to agree that other students on their campus feel that mental health impacts their campus community. There are no statistically significant differences among racial and ethnic groups in their perception of the concern their friends have about mental health, how students talk openly about mental health, and how students work together to improve student mental health.

COLLEGE STUDENTS' CONCERN ABOUT
MENTAL HEALTH BY RACE/ETHNICITY

	Multiracial	Asian American or Asian	White	African American or Black	Latino/a/e
Believe students are concerned about mental health	75.2%	72.0%	69.0%	61.6%	47.4%
Believe mental health impacts campus community	84.2%	82.5%	78.9%	73.2%	66.1%

Legend:
- Believe students at their college or university are concerned about mental health
- Believe students at their college or university feel that mental health impacts their campus community

Implications
for Practice

1. Address the Epidemic of Loneliness, Especially for LGBQ+ Students

Loneliness is one of the top predictors of psychological distress and negative mental health outcomes. With many college students continuing to experience loneliness, and its predictive relationship on psychological distress, colleges and universities are uniquely positioned to support and address student mental health needs.

> LGBQ+ students may have an increased likelihood of experiencing loneliness. However, those with family and friend support, greater shared concern about mental health, and more positive perceptions of how their college or university values and prioritizes mental health may experience greater connection and less loneliness. Colleges and universities can work to improve the protective factors to reduce loneliness for LGBQ+ students.

> Facilitating connection and creating in-person or virtual spaces, for all students, especially for LGBQ+ students, to establish relationships with others may be beneficial for the individual, their friends, and their peers at large.

2. Tailor Mental Health Resources to Students' Needs and Identities

Since having good mental health is important to college students, there are many opportunities to build, expand, and grow campus-wide programs, initiatives, and policies to support student mental health. Currently, many mental health programs are created to address mental health concerns at the individual level, such as in-person and virtual counseling services, online self-help programs, and campus self-care events, and these initiatives continue to be valuable.

> With more Black and Latino/a/e college students prioritizing and caring for their own mental health, tailoring services is necessary to ensure their mental health needs are met and they feel supported when engaging with campus mental health services and offerings. For example, ensuring access to mental health providers who identify as people of color, speak multiple languages, and reflect students' lived identities may make students feel more comfortable seeking support.

> There is an opportunity to further explore why fewer Latino/a/e college students feel that other students at their college or university are concerned about mental health.

3. Equip Students with Skills to Support Each Other

College students are interested and willing to support their friends and help them take care of their mental health. Programs aimed at the interpersonal level, such as formal or informal peer support programs, emotional literacy programs, peer coaching programs, and virtual peer communities, may help students gain the knowledge and skills to adequately support their friends without feeling like they have to be an expert to help.

> Since LGBQ+ college students are more concerned and more interested in helping their friends take care of their mental health than their non-LGBQ+ peers, they may be able to serve as peer supporters or advocates to work with others to improve their mental health.

> For students attending two-year colleges, there is an opportunity to build programming designed to start conversations and talk openly about mental health. Because of the commuter nature of two-year colleges, students attending these schools may spend less time engaging in campus activities than their four-year college counterparts. Therefore, embedding mental health in existing programming, creating awareness events, providing virtual services, and sharing the impact of mental health on the campus may be beneficial.

4. Encourage Student Voices and Advocacy in Decision-Making

College students understand and experience the unique ways mental health impacts their communities. On college and university campuses, students can be and are fundamental drivers of change.

> With only half of students agreeing that their peers on campus work together to improve mental health, there is the opportunity to better engage them in mental health change and to invite more diverse voices into the mental health conversation. This may include having student representation on a mental health taskforce or student fee committees, encouraging collaboration between student organizations for campus-wide change, and co-writing college and university mental health policies with students.

> Those attending four-year colleges and universities believe students are concerned and talking about mental health and that mental health impacts their college campus. Therefore, they may be better positioned to work together and take action to improve mental health for themselves, their friends, and other students.

The benefits of supporting college student mental health are clear for students, colleges and universities, and society. College students who feel supported, connected, and have access to the mental health care they need are more likely to graduate and experience better mental health outcomes while on campus and in the future.

Demographics
and Methodology

Average age 21.85 (range 18 to 26, SD=1.908)

Gender	N (%)
Cisgender man	299 (27.6)
Cisgender woman	660 (60.8)
Transgender, nonbinary, or questioning	125 (11.5)
Total	1084* (100)

Five missing values

LGBQ+ (Includes those who identify as lesbian, gay, bisexual, asexual, pansexual, queer, questioning, or another sexual orientation)	N (%)
Yes	461 (42.4)
No	627 (57.6)
Total	1088* (100)

One missing value

Race	N (%)
African American/Black	113 (10.4)
American Indian or Alaskan Native	2 (0.2)
Asian American/Asian	258 (23.7)
Latino/a/e only (Includes individuals who solely identify as Latino/a/e)	97 (8.9)
Middle Eastern/Arab/ Arab American	8 (0.7)
Multiracial (Identifying two or more races)	101 (9.3)
Native Hawaiian or Pacific Islander	2 (0.2)
White	506 (46.5)
Prefer not to disclose	2 (0.2)
Total	1089 (100)

Latino/a/e	N (%)
Yes	180 (16.5)
No	909 (83.5)
Total	1089 (100)

Two- or Four-Year College/University	N (%)
Two-year College	160 (14.7)
Four-year College/University	929 (85.3)
Total	1089 (100)

Demographics Cont.

Psychological distress	N (%)
Low distress (K6 score <13)	775 (71.2)
High distress (K6 score ≥13)	314 (28.8)
Total	1089 (100)

Loneliness	N (%)
Not lonely (UCLA Loneliness score <6)	384 (35.3)
Lonely (UCLA Loneliness score ≥6)	705 (64.7)
Total	1089 (100)

Methodology

A quantitative cross-sectional design was used to collect data through an online survey platform between February 19 and 29, 2024. A stratified sample of individuals ages 18 to 26 years who attend a two- or four-year college or university in the United States was recruited via Prolific, an online participant pool. No recruitment was conducted via Active Minds' or TimelyCare's website or social media channels. In order to ensure the representativeness of the sample, targeted recruitment was conducted to ensure adequate sample sizes with respect to current college enrollment, gender identity, race/ethnicity, and sexual orientation. Inclusion criteria included being age 18 to 26 and currently enrolled as a college student in the U.S. Exclusion criteria included failing the validity check and not being enrolled at a college or university in the U.S. Upon completion of the survey, participants received a $2.75 incentive for their time.

Individuals who met inclusion criteria completed a 67-item Likert-type online questionnaire. Questions included items from the Adapted Life Values Inventory (Brown & Crace, 1996), the Community Mobilization Measure (Lippman et al., 2016, reliability: α=.773), the UCLA Loneliness Scale (Hughes et al., 2004, reliability: α=.838), the Everyday Discrimination Scale (Williams, 1997, reliability: α=.925), the Lubben Social Network Scale (Lubben et al., 2006) for family (reliability: α=.938) and friends (reliability: α=.882), and the Kessler Psychological Distress Scale (Kessler et al., 2003, reliability: α=.873). Due to limited variability, scales were collapsed from five response categories (strongly agree/agree, neither agree nor disagree, disagree/strongly disagree) to three categories (agree, neither agree nor disagree, or disagree). Agreement and disagreement in this report represent the collapsed response categories.

Although 1,144 individuals began the survey, 21 were ineligible due to sampling inclusion requirements and 33 were excluded for validity check failure. This resulted in a final analytic sample of 1,089 college students ages 18 to 26 years who resided in the U.S. Some items remain missing based on the nonresponse of participants. Chi-square tests were used to examine differences between demographic groups (race, ethnicity, gender, sexual orientation), loneliness, psychological distress, discrimination, shared concern about mental health, and social support. Correlations were calculated to determine relationships between constructs. All reported comparisons are statistically significant at least at *p<0.05*. This means there is less than a 5% likelihood these results occurred by chance.

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active minds

Active Minds is a leading non-profit organization dedicated to promoting mental health awareness and providing resources for mental health support, with an emphasis on mobilizing youth and young adults. With a mission to reduce stigma and encourage open conversations, Active Minds is a pivotal force in fostering a supportive mental health community.

To learn more, visit activeminds.org.

timelycare

TimelyCare is higher education's most trusted virtual health and well-being provider, with a mission to foster student success and improve the health and well-being of campus communities. Founded in 2017, TimelyCare serves 2.3+ million students, educators and staff at more than 350 campuses nationwide. Today its comprehensive suite of services – including mental health counseling, on-demand emotional support, medical care, psychiatric care, health coaching, student success coaching, basic needs assistance, faculty and staff guidance, peer support and self-guided wellness tools – expands the breadth of school resources and empowers students, educators, and staff to be well and thrive in all aspects of their lives.

To learn more, visit timelycare.com.