Background

Mental health conditions among college students, such as depression, anxiety, and eating disorders, are associated with several academic challenges (e.g., lower grades, dropping classes) and higher probability of dropping out of college.¹ ² Many students with mental health conditions attempt college but never finish, and often rack up extensive financial debt while doing so.³ Failure to complete post-secondary education can have long-term negative effects on employment and income.⁴ The median weekly earnings of a full-time worker with a high school diploma is almost half of that compared to a full-time worker with a bachelor’s degree.⁵ A high school degree is no longer sufficient for attaining and sustaining well-compensated employment.

Meanwhile, many colleges and universities lack the budget, staff, and resources needed to support the influx of students with mental health conditions who have matriculated to campus in recent years.⁶ Disability office staff often lack sufficient knowledge of the appropriate accommodation needs of students with mental health conditions.⁷ ⁸ Furthermore, students with mental health conditions are often unaware that these academic services and supports are available to them⁹ ¹² or are not willing to disclose their mental health disability or seek help given the high likelihood of stigma and discrimination.⁹ ¹⁰

Educational research indicates that college students of “traditional age” (ages 18-24) differ from college students of “non-traditional age” (ages 25 and older) on several psychological and social-cognitive domains, which in turn may lead to very different academic experiences.¹³ ¹⁴ Unfortunately, most of the literature to date that describes the experiences of college students with mental health conditions is based on research with college students of all ages (ages 18-60+) and no research has explored potential age differences in the experiences of college students with mental health conditions. Utilization of therapeutic and academic supports and services is dependent on individual help-seeking behaviors, skills, and attitudes which are impacted by a student’s developmental maturity and life experiences. Decision-making skills and the ability to weigh the costs and benefits of an action are dependent on psychological factors that develop over time.¹⁵ Previous or concurrent work-based or school-based learning in which individuals gain experience exercising skills such as self-determination, self-advocacy, and self-efficacy are also influential. As a result, more traditional (i.e., younger) college students may seek and navigate academic supports and services
differently than non-traditional (i.e., older) college students.

This brief describes a small secondary analysis that set out to compare traditional versus non-traditional students in three areas:

- Academic characteristics and mental health experiences
- Accessing academic services and supports
- Campus engagement, relationships on campus, and overall satisfaction

A better understanding of these differences can inform the design and delivery of effective academic supports and possibly lead to more academic success for college students with mental health conditions.

**Methods**

We conducted a secondary analysis of a previously collected dataset from a national online survey collected in 2005-2006 in which previous and current college students who self-identified as having a mental health condition described their academic experiences in college.\textsuperscript{10,16} We limited the sample to current college students at the time of the survey and respondents were categorized as either traditional (ages 18-24) or non-traditional (age 25 and over). Descriptive statistics were run to examine age differences in demographic and mental health characteristics. Age differences in categorical variables were analyzed using Pearson chi-square. Univariate and Multivariate analyses of variance (ANOVA and MANOVA) were run to investigate age differences in specific measures of campus engagement, relationships, and overall satisfaction.

**Results**

The dataset was comprised of 73 traditional and 68 non-traditional undergraduates and most of them identified as white and female. Traditional students were more likely to be enrolled on a full-time basis (83.6% vs. 52.9%, \textit{p}=.000) and less likely to have transferred from another school (27.4% vs. 70.1%, \textit{p}=.000) compared to non-traditional students. Non-traditional students were more likely to have a prior history of vocational training or education (88.2% vs. 42.5%, \textit{p}=.000).

**Mental Health Experiences**

Over 40% of traditional students ages 18-24 reported that their psychiatric symptoms affected their educational experience “most of the time” compared to 25% of non-traditional students ages 25+. Most of the students were on psychiatric medications and about half of the participants in each group indicated that their medications caused side effects that were barriers to their educational success.

**Accessing Academic Services and Supports**

Traditional students were significantly less likely to utilize disability services on campus compared to non-traditional students (56.7% vs. 39.7%, \textit{p}<.05). While not statistically significant, traditional students were also less likely than non-traditional students to report being familiar with (65.8% vs. 76.5%) and to request academic accommodations (46.6% vs. 60.3).

Both groups reported experiencing difficulties when requesting or receiving accommodations because they believed they did not need them, they didn’t want to disclose that information to faculty members, and they feared they would be stigmatized by faculty members. When they did request accommodations, traditional students were twice as likely to feel inferior to other students (61.8% vs. 29.3%, \textit{p}=.005) and more likely to have difficulty defining/deciding what accommodations were appropriate (61.8 vs. 39%, \textit{p}=.05) compared to non-traditional students.

**Campus Engagement, Relationships on Campus, and Overall Satisfaction**

Campus engagement, relationships on campus, and satisfaction were measured using the College Students Experience Questionnaire 4th Edition (CSEQ).\textsuperscript{16,17} Campus engagement was measured with three indices measuring experiences with faculty, use of campus facilities, and involvement in clubs and organizations. No statistically significant differences between tradi-
tional and non-traditional students were discovered.

**Relationships on campus** was measured based on three self-ratings about the quality of participants’ relationships with students, faculty, and administrative staff. Traditional students had significantly poorer relationship quality with administrative staff (3.76 vs 4.88, *p*=.000) indicating that their interactions were more impersonal and rigid.

**Satisfaction with their college experience** was measured with two questions (“how well do you like college” and “would you go to the same institution you are now attending”) that were scored individually and were combined into an overall satisfaction. When asked “how well do you like college”, traditional students on average indicated they liked college significantly less than non-traditional students (2.97 vs. 3.37, *p*=.012). When combined with a question “would you go to the same institution you are now attending”, traditional students had lower combined satisfaction scores when compared to non-traditional students (Wilkes lambda .950, *p*=.044).

**Key Implications**

- “One size does not fit all” when it comes to appropriately supporting the academic pursuits of college students with mental health conditions. Faculty and staff need to be trained to recognize that student capacities and experience vary not just due to the potential impact of gender, race, or class, but also due to age and life experiences. Lower levels of self-awareness and self-advocacy skills in young adults could help explain the observed age differences. Furthermore, older adults had more previous education experiences in which they may have been able to practice self-advocacy skills. Future research to evaluate the impact of these characteristics on academic help-seeking is needed to help increase the use of, and improve the nature of, academic supports.

- We need more evidence-based practices to support the academic needs of college students with mental health conditions and that are developmentally tailored and age-appropriate. Existing services to support college students with mental health conditions often assume that young adult college students with mental health conditions will be aware of the supports available to them and actively seek them out. If academic support services are not designed with the developmental stage of young adulthood in mind and the effects that development can have on engagement and retention, they may not be able to succeed in effectively supporting students with mental health conditions. Tenuous relationships with administrative staff, including staff at offices of disability services, campus counseling, or other support services, further erode the possibility that young adults will feel comfortable navigating these services independently.

- **More concerted efforts to combat stigma on campus are needed for students, faculty and staff.** Services and supports are designed on the premise that college students will disregard perceived stigma in order to seek help, but that is clearly not always the case. Campus-based anti-stigma initiatives like Active Minds are promising, but formal trainings that target staff, faculty, and students may be needed to change the overall climate towards mental health on campuses.

- Prior research illustrates that low levels of satisfaction are associated with low rates of retention. An investment to support the academic needs of young adult college students with mental health conditions could translate into higher retention rates, which is more economically efficient for both students and schools.

**Conclusion**

This study reveals that traditional undergraduate students (i.e., younger) with mental health conditions are less likely to utilize disability services and are more likely to feel inferior to other students. Traditional
students also have more difficulty determining what accommodations are appropriate when trying to access accommodations than non-traditional (i.e., older) students. Traditional students also have more tenuous relationships with administrative staff and are less satisfied with their college experience compared to non-traditional students. Students of all ages referenced symptoms of their mental health condition and side effects of psychiatric medications interfering with their education and cited concerns about stigma/discrimination when navigating academic supports on campus. Based on these findings, it appears that there are developmental or other psycho-social differences between younger and older adult college students that need to be further investigated.

**Limitations**

Due to the nature of a secondary data analysis, researchers were limited by the original survey questions and data points that had already been assessed thereby limiting the scope of our research questions and analysis. Furthermore, by limiting the dataset to only undergraduates, resulting sub-samples were small and limited our ability to detect significant statistical differences.

**References**


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