

AET Conference 2023



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Mind the Gap: Supporting
Successful Transition.



From Newcastle. **For the world.**

Mind the Gap

Why is there a gap?

The onset of most mental illness experiences occur between the ages of 14 and 24.

- 20% of adolescents may experience a mental health problem in any given year
- 50% of mental health problems are established by age 14 and 75% by age 24.

This can be exacerbated if you are under:

- Social pressure
- Cognitive pressure
- Financial pressure
- Separated from primary support networks
- Use drugs or alcohol as a coping strategy

[Nice 2022](#)

Add to this the challenging life experiences of:

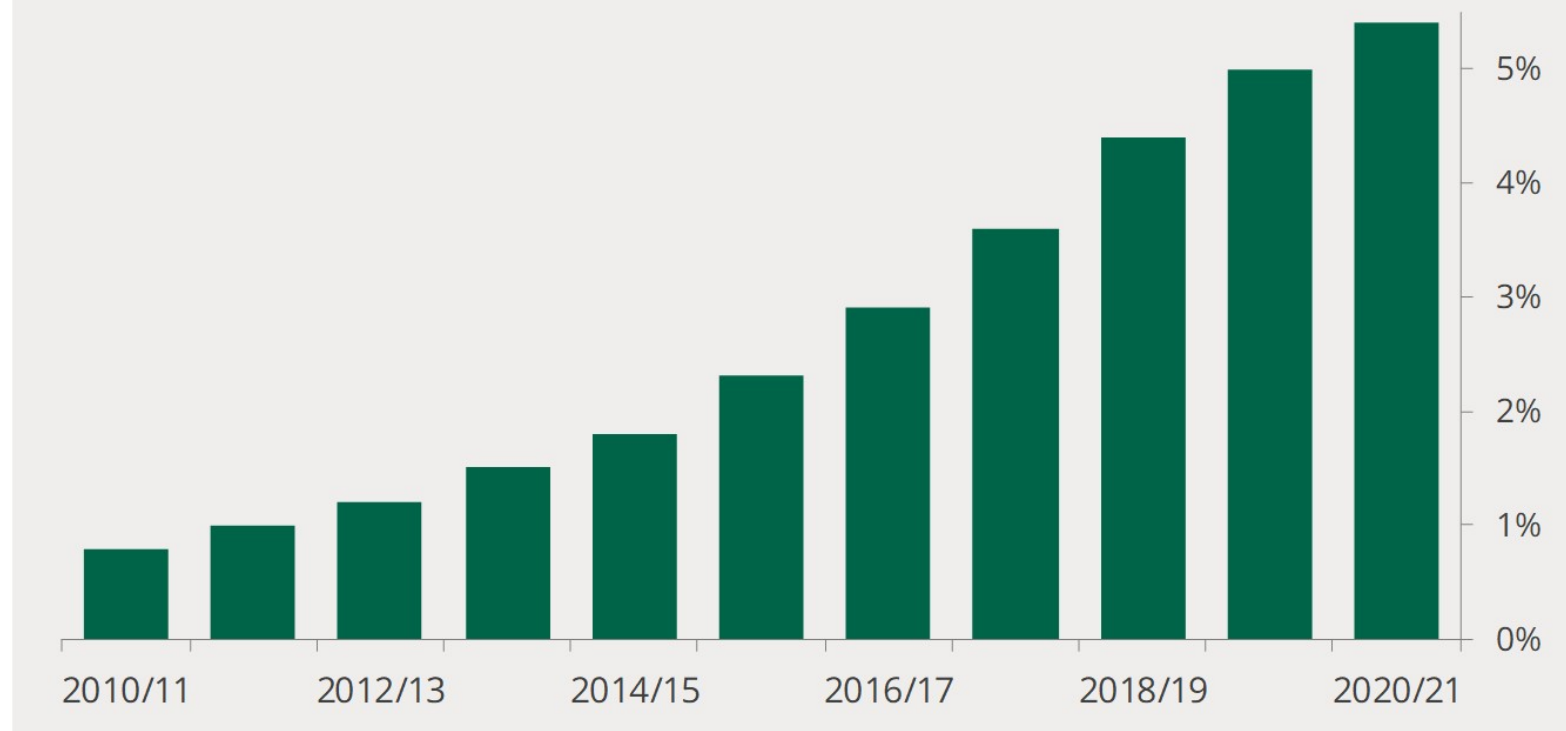
- Being from a marginalised community
- A student carer
- Surviving sexual violence
- Suffering early family ill health & bereavement
- Parental estrangement
- Being a trans or non-binary person in a not always very accepting society

How big is the gap?

The proportion of UK students who disclosed a **mental health condition** to their university, has increased rapidly since 2010 and was over 5% in 2020/21.

Mental health conditions reported by students in 2020/21 nearly seven times as high as a decade earlier

Home students reporting a mental health condition, England



[30 May, 2023. Student mental health in England: Statistics, policy, and guidance](#)

How big is the gap?

Half of all young people in the UK are now going to university – where the media tells us there is a growing mental health crisis.

Student Minds (2022)

- [57% of respondents self-reported a mental health issue](#)
- 27% said they had a diagnosed mental health condition.

What is the gap called?

- Mental health?
- Mental illness?
- poor mental health?
- Mental health disability?
- Emotional distress?

Mental distress is not the same as a mental illness.

How big is the gap really?

- Rates of diagnosed mental illnesses in young people within the UK, remain relatively stable.
- The 2013 change, lowered diagnostic thresholds for some mental illnesses.
So, we have a change of definitions, rather than a change in levels of mental illness.
- University students are not immune from a diagnosed mental illness.
- Some arrive with pre-existing mental illness, and some will develop a mental illness while at university.
- In either case, they need access to prompt treatment! Misusing drugs and alcohol to self soothe can be a risk.

Bridging the Gap

What do students need to be ready for University?

- Qualifications
- Tech - laptop, phone, headphones
- Ikea starter pack
- Uber account
- Netflix passwords (other streaming providers are available)
- How to peel a potato

These are the common practical things; practical readiness is important as poor practical readiness can diminish mental health.

Student readiness?

What do students need to be ready for University?

1. Social pressure

- Meet the community before they arrive

2. Cognitive pressure

- Self-directed learning ability

3. Financial pressure

- Mr Micawbers principle

4. Separated from primary support networks

- Primary care giver comms pattern (see one) Peel a potato

What can we do?

Young people define much of their experience by the adult response so...

- Don't medicalise normal human experience
- Normalise without trivialising

- Help them to develop practical skills. *“Peel a potato”*
- Allow opportunities for self-achievement *“where the hairbands?”*
- MH self-awareness, do they know their personal flags?
- Develop self-soothing ability
- Ensure they have proven/practice/planned healthy coping strategies
- Ensure they have proven/practice/planned help seeking behaviour pattern