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The Passive Approach: How Academically Motivated Students Approach their Mental Health.

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Background

Mental health has become a prominent aspect of healthcare and well-being. It includes "emotional, psychological, and social well-being," as described by the Centers for Disease Control and Prevention, and plays an important role in how individuals behave and experience life (Centers for Disease Control and Prevention, 2021). The mental health of individuals in certain populations can be at an increased risk; one of these populations is college students. Most collegiate adolescents experience a significant change in their personal life, workload, and schedule during their college years. Concern for the mental health of college students is growing, with many students experiencing symptoms of anxiety and depression. (American Psychological Association, 2013). The American Psychological Association surveyed universities and found that "70% of [university] directors believe that the number of students with severe psychological problems on their campus has increased in the last year." Further, the survey found that anxiety is the top concern of university administrators and faculty, at 41.6%, with depression at 36.4% (American Psychological Association, 2013).

At Portland State University, 49.0% of students have felt that mental health concerns have negatively impacted their academics (Center for Student Health & Counseling, 2020). Students also felt that anxiety, depression, and sleep difficulties negatively impacted their academic performance, with 41.1%, 34.9%, and 29.8% of students, respectively, responding that these factors affected them (Center for Student Health & Counseling, 2020). To put these statistics into perspective, the reported effects of mental health concerns on Portland State University students are nearly double that of students around the United States (Community Commons, n.d.).

Numerous factors can impact mental health. Some of these factors are defined as social determinants, for example "socioeconomic status, education, the physical environment, employment, and social support networks, as well as access to healthcare" (Gurch, 2018). There are many ways students can approach their mental health. Whether they choose to care for it or cope with its fluctuations, students have significant personal experiences and insight.

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[1] This article, which was based on a class project rather than a research study, was not reviewed by the PSU IRB.

Academically motivated students are a subpopulation of students analyzed in this study. For the purpose of the study, I define academically motivated students as those that actively participate in class, are well prepared, tend to receive high grades, and want to be present in class. They are often students identified as 'gifted' in their primary education experience. This group of students experience "increased expectations from people around to give above-standard performance, which should be demonstrated by a gifted pupil automatically" (Klimecká, 2022), in comparison to other students who may not experience the same level of expectations. Academically motivated students may also have perfectionist tendencies, causing them to put increased pressure on themselves and their capabilities (Cross, 2015).

Understanding how these students think is beneficial for creating systems to support them better. It is particularly beneficial in the case of Portland State University's undergraduate students, whose mental health appeared to be in a more dire state than their peers at other universities. Thus, this research will seek to understand how academically motivated Portland State University undergraduate students approach their mental health.

Literature Review

There is existing psychology and public health research related to college students' mental health. The conversation focuses on the statistical relationship between mental health or quality of life and impacting factors or coping mechanisms. Jennifer Hefner and Daniel Eisenberg's study, "Social Support and Mental Health Among College Students," analyzes students' perceived support quality. Their perceptions of the support they received had a significant impact on their reported mental health. If students perceived the quality of their support to be high, a lower likelihood of depression, anxiety, suicidality, and eating disorder was strongly associated (Hefner & Eisenberg, 2009, 496).

Another study done by Truc Thanh Thai et al., titled "Perceived stress and coping strategies in high school gifted students in Ho Chi Minh City, Vietnam," examines whether students were coping with their workload in healthy ways. The study found that students who had healthy relationships with peers and instructors were more likely to utilize coping strategies such as problem-solving than peers who did not have healthy relationships (Thai et al., 2020, 103). These two studies heavily utilize surveys as their method of data collection. Following the surveys, statistical analysis was used to arrive at the conclusions. These studies create a foundation for further research to build on. Statistical analysis provides beneficial information, but it does not provide in-depth information on the students' experiences and opinions.

The article "Psychological Well-Being of Students With High Abilities and Their School's Ecology: Is There a Relationship?" by Susan Burkett-Mckee, Bruce Allen Knight, and Michelle Avila Vanderburg calls on the discourse community to look more closely at how students are interacting with their school system and how those interactions affect their mental well-being. This research responds to a call made by Burkett-Mckee et al. who wrote that "students are not passive individuals within the school ecology," describing how they are active participants whose experiences within the school system should be heard and researched (Burkett-McKee et al., 2021, 206). Qualitative methods provide information on the students' opinions and experiences.

Existing studies focus on "gifted students" (Klimecká, 2022; Cross, 2015; Burkett-McKee et al., 2021, 206; Thai et al., 2020), a term that is closely related to "academically motivated students," which is used here. The study participants stated that they were identified as gifted students during their primary education. By the time these students reach university, the use of the term "gifted" to describe students has typically subsided, making the identification of "academically motivated students" an excellent way to continue researching this population's mental health. The research around how academically motivated students approach their mental health provides more context to current statistics. The study utilizes qualitative methods to understand how students approach their mental health. Further, the study provides an in-depth look at students' interactions and experiences with the Portland State University.

Methods

Within my classes, I noticed students who actively participated, were well prepared for class, seemed to be successful, and wanted to be present in class. I chose to define this population as academically motivated students. I selected participants based on my observations of their behavior and my in-class interactions with these students. Five selected individuals then participated in interviews and a focus group for data collection. All the selected participants were Portland State University undergraduate students.

I conducted three interviews at a length of thirty minutes each. The content revolved around the interviewee exploring their academic experience, stress levels, mental health, and its impact on their life. An interview guide was used to facilitate the conversation, consisting of questions and topics. The most prominent questions in the interviews were related to what motivates students, what role stress plays in their lives, and what aspects of their life factor into their stress levels, both positively and negatively. All the interview participants are represented by the initials MS, as in Motivated Student.

The focus group was conducted with three individuals at a length of about forty-five minutes. The content of the focus group was similar to that of the interviews. The students identified the aspects of life that create stress for them and explained if and how they choose to manage this stress. A focus group guide was created to facilitate the discussion. It consisted of a mix of broad questions and topics. Prior to the start of the discussion, it was made clear to the participants that the goal of the focus group was to hear their thoughts around the topic. The guide was not in ultimate control of the conversation—the students were. The focus group participants are represented by the labels S1, S2, and S3, as in student 1, 2 and 3. Overall, five participants were involved in the interviews and focus group. Three students were interviewed and one of the students participated in the focus group as well, along with two other students.

A grounded theory approach was used to analyze the data by looking for emergent themes. Open coding was used, and then the data were grouped into categories which became the identified themes. Topics were considered themes when at least three of the five students brought them up in the interviews or focus group. These themes were often the most prominent aspects of conversation as well.

I was at an advantage with my data collection due to some aspects of my identity. My interviewees were peers, which created an equal sense of power and trust. My questioning pertained to mental health and the students' experiences. Because I was a student, the interviewees were more comfortable with sharing their honest opinions. I also believe that my gender identity impacted my participants' willingness to open up. As a female, I am often perceived to be more emotional and sensitive, mainly because I present myself very femininely. So, an interview on this topic performed by a female likely felt very natural to the participants. In comparison, an interview conducted by a very masculine-presenting man could be uncomfortable for a participant. They may not understand why a more masculine individual is interested in their emotional state. Due to these reasons, I quickly developed rapport with my participants. They viewed me as a safe person to share their experiences with and perhaps assumed that we had shared experiences.

Results

Lack of Proactive Steps

The participants directly answered the research question very early in the conversation. These students do not proactively care for their mental health and only do so as a short-term fix. Most described how they felt that they did not actively take steps to care for their mental health. More accurately, they felt that

they coped with it at the moment and dealt with issues as they arose rather than taking proactive measures. One of the students described this approach very eloquently, stating:

> I don't really feel like I approach it. I feel like I just run through it. It doesn't feel like something separate from me […] I experience it but I don't feel like I'm like approaching it myself. Like even when I'm taking steps to help my mental health. It doesn't really feel like I'm approaching it. I just feel like I'm walking with myself. It's a very integrated process for me.

This was a shared feeling among all participants. Most of the time, it was easier to deal with things as they came along or push through whatever stressful situation they were in and ignore their feelings until they felt capable of processing them. Others briefly describe the experience by saying, "I just let it happen. If I stress out, I stress out." Or "I would like to say I manage it well, but that would be a lie."

The students collectively agreed that there were different beneficial things they could do for their mental health, when possible, but they did not prioritize these actions. Some talked about meditation; others referenced personal time and rest. One student talked about eating their favorite foods and playing video games. The following statements are some of the various things that students try to do when possible to manage their mental health:

> I'm getting into meditation and that's not terrible. It's good for me. And working out is good too.
> Eat food that I really, really like. I do enjoy lifting weights and I haven't done that nearly as much as I would like to recently [...] then watching something, a show or YouTube video that I really enjoy. Yeah, and playing games for the fun of it.

All participants also found that their friends were their primary supporters. It was due to accessibility for some, particularly if their family lived far away. For others, it was because they felt more comfortable voicing their concerns and problems to friends than family. One participant described how they would purposefully "go out of [their] way to see friends" and receive that social support.

This aspect of the interviews and focus group indicated that students have a general idea of what actions they can take that are beneficial to their mental health or to relieve stress. Still, they felt that this is not their primary response to their mental health.

The Passive Approach

I found very quickly that the participants took a passive approach to their mental health. Following this, it became a question of why they did so. The participants brought to light four prominent reasons why they end up dealing with and thinking about their mental health in this manner.

Time Constraints

The first reason was time constraints. The participants were very passionate about how they choose to manage their time and what they are expected to do with their time. As academically motivated students, their primary concern is school. Due to this, they spend most of their time in classes and working on assignments, but they also have other responsibilities. A student from the focus group describes the workload expectation they feel:

> People assume if you are in school full-time that that's all that you're doing. Like "why aren't you doing better in classes? Why aren't you studying more?" Like I'm a full-time student and I work two full-time jobs. Like I'm not just a full-time student.

Another student described their academic expectations as stated by their academic advisor and how when it comes down to it, they just run out of time:

> My advisor was like "make sure you're taking care of yourself and taking time to exercise and go on walks and talk with someone." I was like "okay." While she's also like telling me all the classes I need to take. And that I should be having an internship. But yeah there's just definitely not enough time to do stuff.

Although they are very motivated and hard-working students, people forget that they are not just students. Even when they are solely working on their academics, there is a vast amount expected from them. Students do their best to manage all that is expected of them, but it becomes very time-consuming. In that sense, these students do not end up with extra time to care for themselves and their mental health.

Generational Differences

The second reason students approach their mental health passively is generational differences. The participants acknowledged that their family significantly influenced their mental health approach while also developing

different practices among their peers. Most of the participants were from families that did not openly talk about mental health or did not perceive it as significant. Due to this, students found their mental health difficult to talk about, and they felt shame in actively caring for themselves through things like therapy. One student described possible familial influences in the following statement:

> I feel like it's hard to talk about, especially if you have generations in your family, like people have stuff and people kind of talked about it. But also it was something that you didn't really acknowledge that much cause it was like a failing, like a personal failing.

They describe how acknowledging one's mental health and needing help can feel very abnormal if one was raised to think otherwise. Although the familial influence is present, there is a distinct difference between how students aged 18-30 and older generations currently handle their mental health. One of the participants described how students have very casual conversations with their peers about their mental health:

> We're different. We're pretty open about our problems […] we could talk about it and laugh. I feel like generations in the past, they were just like so closed minded about it. It wasn't talked about. And now that it is and it's accepted, it's hard to find professional help for it. It just all of a sudden became an open topic, and now people are really seeking help. So, it's easier to laugh about with your friends than try to get real help cause it's just so hard.

They acknowledge how the taboo around mental health is fading, and more people are starting to access resources. For students, it is currently easier to have a very casual conversation with a friend about their mental health, which was not commonly accepted in previous generations.

Educational Flaws

The third reason that academically motivated students passively approach their mental health is due to how the education system has treated mental health. One of the students described how they were not taught about mental health in their primary education:

> I think that it should be something that's taught in schools and by your parents. Just like your physical health is, you know. Like I'm not saying dedicated classes every single year. You know what I mean? But I remember growing up in school, having at least a couple lessons every

year or like units every year about physical health. Like we have PE classes in middle school and high school, all of these things… But rarely did we ever talk about mental health. So, I just feel like it should be taught to people so that it's natural. So that they don't have to particularly depend on somebody else to point it out to them…I also think that we should be raised with that self-awareness to be able to reflect on our own mental health.

If students are not taught about mental health through their primary education and high school, they end up in college with a large workload and little idea of how to care for themselves. It then became a discussion about what the university should be doing to care for its students or how much involvement they should have. All participants felt that the university is partly responsible for students' mental health and well-being. However, this often takes the form of professor support. They did not mean professor support in the sense of the professor monitoring students' mental health, but in the sense that a professor is responsible for creating an environment where a student can succeed. Another aspect of supporting students is simply having empathy and understanding for them. Two students detailed personal situations where there was a lack of communication and understanding with their professors. The first explained that:

I had one professor where he was like "yea I wanted the average to be a 60%." And he hadn't told us that until like week seven. And so, I knew someone that dropped and I ended up getting an A in that class. But I was like "I don't know why this is so hard." So that was really stressful.

Here, the student is talking about how the expectations for their class were unclear and thus there was a lack of understanding between the professor and student. The next student described how they almost did not finish a semester because they had appendicitis and had to have an appendectomy. Yet, they had a professor that told them they must show up for a test soon after their surgery.

I took that test, and I got a C on that test. That destroyed my mental health. Teachers who do not care…But just the fact that that teacher did not care, made me really scared to talk to other teachers and reach out when I need help. Cause he totally rejected it. I had a very good story.

One of the participants described professors' responsibility by stating, "It's not a professor's job to care for a student and their mental health. But it is their job to deliver material well enough, so the student is not left learning on their own." The statement further explains how professors' responsibility is to make

the class content accessible and eliminate unnecessary stresses for students. Overall, students have been taught to be passive because the education system has not actively taught them otherwise. At a university level, ineffective teaching creates high stress for students who will revert to passive coping mechanisms, for that may be all they know.

Inadequate Resources

The last reason students may take a passive approach to their mental health is that they do not find the existing resources accessible. Portland State University provides mental health resources for its students. A significant complaint from students is that campus events, stress relief activities, and other resources are typically scheduled when they have classes or work. One voiced their frustration with the campus therapy, saying, "Therapists, of course, are just like any other businesses, they're going to be open from 9:00am to 6:00pm. But that's when classes are…." Another student described fears that students share about the quality of campus therapy not being worth the limited time individuals have available:

> I constantly hear horror stories about how bad college therapists can be and how overworked. And like, even if they're good, they can be horribly overworked and might not give you as much time as you need or deserve. So that always makes me like… Has me really worried because it takes a while to build up that rapport and be able to open up with a therapist and develop that connection, you know. So I can't I can't speak for PSUs [Portland State University] services directly, but like these things I hear from my friends and other people at their colleges. It doesn't give me a whole lot of faith. And that already lessens like how much I want to or can try it like because of other responsibilities already. I do think it's great that they're giving out resources. But again, it's mainly the fact that we have so much to do that we can't really make great use of those resources.

Another participant described in an interview that some students may not use these resources because they are advertised ineffectively. They describe how the resources are not presented in a way that makes students want to access them:

> I would say they're under utilized, purely and if only for this reason because their advertising is very cheesy. Or it just feels like, it feels almost like this weird, industrial mocking. Even though I know it's not, it's just like the very corporate way that these things are being advertised and pushed out to students makes it feel almost intimidating, like a joke almost.

Advertising mental health services in a manner that is not appealing to students is not going to encourage them to actively approach their mental health. Due to these reasons, students involved in this study would not choose to seek these services.

Conclusion

This study utilized qualitative methods to collect data on academically motivated students' experiences with their mental health. It found that students often take a passive approach to their mental health because of lack of time, generational norms, educational system flaws, and inaccessibility of provided resources. Students lack time to care for themselves due to high workloads and expectations about how they should manage their time. Academically motivated students often experience generational differences around mental health. They may have been raised to see mental health discussions as a taboo but can now be very casual around the topic with their peers.

Further, any potential resources to assist them require significant time and effort to access, and thus are inconvenient. Some of these services do not even feel worth using. Finally, academically motivated students were rarely taught about mental health throughout their earlier education. This makes it incredibly challenging for students to learn healthy coping strategies in adulthood. These factors contribute to academically motivated students' passive approach to their mental health. They take a passive approach simply because it is the easiest option. Although not the healthiest, doing nothing is easier and more achievable than doing something. This is a saddening truth about academically motivated students' mental health care. They push themselves to the extreme in their academic careers and scarcely have the energy to care for themselves.

It is important to note that students themselves do have the power to create more agency in their mental health. Even with the current social and institutional constraints, students can leverage the outlets they currently have available to them, such as social networks, to support their mental health. As described in the subsection "Generational Differences," mental health has become a much more open topic, meaning that students can likely form support networks through casual conversations with classmates about their current stresses, within reason. This is a way to build support and voice one's stresses and concerns in a healthy manner.

Regarding fostering agency from a faculty standpoint, it may be beneficial to think about teaching or working with students as a mutually beneficial relationship. In this sense, when a student succeeds, the instructor succeeds. This relationship fosters more robust communication and understanding between the

student and instructor. It would also be beneficial to normalize the discussion of mental health within the classroom. It is crucial to acknowledge that students and faculty are humans first and academics second. This could also mean that instructors demonstrate agency in the classroom through a brief talk of well-being practices. This could also be provided in the form of online workshops that can be completed on one's own time to make students aware of any available resources, well-being practices, and what student agency towards mental health looks like.

Limitations of the research include sample size and singular interviews. A more substantial participant base would be beneficial for understanding student opinions on a larger scale. Follow-up interviews would also be helpful to understand students' mental health over an academic term and how they are handling it at various times. A survey would have been beneficial as well to select participants for interviews and establish base demographics and miscellaneous data about the participants. There were things that I generally knew about each of them that assisted me in selecting participants, but a physical record and wide-scale data collection would be beneficial.

The research responds to Burkett-Mckee et al.'s call for attention to students' experiences and opinions. Students have voiced the need for more effective mental health resources at the university level through qualitative methods. Academically motivated students feel that it is universities' responsibility to care for their students to a reasonable extent. Future research on how campus resources can be better and what students feel like they need would be incredibly useful. Students struggle to use what resources are in place, so student input on improving these resources would allow the university to better support their student population.

Advice From a Peer

Towards the end of the interviews and focus groups, each participant was asked what advice they would give to their younger self or another student in general. This allowed for reflection on the conversation. It was an opportunity to consider what they wish they had known sooner, as well as to share strategies they use to care for their mental health. The following is a collection of their quotes that display the small ways they have implemented agency into caring for their mental health. Please enjoy, for those that need a word of advice:

"I would tell younger me, "tell [them] it's important."

"Everybody's kinda messed up. No one really knows, like, what they're doing."

"Keep a small circle of friends."

"You don't have to be working all the time on everything and it's okay to not go. It's also okay to not work so hard, it's okay to not have all A's."

"Don't be afraid to be passionate about what you care about."

"Spend a little more time on yourself. Find something you want to do and just focus on that. Don't worry about being good… You've been good all your life. You can take time to suck at something and learn from it."

"You're never wasting time if it's on yourself."

And a personal favorite…

"My dad told me this, he's like "you're already a good person. Anything [else] you do is gravy… It's the gravy on top of the mashed potatoes of you."

Appendix

Interview Guide

Brief opening chat
Remember to ask for consent to interview and record
Press Record

How do academically motivated students approach their mental health?
1. To begin, what are you studying at Portland State?
    -Major/Minor
    -What do you plan to do with this major?
    -What kind of classes have you been taking for this?
1. I chose to interview you because you're someone that I find to be academically motivated. Being said, do you feel that you're academically motivated?
    -What made you choose to be a student, aka go to college?
    -What continues to motivate you to work through your college career?
    -Do you find enjoyment in academics?
1. What types of feelings do you have towards your academic work? Aka homework, attending classes, completing projects or assignments
2. Why do you think you focus on school?
    -Are you motivated because you want to do it?
    -Or has school been a way to avoid other stressors?
    -Controlling what you can in your life

1. What is your experience of stress?
    - -Role of academics
    - -other aspects, aside from school, that play a role in stress
    - -How do you view stress?
        - -Positive vs negative?
        - -Major aspect of life?
        - -Is it a side note?
        - -Something you take time to manage or deal with and move on?
1. How would you personally define mental health? What does it mean in your life, what things does it include? (NOT asking for a textbook definition)
    - -How does academics affect your mental health?
    - -Stress effect on mental health?
1. How do you approach your own mental health?
    - -Do you take measures to actively care for it?
    - -Does it just happen on its own?
    - -Neglect it?
1. How do you care for your mental health?
    - -Social groups
    - -Extracurriculars
    - -Physical activity
    - -Rest - plain and simple
    - -Is socialization with instructors and peers in classes impactful to your mental health?
1. Do you have a support network?
    - -Friends
    - -Family
    - -Anyone affiliated with the University
1. Are there any other factors that influence your mental health or play a role in caring for it?
2. Can you describe your personal experience with mental health? If comfortable
    - -In particular, as a student
    - -Academic's role in mental health and maybe your life
1. Have you struggled with mental health conditions? (use the word condition because it may not be clinical, can be experiencing symptoms)
    - -Depression
    - -Anxiety
    - -Attention-Deficit/Hyperactivity Disorder (ADHD)

1. If you've experienced symptoms of these things, how do you approach them?
    -Symptom management?
    -Hope it goes away?
1. How have mental health conditions affected your academics?
a. Elaborate or share a story if comfortable?
2. Could your experience with academics and mental health be improved?
    -Have you had a positive/negative experience?
    -What could change?
1. Who do you think has control over mental health?
a. Is it something that can be controlled, monitored, maintained?
2. What role does the university play in mental health?
    -Does school environment make a difference?
    -Community?
    -Should the university be more involved in the care of students' mental health?
1. What are some things you've learned about yourself and your health?
    -As a student, what actions do you need to take, if any?
    -As an individual?
    -Do you feel like you have balance in your life?
        -Elaborate??
1. Are there any major moments of reflection that you've experienced, related to this topic?
    -Mental Health
    -Academics
1. Are there any new practices that you are implementing moving forward?
2. Was there anything new that you've realized throughout the brief interview process?
3. What is something you would tell your younger self that you know now?
4. Are there any thoughts or statements that you would like to clarify, or alter what you said?
5. Any questions for me?

-Thank for time, appreciate all the info that's been provided.
-make sure they feel appreciated for their contribution
-that they were heard
end recording
check that recording worked
jot any thoughts down before you forget them

Focus Group Guide

Brief opening chat
Goals of Focus group
 Want to hear the students' opinions and their collaborative discussion with one another. If there's something that they feel is relevant to the conversation, then they should feel free to voice it or ask their own questions. It is not all about the questions I am asking but more about their opinions around the topic.
Remember to ask for consent to conduct group and record
Press Record
How do academically motivated students approach their mental health?

1. To begin, what are you studying at Portland State?
    - Major/Minor
    - What do you plan to do with this major?
    - What kind of classes have you been taking for this?
2. What made you choose to be a student, aka go to college?
    - What continues to motivate you to work through your college career?
1. Why do you think you focus on school?
    - Are you motivated because you want to do it?
    - What motivates you?
1. How do you experience stress?
2. What plays a role in your stress levels?
    - How do you view stress?
    - Positive vs negative?
        - Major aspect of life?
        - Is it a side note?
        - Something you take time to manage or deal with and move on?
1. How do you approach your own mental health?
2. Are there any other factors that influence your mental health or play a role in caring for it? (Anything we've missed so far?)
3. Can you describe your personal experience with mental health? If comfortable
4. Could your experience with academics and mental health be improved?
    - Have you had a positive/negative experience?
    - What could change?
1. Who do you think has control over mental health?
    - University vs Student
    - Who's job?
1. What are some things you've learned about yourself and your health?
    - Realizations

1. Are there any new practices that you are implementing moving forward? (What can you do differently?)
2. What is something you would tell your younger self that you know now?
3. Are there any thoughts or statements that you would like to clarify, or alter what you said?
4. Any questions for me?

-Thank for time, appreciate all the info that's been provided.
-make sure they feel appreciated for their contribution
-that they were heard
end recording
check that recording worked
jot any thoughts down before you forget them

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