



A Study of Mental Health Concerns Among College Students in Mumbai: Current Challenges and Interventions

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Citation: Rahul Nitin Acharya, Dr. Shalini Sinha (2024), A Study Of Mental Health Concerns Among College Students In Mumbai: Current Challenges And Interventions, *Educational Administration: Theory And Practice*, 30(6) 4370-4381

Doi: 10.53555/kuey.v30i6.6959

Introduction

Prince et al. (2007) Mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community. It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships and shape the world we live in. Mental health is a basic human right. And it is crucial to personal, community and socio-economic development (**Prince et al., 2007**).

Components of Mental Health

Mental health encompasses emotional, psychological, and social well-being, extending beyond the mere absence of mental illness to include resilience, self-esteem, and overall life satisfaction. It significantly influences how individuals think, feel, and act, affecting their stress management, interpersonal relationships, and decision-making abilities (**Prince et al., 2007**).

Importance of Mental Health

Mental health plays a crucial role in childhood development, adolescence, adulthood, and later stages of life, fostering personal growth, resilience, and the ability to form healthy relationships. Sound mental health has many benefits which enables individuals to handle life's challenges, achieve their goals, and contribute meaningfully to society (**Prince et al., 2007**).

Factors Affecting Mental Health

Multiple factors influence mental health, including neurobiological maturation, sociocultural changes, and family dynamics, which shape adolescents' well-being. Barriers like stigma, lack of awareness, and environmental factors also impact access to mental health services and overall mental health outcomes (**Kluwer et al., 2019; Singh et al., 2017**).

- **Neurobiological maturation:** Changes in brain development during adolescence can contribute to mental health issues.
- **Sociocultural changes:** Rapid societal changes and cultural influences impact adolescent mental health.
- **Family dynamics:** Family environment and relationships play a crucial role in adolescent well-being.
- **Peer influences:** Interactions with peers can influence behaviors and emotional well-being.
- **Barriers to accessing mental health services:**
 - **Stigma:** Social stigma surrounding mental illness discourages adolescents from seeking help.
 - **Lack of awareness:** Limited knowledge about mental health services and resources impedes access (**Kluwer et al., 2019**).
 - **Age group:** Different age groups may experience varying levels of mental health functioning.
 - **Type of school:** Factors related to school type, such as curriculum and resources, may impact mental health. (**Singh et al. 2017**)
 - **Place of residence:** Urban and rural environments may present different challenges and resources for adolescents' mental health.
 - **Parental communication:** Open and supportive communication with parents can positively influence mental health outcomes.

- **Home environment:** Factors such as family dynamics and support systems at home may affect adolescents' mental well-being.
- **Satisfaction with appearance:** Body image and self-esteem related to appearance can influence mental health (Singh et al., 2017).

Ghrouz et al. (2019) The study aimed to investigate the relationships between physical activity, sleep quality, and mental health among Indian college students. Results revealed a higher prevalence of anxiety compared to depression among participants, with a significant portion reporting low physical activity levels and poor sleep quality (Ghrouz et al., 2019).

Global Factors Affecting Mental Health

Global factors such as poverty and inequality, migration, and intense educational competition significantly impact mental health by increasing stress and disrupting social and cultural stability. These issues are particularly pronounced among marginalized youth, contributing to heightened psychological distress (Bhat et al., 2012).

Depressive Symptoms Among College Students

Depressive symptoms among college students often manifest as frequent headaches, loss of appetite, insomnia, anxiety, and prolonged feelings of sadness or hopelessness. These symptoms indicate heightened stress levels, which can significantly impact their mental health and well-being (Sharma et al., 2015).

Problems in Mental Health Prioritization

Mental health often receives low prioritization in many low- and middle-income countries, where it is overshadowed by infectious diseases and other health concerns. This results in insufficient attention and resources dedicated to addressing mental health issues (Prince et al., 2007).

Tripartite Structure of the Mental Health Continuum-Short Form (MHC-SF) : A Model for Mental Health Assessment

Singh et al. (2017) The Mental Health Continuum Short Form (MHC-SF) is a psychometric tool used to assess mental health and well-being in individuals. It is derived from the full-length Mental Health Continuum-Short Form (MHC-SF), which was developed by Corey Keyes as a brief measure to assess emotional, psychological, and social well-being.

The MHC-SF typically consists of items that capture both hedonic (emotional) and eudaimonic (psychological and social) aspects of well-being. Respondents are asked to rate the frequency of various positive experiences and emotions they have experienced over a specified period, such as the past month (Singh et al., 2017).

The instrument is designed to measure three dimensions of mental health:

- **Emotional well-being:** This dimension assesses the presence of positive emotions such as happiness, satisfaction, and enjoyment in life.
- **Psychological well-being:** This dimension focuses on aspects such as personal growth, self-acceptance, purpose in life, autonomy, and mastery of the environment.
- **Social well-being:** This dimension evaluates the quality of social relationships, social integration, and a sense of belonging within communities.

The MHC-SF provides a snapshot of an individual's mental health status, highlighting not only the absence of mental illness but also the presence of positive mental health indicators. It is widely used in research and clinical settings to assess mental health outcomes, monitor changes over time, and evaluate the effectiveness of interventions aimed at promoting well-being. The short form version offers a concise and efficient way to measure mental health, making it suitable for large-scale surveys and screening purposes (Singh et al., 2017).

Singh et al. (2017) The research underscores the utility and effectiveness of the Mental Health Continuum-Short Form (MHC-SF) as a valuable psychometric tool for assessing mental health and well-being. The MHC-SF, derived from the full-length version developed by Corey Keyes, efficiently measures three critical dimensions of mental health: emotional well-being, psychological well-being, and social well-being. By asking respondents to rate the frequency of positive experiences and emotions over a specified period, the MHC-SF provides a comprehensive snapshot of an individual's mental health status. This tool is particularly advantageous for its brevity, making it suitable for large-scale surveys and clinical settings to monitor mental health outcomes, track changes over time, and evaluate the effectiveness of well-being interventions. Overall, the MHC-SF is highlighted as an essential instrument for both research and practical applications in mental health promotion and assessment (Singh et al., 2017).

Interventions to Alleviate the Mental Health Concerns

Effective interventions to alleviate mental health concerns include integrating mental health into broader health policies and recognizing its interconnectedness with physical health. Collaborative, inter-sectoral efforts, tailored programs, and timely access to quality services are essential to promote resilience, reduce stigma, and support adolescent mental well-being (Prince et al., 2007; Kluwer et al., 2019).

- **Integration of mental health into broader health policies, systems, and services:** Mental health should be integrated into primary healthcare services and addressed through multi-sectoral approaches.
- **Recognition of the interconnectedness of mental and physical health:** Addressing mental health issues can improve overall health outcomes and reduce the burden of chronic diseases.
- **Aim to reduce the global burden of mental health disorders:** Efforts should focus on prevention, early intervention, access to treatment, and destigmatization of mental illness to improve population mental health and well-being (Prince et al., 2007).
- **Collaborative efforts across sectors:** Healthcare, education, and social services need to work together to support adolescent mental health.
- **Development of effective inter-sectoral linkages:** Coordination between different sectors is essential for holistic care.
- **Tailored policies and programs:** Programs should be designed to meet the unique needs of adolescents, considering cultural and developmental factors.
- **Promotion of positive mental health:** Focus on building resilience, coping skills, and support networks.
- **Ensuring timely access to quality mental health services:** Efforts should be made to remove barriers and improve access to mental health care for adolescents (Kluwer et al., 2019).
- **Understanding socio-demographic factors:** Recognizing the influence of factors such as age, school type, parental communication, and home environment is crucial for tailoring interventions to promote positive mental health among adolescents.
- **Importance of schooling:** Encouraging school attendance and addressing barriers to education can play a significant role in supporting adolescents' mental well-being.
- **Comprehensive approach:** Interventions aimed at promoting positive mental health should consider the complex interplay of socio-demographic factors and schooling experiences to effectively address the diverse needs of adolescents (Singh et al., 2017).
- **Counselling Services:** Providing access to professional counsellors or therapists who offer confidential support, guidance, and therapeutic interventions to students experiencing mental health challenges.
- **Mental Health Workshops:** Organizing workshops, seminars, or training sessions that focus on topics such as stress management, mindfulness, resilience-building, and coping strategies to equip students with practical skills for maintaining mental well-being.
- **Stress Reduction Activities:** Offering opportunities for students to engage in stress-relieving activities such as yoga, meditation, art therapy, or outdoor recreation to alleviate stress and promote relaxation.
- **Anonymous Feedback Channels:** Establishing anonymous feedback channels, suggestion boxes, or online platforms where students can express concerns, provide feedback, or seek assistance without fear of judgment or reprisal.
- **Peer Support Programs:** Facilitating peer support groups, mentoring programs, or buddy systems where students can connect with and receive support from their peers who may have similar experiences or challenges.
- **Awareness Campaigns:** Launching awareness campaigns, events, or initiatives to reduce stigma surrounding mental health, increase awareness of available support services, and promote a culture of empathy, understanding, and inclusivity within the educational community (TP et al., 2017).

Challenges to Accessing Mental Health Services

Challenges to accessing mental health services for adolescents include social stigma, which discourages help-seeking behavior, and a lack of awareness about available services and resources, impeding effective access (Kluwer et al., 2019).

Research Problem

This study seeks to explore evidence-based strategies for enhancing mental health support by identifying the key factors influencing mental health and understanding the various possible interventions.

Objectives

The objectives of this research study are as follows:

- 1) To understand the scenario of mental health among students.

- 2) To study the causes of mental health issues and its impact on work.
- 3) To study the measures taken to control the mental health issues of students.

Research Methodology

Following research methodology has been adopted for the purpose of this research:

Scope of Research

The research is conducted among college students in the city of Mumbai.

Research Type – Descriptive Research

Research type used is descriptive research for the purpose of this study.

Descriptive research is a sort of research used to characterize a population's features.

It collects data that is used to answer a variety of what, when, and how inquiries about a certain population or group.

Methods of Data Collection

This study was carried out using primary as well as secondary sources of data.

Survey method was used to collect primary data from the target group using Google Forms.

News, articles and journal from the internet were used to collect secondary data related to the research topic.

Sampling Methodology

The study employed convenience sampling, selecting 105 college students from Mumbai to participate.

This non-probability sampling method was chosen for its ease and accessibility, providing a readily available sample for the research.

Convenience sampling involves selecting participants based on their availability and accessibility.

Hypothesis:

This study has tested the following hypothesis:

Hypothesis-1:

H₀ = There is no significant relationship between frequent headaches as a possible result of stress and the mental well-being of the respondents.

H₁ = There is a significant relationship between frequent headaches as a possible result of stress and the mental well-being of the respondents.

Hypothesis-2:

H₀ = There is no significant relationship between loss of appetite as a possible result of stress and the mental well-being of the respondents.

H₁ = There is a significant relationship between loss of appetite as a possible result of stress and the mental well-being of the respondents.

Hypothesis-3:

H₀ = There is no significant relationship between insomnia as a possible result of stress and the mental well-being of the respondents.

H₁ = There is a significant relationship between insomnia as a possible result of stress and the mental well-being of the respondents.

Hypothesis-4:

H₀ = There is no significant relationship between anxiety as a possible result of stress and the mental well-being of the respondents.

H₁ = There is a significant relationship between anxiety as a possible result of stress and the mental well-being of the respondents.

Hypothesis-5:

H₀ = There is no significant relationship between depression as a possible result of stress and the mental well-being of the respondents.

H₁ = There is a significant relationship between depression as a possible result of stress and the mental well-being of the respondents.

Statistical tools

The research was carried out using the following statistical tools:

- **Pivot Table:** A pivot table is a data summarization tool in spreadsheet software that enables users to rearrange and summarize selected columns and rows of data to gain insights quickly.

Pivot tables are used to make frequency charts for calculation of actual and expected values for Chi-square testing based on the selected variables.

- **Data Visualization (Bar Charts & Pie Charts):** Bar charts visually represent categorical data using rectangular bars, with the length of each bar proportional to the value it represents, facilitating easy comparison between different categories.

Pie charts display data as a circular graph, where each slice represents a proportion of the whole, making it easy to visualize the distribution of data.

They are used to find the composition of the respondents based on their responses.

- **Weighted Average:** Weighted average calculates the average of a set of numbers, where each number has a different weight based on its importance or frequency.

Weighted average was used to find the most prevalent mental health concern out of frequent headaches, loss of appetite, insomnia, anxiety and depression.

- **Chi-square test:** The chi-square test is a statistical method used to determine if there is a significant association between categorical variables, helping researchers understand relationships in data.

Chi-square test is used to find whether there is a significant association between the variables frequent headaches, loss of appetite, insomnia, anxiety and depression as a possible result of stress and the mental well-being of the respondents.

Data Analysis

The data analysis provides a comprehensive overview of various factors influencing mental health among college students, including demographics, stress management strategies, perceived academic stressors, and utilization of mental health services.

Insights into students' attitudes, behaviours, and preferences regarding mental health support highlight the need for tailored interventions and improvements within educational institutions to promote student well-being effectively.

The following data was collected using primary research through google forms.

Demographic Information

The demographic analysis provides insights into the age distribution, gender balance, educational attainment, institutional preferences, and geographic locations of respondents.

Compositions by Age Group:

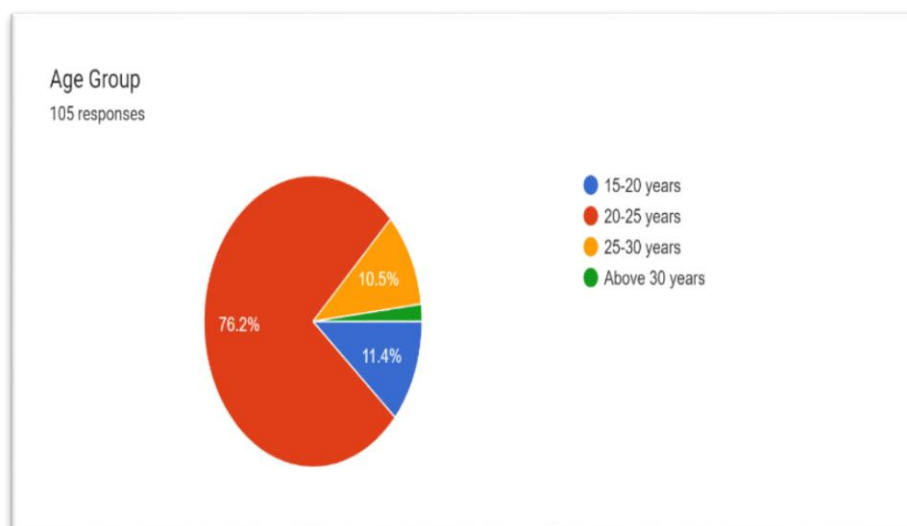


Figure-1: Composition by Age Group:

The data shows that 76.2 % of the people are in the age group 20-25 years, followed by age group of 15-20 years (11.4%), and age group of 25-30 years (10.5%).

Composition by Gender:

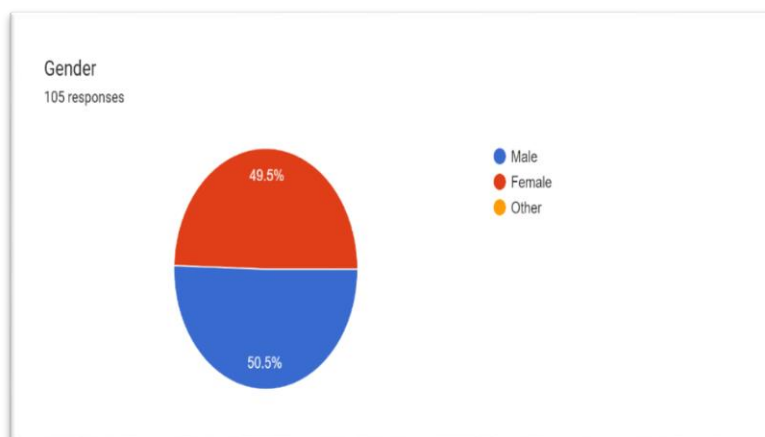


Figure-2: Composition by Gender:

The gender proportion of the respondents in terms of male (50.5%) and female (49.5%) is almost the same.

Composition by Educational Qualification:

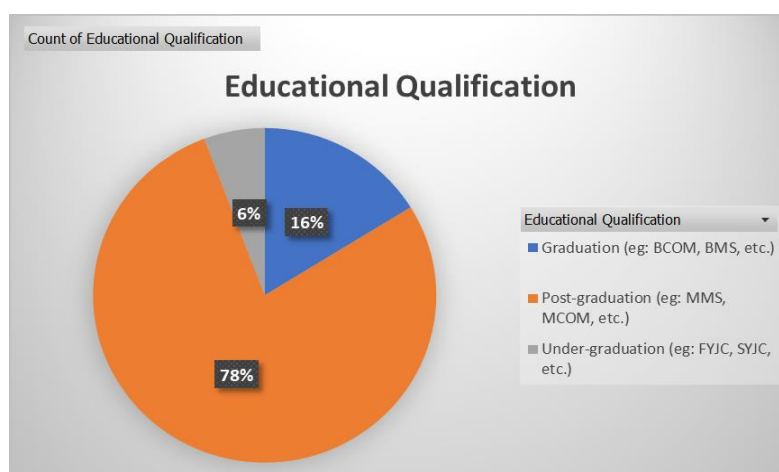


Figure-3: Composition by Educational Qualification:

78% of the people surveyed are post-graduates, followed by graduates (16%) and under-graduates (6%).

Composition by Educational Institute:

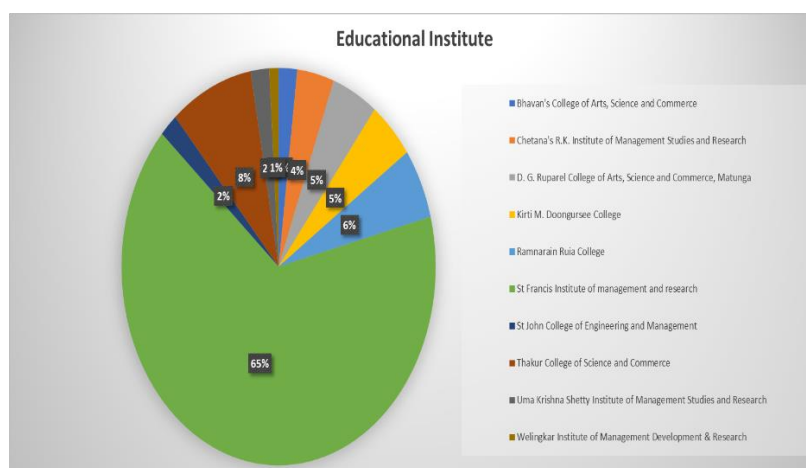


Figure-4: Composition by Educational Institute:

Most people surveyed study at St. Francis Institute of Management and Research with a proportion of 65%, followed by Thakur College of Science and Commerce (8%) and Ramnarain Ruia College (6%).

Composition by Location of the Educational Institute:

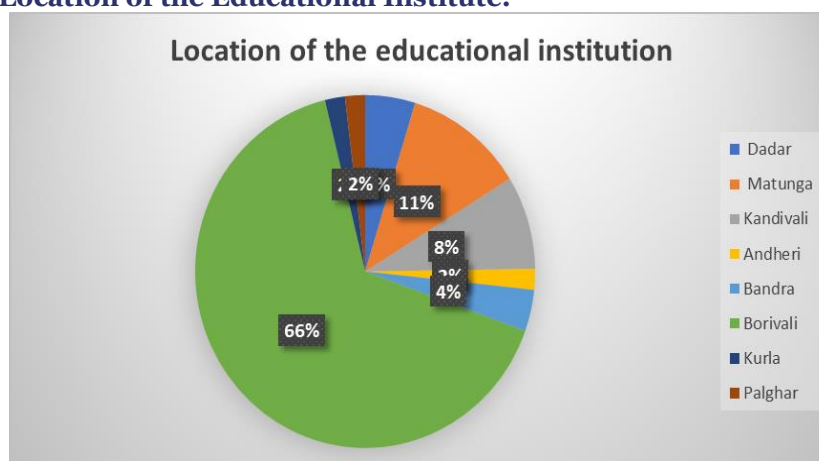


Figure-5: Composition by Location of the Educational Institute:

The data shows that 66% educational institutes where the respondents study are in Borivali, followed by Matunga (11%), and Kandivali (8%).

Understanding Factors Affecting Mental Health and Coping Mechanisms Among College Students

Responses from the questionnaire reflects the following conclusions:

- 50.5% of the respondents can focus on their work.
- Most respondents have rated their sleep quality on an average as 4 out of 5 on the rating scale.
- 57.1% of the people surveyed engage in hobbies to manage stress and maintain well-being, followed by mindfulness and meditation (55.2%) and physical exercise (49.5%)
People also engage in taking psychiatric medicines, stitching, playing chess, cooking/baking, listening to music, engagement with others, watching TV, social media and reading novels to manage stress and maintain well-being.
- 79% of the people surveyed believe that Academics is a factor that contribute to mental health issues among students, followed by Social environment in the institution (61.9%) and Family environment (54.3%).
Other factors that contribute to mental health issues are peer pressure, friend-zoning and rejection by romantic interests, communication/interaction, romantic relationships, thoughts of future, placements, fear of lack of prospects in the future.
- 61% of the respondents believe that Syllabus and Time management are the main sources of academic stress, followed by Heavy workload (52.4%) and Lack of support (38.1%).
Other sources of academic stress are managing everything after the lag of travel, back-to-back presentations, pressure of getting placed, issues with attendance and competitive pressure.
- 67.6% of the people believe that High academic pressure and Inflexible curriculum are the shortcomings or flaws in the current educational system that contributes to mental health issues among students, followed by High expectations from parents (58.1%) and Lack of mental health education (53.3%).
Other shortcomings or flaws in the current educational system that contribute to mental health issues among students are no practical application of mental health intervention practices by the educational institution and professors not knowing the subjects that they teach.
- 63.8% of the people surveyed believe that counselling services are the measures and initiatives taken by the educational institution to promote mental health, followed by Mental health workshops and Stress reduction activities (29.5%).
Other measures and initiatives taken by the educational institute are mentoring by faculties at their educational institution and Student Grievance Redressal Cell.
- 48.6% agree that academic competitiveness contribute to mental health challenges among students.
- Most respondents have rated their academic stress as 4 out of 5 on the rating scale.
- Most respondents have never sought help from a mental health professional with a proportion of 81%.
- 69.5% of the people surveyed have not sought assistance from faculty members for mental health issues.

Suggestions by Respondents to improve the quality of mental health among college students in educational institutions

The five most recurring theme in the open-ended responses were Awareness/Workshops, Counselling Services, Support System, Communication/Openness and Academic Support.

- The most frequently mentioned theme is **Awareness/Workshops**, with **13 mentions**, underscoring the importance of conducting workshops and programs to raise awareness about stress management and mental

health. Examples include initiatives like workshops on stress management and mental health awareness programs.

- Following closely is **Counselling Services**, mentioned **12 times**, which emphasizes the necessity for accessible and effective counselling resources within colleges.
- The **Support System** theme, with **9 mentions**, points to the need for a strong support network to help students manage mental health challenges.
- **Communication/Openness**, mentioned **7 times**, highlights the role of fostering open conversations about mental health on campus to promote awareness and reduce stigma.
- Lastly, **Academic Support** is mentioned **4 times**, suggesting the importance of academic assistance for students, particularly through resources like recorded lectures for slow learners and offer academic support services.

Reasons for Non-Seeking Behaviour: Perspectives on Mental Health Assistance

34.1% of the people surveyed mentioned that self-reliance is the main reason for them not seeking help from a mental health professional, followed by Privacy concerns (20%) and Lack of awareness (12.9%).

Other reasons for not seeking help from a mental health professional are lack of valuable insights from the mental health professional, fear of taking psychiatric medicines, belief in their mental fitness.

Utilization and Perception of Mental Health Services among College Students

- 60% of the people surveyed have seen a mental health professional in their academic institution.
- 35% of the people surveyed seek help from a mental health professional occasionally, followed by 30% who are currently in therapy, 15% seek help as needed, 10% seek help regularly and rarely.
- 65% of the people surveyed are on psychiatric medication for mental health.
- Most respondents rate the effectiveness of mental health professionals in addressing mental health concerns as 4 out of 5 on the rating scale.

Suggestions by the Respondents for improving the effectiveness of mental health professionals in addressing mental health concerns

The five most recurring theme in the open-ended responses were Accessibility, Medication Management, Understanding, Self-care and Technology.

- **Accessibility** is mentioned **3 times**, stressing the need for easy access to mental health resources, including online therapy, as noted in examples like easy access and making therapy available online so more people can get help.
- **Medication Management** also has **3 mentions**, pointing to concerns about the over-prescription of medications and the preference for non-addictive treatment methods, which state that the mental health professionals should not give strong addictive medicines and not keep the patient reliant on the psychiatric medication forever.
- The theme of **Understanding**, with **2 mentions**, underscores the importance of comprehensively addressing the root causes of mental health issues and the collaborative role of counsellors, students, institutions, and teachers in providing support.
- Similarly, **Self-care**, mentioned **2 times**, highlights the significance of personal well-being practices such as improving sleep, connecting with others, and regular exercise.
- Lastly, **Technology**, with **1 mention**, points to the potential benefits of integrating teletherapy and remote support to enhance mental health services.

Barriers to Seeking Mental Health Support from Faculty Members Among College Students

41.1% of the people surveyed mentioned that they didn't seek assistance for mental health from the faculty because of Privacy concerns, followed by 38.4% mentioned the reason as Self-reliance and Perceived lack of support (12.3%).

Other reasons why the people surveyed didn't seek assistance for mental health from the faculty members because they feel they are shy, mentally fit and going to their personal psychiatrist.

Faculty Support for Mental Health Concerns Among College Students

40.6% of the people surveyed often find it comfortable seeking support or guidance from faculty members regarding mental health concerns.

Most respondents have rated the support and guidance provided by faculty members in addressing mental health challenges as 4 out of 5 on the rating scale.

Suggestions by the Respondents to improve the effectiveness of the faculty in addressing mental health concerns

The five most recurring theme in the open-ended responses were Listening/Communication, Awareness/Training, Empathy, Support Services and Understanding.

- Emphasizing the importance of **Listening/Communication**, mentioned **4 times**, it suggests that faculty should listen more to effectively understand student needs.
- **Awareness/Training**, mentioned **4 times**, are equally crucial, as faculty members need to be equipped to identify students facing mental health issues and offer appropriate help.
- **Empathy**, mentioned **4 times**, is another critical element, with a recommendation that faculty demonstrate greater empathy towards students.
- Additionally, **Support Services**, mentioned **2 times**, are vital, and providing training to faculty on recognizing signs of distress in students can enhance the support system.
- Finally, **Understanding**, mentioned **2 times**, each student's unique concerns and offering genuine guidance is essential for fostering a supportive educational environment.

Weighted Average

The weighted average is a method of finding the average of a set of numbers in which each number is multiplied by a predetermined weight and then the sum of these products is divided by the sum of the weights. This method gives more importance or significance to certain numbers (represented by their weights) over others when calculating the average. It is particularly useful when dealing with data where some values are more influential or representative than others.

Weighted Average method is used to find the most prevalent mental health concern that the students face out of all the five symptoms that are frequent headaches, loss of appetite, insomnia, anxiety and depression.

How often have you felt the following as a possible result of stress?

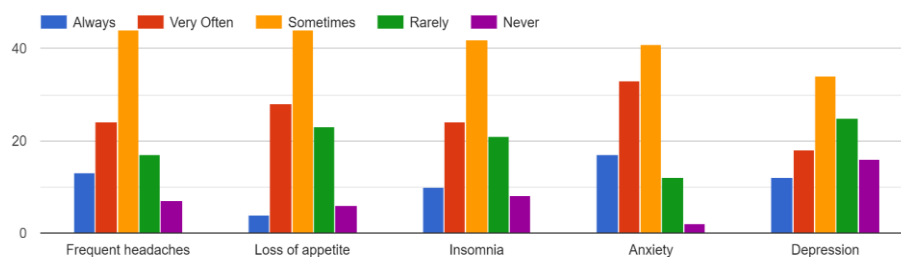


Figure-6: Mental health concerns faced by the college students as a possible result of stress:

Table-4: Weighted Average of the mental health concerns faced by the college students as a possible result of stress:

Result of stress	1 (Never)	2 (Rarely)	3 (Sometimes)	4 (Very Often)	5 (Always)	Weighted average
Frequent headaches	7	17	44	24	13	3.180952
Loss of appetite	6	23	44	28	4	3.009524
Insomnia	8	21	42	24	10	3.066667
Anxiety	2	12	41	33	17	3.485714
Depression	16	25	34	18	12	2.857143

Conclusion of Weighted Average:

The result of stress most prevalent among the respondents is Anxiety with a weighted average of 3.485714 followed by Frequent headaches (3.180952), Insomnia (3.066667), Loss of appetite (3.009524) and Depression (2.857143).

Testing of Hypothesis

Chi square test

Hypothesis-1:

H₀ = There is no significant relationship between frequent headaches as a possible result of stress and the mental well-being of the respondents.

H₁ = There is a significant relationship between frequent headaches as a possible result of stress and the mental well-being of the respondents.

p-value=0.94

Alpha-value=0.05

p-value > Alpha-value

H₁ is rejected.

There is no significant relationship between frequent headaches as a possible result of stress and the mental well-being of the respondents.

Hypothesis-2:

H₀ = There is no significant relationship between loss of appetite as a possible result of stress and the mental well-being of the respondents.

H₁ = There is a significant relationship between loss of appetite as a possible result of stress and the mental well-being of the respondents.

p-value=0.89

Alpha-value=0.05

p-value > Alpha-value

H₁ is rejected.

There is no significant relationship between loss of appetite as a possible result of stress and the mental well-being of the respondents.

Hypothesis-3:

H₀ = There is no significant relationship between insomnia as a possible result of stress and the mental well-being of the respondents.

H₁ = There is a significant relationship between insomnia as a possible result of stress and the mental well-being of the respondents.

p-value=0.59

Alpha-value=0.05

p-value > Alpha-value

H₁ is rejected.

There is no significant relationship between insomnia as a possible result of stress and the mental well-being of the respondents.

Hypothesis-4:

H₀ = There is no significant relationship between anxiety as a possible result of stress and the mental well-being of the respondents.

H₁ = There is a significant relationship between anxiety as a possible result of stress and the mental well-being of the respondents.

p-value=0.71

p-value > Alpha-value

H₁ is rejected.

There is no significant relationship between anxiety as a possible result of stress and the mental well-being of the respondents.

Hypothesis-5:

H₀ = There is no significant relationship between depression as a possible result of stress and the mental well-being of the respondents.

H₁ = There is a significant relationship between depression as a possible result of stress and the mental well-being of the respondents.

p-value=0.71

alpha-value=0.05

p-value > Alpha-value

H₁ is rejected.

There is no significant relationship between depression as a possible result of stress and the mental well-being of the respondents.

Conclusion of Chi-Square Test

Based on the given data, there is no relationship between the mental health concerns which are frequent headaches, loss of appetite, insomnia, depression, anxiety and the mental well-being of the respondents.

Findings & Interpretations

Demographic Information

1. Age Distribution:

- **20-25 years:** Majority of respondents (76.2%) fall within this age group, indicating that the data predominantly reflects the mental health concerns of young adults in their early twenties.
- **15-20 years:** This age group constitutes 11.4% of the respondents.
- **25-30 years:** Represents 10.5% of the respondents.

2. Gender Composition:

- The gender distribution is almost balanced with **50.5% male** and **49.5% female** respondents.

3. Educational Qualification:

- **Post-graduates:** Form the largest group at 78%, suggesting that the majority are engaged in advanced studies.
- **Graduates:** 16% of the respondents.
- **Under-graduates:** Comprise 6% of the sample.

4. Educational Institute:

- A significant number (65%) are from **St. Francis Institute of Management and Research**.
- Smaller proportions are from **Thakur College of Science and Commerce (8%)** and **Ramnarain Ruia College (6%)**.

5. Location of Educational Institute:

- Majority of institutions are located in **Borivali (66%)**, followed by **Matunga (11%)** and **Kandivali (8%)**.

Factors Affecting Mental Health and Coping Mechanisms

1. Focus and Sleep Quality:

- **50.5%** of respondents report being able to focus on their work.
- The average sleep quality rating is **4 out of 5**, indicating generally good sleep quality among respondents.

2. Stress Management Strategies:

- Common methods include **hobbies (57.1%)**, **mindfulness and meditation (55.2%)**, and **physical exercise (49.5%)**.
- Other activities include **medication, stitching, chess, cooking/baking, listening to music, engaging with others, watching TV, and using social media**.

3. Perceived Academic Stressors:

- **79%** believe academics contribute to mental health issues.
- Other contributing factors include **social environment (61.9%)** and **family environment (54.3%)**.
- **Syllabus and time management (61%)**, **heavy workload (52.4%)**, and **lack of support (38.1%)** are cited as primary sources of academic stress.

4. Shortcomings in Educational System:

- **High academic pressure and inflexible curriculum (67.6%)**, **high expectations from parents (58.1%)**, and **lack of mental health education (53.3%)** are seen as significant flaws.

5. Initiatives by Educational Institutions:

- **Counseling services (63.8%)**, **mental health workshops**, and **stress reduction activities (29.5%)** are the main initiatives reported.

Mental Health Concerns and Hypothesis Testing

1. Prevalent Mental Health Concerns:

- The most common mental health issue is **anxiety (3.485714)** based on weighted average, followed by **frequent headaches (3.180952)**, **insomnia (3.066667)**, **loss of appetite (3.009524)**, and **depression (2.857143)**.

2. Chi-Square Test Results:

- The chi-square tests for all hypotheses (frequent headaches, loss of appetite, insomnia, anxiety, depression) indicate **no significant relationship** between these stress-related symptoms and the mental well-being of the respondents. All p-values were greater than the alpha value (0.05), leading to the rejection of H1 in all cases.

Utilization and Perception of Mental Health Services

1. Seeking Help:

- **81%** have never sought help from a mental health professional.
- **69.5%** have not sought assistance from faculty members for mental health issues.
- Among those who have sought help, **60%** have seen a mental health professional in their academic institution, with varying frequencies of seeking help (occasional, regular, currently in therapy).

2. Barriers to Seeking Help:

- **Self-reliance (34.1%)** and **privacy concerns (20%)** are the main reasons for not seeking professional help.
- Other reasons include lack of awareness, fear of medication, and the perception of being mentally fit.

Suggestions for Improvement

1. Improving Mental Health Support:

- Respondents suggest increasing **awareness and workshops**, enhancing **counseling services**, creating a strong **support system**, promoting **open communication**, and providing more **academic support**.

2. Effectiveness of Mental Health Professionals:

- Suggestions include improving **accessibility**, better **medication management**, greater **understanding of root causes**, promoting **self-care**, and using **technology** for teletherapy.

3. Faculty Support:

- Respondents recommend **training faculty to recognize mental health issues**, fostering **empathy**, and improving **listening and communication** skills among faculty.

Limitations

The research was conducted in a short period of time and within a limited geographical coverage.

Conclusion

The study indicates a significant prevalence of anxiety among college students, with academic pressures and environmental factors contributing to mental health challenges. While many students employ various coping mechanisms, there is a notable underutilization of professional mental health services, often due to self-reliance and privacy concerns. Educational institutions need to enhance their mental health support systems, increase awareness, and train faculty to better address these issues.

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