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On versus Off-Campus Living: An Exploration of College Students' Mental Well-being

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Abstract

The World Health Organization defines mental health as “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” (“Mental Health,” 2022). Risk and protective factors can be used to predict mental health outcomes. Both positive and negative outcomes can be predicted, respectively. The categories of these include individual, relationship, community, and societal. When examining college students, it is most reasonable to study the relationship and community factors. This study examined whether living on or off campus impacts predicted mental health outcomes in college students. Researchers hypothesized that those living on campus would show a higher probability for positive mental health outcomes. Participants responded to an eight-question Likert matrix in which they responded if they agree or disagree with prompts related to mental health. Surveys were split up based on the student’s living conditions. A significant difference was found between the two conditions, with those living on-campus showing a higher average mental health probability score. The results of this study, considering the limitations and future outcomes, can be used as another foundational piece for future research regarding mental health in students of all ages and living conditions.
**On versus Off-Campus Living: An Exploration of College Students' Mental Well-being**

Mental Health is a topic that has now, more than ever, become a common talking point amongst modern adults. The World Health Organization defines the term as “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” (“Mental Health,” 2022). While this definition doesn’t explicitly mention any positive or negative values associated with the term, it is typically discussed when investigating poor or weakened mental health.

Much data has been found discussing mental health in both a positive and negative sense. Whether it’s the causes, effects, or anything in between, understanding how and why mental health issues occur can be a strong tool in assisting those struggling with them. Of these topics, the causes are arguably the most important to understand, as knowing the origin of a problem can help to find preventative measures to curb its impact in the first place.

Before learning what risk factors can impact one’s mental health, it is important to understand what “risk factors” mean in the first place. According to the National Library of Medicine, risk factors are “characteristics, variables, or hazards that, if present for a given individual, make it more likely that this individual, rather than someone selected at random from the general population, will develop a disorder” (Mrazek & Haggerty, 1994). Simply put, those who have mental health risk factors, while not guaranteed to have mental health issues, have a higher likelihood of developing those issues compared to someone without. While it is possible for someone to have multiple risk factors with no mental health issues, and vice versa, the likelihood of these scenarios is relatively low compared to the more typical scenario of a positive correlation between them. Studying risk factors is where prevention can come into play, as
recognizing them and taking action immediately could potentially lower the chance of one struggling with mental health issues in the first place.

There are many types of risk factors. The CDC groups different types of factors into four categories; individual, relationship, community, and societal (Risk and Protective Factors, 2022). Individual risk factors include financial, physical, and mental health history. Relationship risk factors include the quality of one’s relationships (from healthy to abusive) and the consistency thereof. Community risk factors deal with the quality of living around one’s community, including healthcare, discrimination, and sometimes even suicide clusters in a community. Finally, societal risk factors are those which prevent safe and honest communication about mental health, such as stigmatizing conversations or showing negative portrayals of mental issues in popular media.

The opposite of risk factors is protective factors. Similar to risk factors, in theory, protective factors link towards a more positive outcome in one’s mental health. Again, while not a guarantee, those with more protective factors are more likely to have positive mental well-being. Understanding both risk and protective factors in conjunction with one another gives one a strong foundation for studying mental health.

When researching the mental health of college students, it is important to consider all factors in how they impact one’s potential mental health outcomes. However, both individual and societal factors have inherent issues which make them more difficult to study. For individual factors, the intense subjectivity of each person’s situation does not conduct itself well for proper comparison among students. On the other hand, the fact that social factors are so widely encompassing makes it arguably unimportant to consider when looking for differences between participants. Due to this, it makes sense to focus attention on relationship and community factors
when examining the mental health of a college student population. These factors have some individuality to them but also are not too specific that they become difficult to research. Similarly, the factors are focused enough that the overarching issues might not impact everyone, which can lead to valuable information being determined from the findings.

When discussing the community factors, it is important to note that the CDC finds a feeling of connectedness in one’s social institutions, which includes their school environment, to be a protective factor (Risk and Protective Factors, 2022). In a study performed in the UK, researchers examined school children’s sense of belonging in relation to various different outcomes (Cockerill, 2019). They performed interviews with the students, as well as had them all perform the Psychological Sense of School Membership Scale, a test commonly used to research the feeling of belonging in schools. They found that the students who reported a stronger sense of belonging showed more positive outcomes in many school situations. This study shows more evidence that community protective factors are linked with better mental well-being. A gap in the research does occur with this study, as the students only ranged from ages 10-16. Looking at older students, especially those in college, would be useful to see if these outcomes are relevant across ages.

A fundamental aspect of one’s college career is the relationships one might have throughout their years of study. Whether with other students, professors, or faculty, those in college must form some sort of connection with others in order to find success and, eventually, graduate. As mentioned above, relationships are a crucial factor in one’s potential mental health outcomes. A study by Zhang et al. showed that those with higher levels of attachment anxiety, or the fear of a lack of connection with peers, showed lower levels of mental health well-being (2022). They did this by performing a meta-analysis of many different studies measuring
attachment and its relationship to multiple mental health outcomes. Their final finding showed not only that poor attachment is linked to negative outcomes, but that also higher levels of attachment are linked with more positive outcomes. This study adds further credence to the importance of relationships in one’s potential mental well-being outcomes.

When considering the past research done into mental health, especially as it relates to college students and their living conditions, it makes sense to continue looking into the topic as a whole. One of the gaps that this study hopes to address is the lack of research on college-aged students' mental health, specifically. Furthermore, little research has been conducted on whether the living condition of a student can impact their mental health. This study aims to fill the gaps that previous research has left by surveying students with questions related to mental health. The information found will then be analyzed to compare living conditions to see whether a significant difference is found in the mental health projected outcomes between those who live on and off-campus.

**Method**

**Participants**

There were 164 total participants in this research study. Of those participants, 37 identified as male, 111 identified as female, and 16 identified as non-binary/third-gender/other. Demographic information can be found in Table 1. Participants allowed in the study included any student attending the University of Nebraska Omaha. Both undergraduate and graduate students were allowed. The ages of the participants were not collected. No incentives were given for completing the survey.

**Materials**
The experiment was conducted digitally through Qualtrics. Participants were able to complete the survey on their own time using personal devices. Devices were not distributed or provided for participant use.

Two separate surveys were created, each having a similar setup. Residents living in on-campus housing locations were given the survey questions as part of a larger, housing-oriented survey. Those living off-campus were given a survey with the same questions which was independent of the housing survey. Both surveys asked for participants’ demographic information, including, gender, race, and sexual orientation.

Both surveys contained a Likert matrix that allowed students to respond on a 1-5 scale (1 = strongly disagree, 5 = strongly agree) to eight questions related to mental health risk factors (see Appendix A). These questions were prefaced with either “Living on campus has:” or “Living off campus has:” depending on their respective living situation. The questions were created based on the community and relationship risk factors as well as similar questions used in previous UNO Housing surveys.

Procedure

The on-campus survey was disbursed to students through a housing-wide email. This email contained a link to the Qualtrics survey which included the questions used for testing in this study. These participants did not need to clarify whether or not they lived on campus, as the initial email was only sent to residents known to be living in an on-campus apartment. The survey contained the questions as well as others assessing other housing-related concerns.

Those living off-campus were sent the survey through social media, emails from honors advising, and through spread amongst peers. Those taking the off-campus survey were asked about whether or not they currently live on campus. If the participant answered yes, then the
survey would simply end. If the participant answered no, then the questions would be presented to the participant. Upon completing the questions, the survey would end. The data collected from the surveys were stored in password-protected accounts belonging to the researchers.

**Design**

This study used a one-way between-subjects design. The independent variable was one’s living situation, either on-campus or off-campus. This was accounted for based on which survey a participant responded in. The dependent variable was the mental health probability score. This was measured by converting the Likert scale results to a corresponding number. An ANOVA test can be used to determine whether there is a significant difference in scores between the two living situations.

**Results**

The study attempted to see if there is any significant relationship between projected mental health outcomes and a college student’s living condition, whether that is on or off campus. Researchers predicted that those who live on-campus would have a higher likelihood of positive mental health outcomes.

Demographic information can be seen in Table 1. Once responses were collected, those which showed incomplete answers were discarded from data collection. The elimination of incomplete responses left a total of 164 viable responses to be processed. Out of these responses, 37 participants identified as male, 111 as female, and 16 as non-binary/third gender/other.

The independent variable in this study was the living situation of the student, whether they live on or off campus. The dependent variable was the overall mental health probability score they received based on the questions they answered. This was determined by equating the response for each question to a number. Strongly disagree equated to one, disagree equated to
two, and so on, until strongly agree equated to five. The total score for each participant was collected by summing up the number value of their answers. For example, if someone answered “agree” to every question then their total would be 32, as the number four times eight equates to 32.

The values for scores were analyzed using a one-way ANOVA. The results showed that the null hypothesis could be rejected, showing that those who live on-campus have a statistically higher mental health probability score, $F(1,154) = 6.69, p = 0.011$. The results convey that living on campus shows a higher probability of positive mental health outcomes. These results agree with the hypothesis of the researchers. The results are shown in Figure 1.

**Discussion**

Based on the results found, the researchers found that their hypothesis of those living on-campus showing more positive mental health outcomes was supported by the data collected. The questions all asked about positivity in general, which is why data collection could occur in a direct way. Due to this relatively simple method of analysis, and the fact that the null hypothesis is rejected, it is easy to see that the results show higher mental health probability in those living on-campus.

One limitation that comes with this study is the digital nature of surveying. There is no proctoring of answers, participants, or honesty. Participants have the ability to give answers regardless of their true opinions, or even take part without being truthful of where they live. While steps were taken to mitigate this risk, such as the on-campus survey was only being sent to residents, this is still a factor that should be considered due to the inherent structure of the study.

Similarly, not all participants were equal. There were over one hundred more responses from those who live on-campus compared to the 47 off-campus residents. While the nature of the
ANOVA calculates for this difference, it is likely that data might change if there was a more equitable distribution of respondents. This also could change based on the university in which the data is conducted. It is reasonable to assume that different universities have different cultures, which would allow for a difference in results found.

Another limitation is the fact that the study only looked for two risk factor categories. While this was done deliberately, looking at the individual and societal risk factors could allow for different responses to appear. A major societal factor that was not touched on in this study was COVID-19, which itself was a society-changing event. If questions were asked related to the pandemic, substance use, or any other individual/societal factors, it is possible that the responses given could change the results seen.

Furthermore, another limitation comes from the fact that the study solely examines risk factors. Due to the subjectivity of mental health, it is difficult to come up with objective questions that show issues without a firm diagnosis of any conditions/disorders. This is where it becomes helpful to use risk factors, as they show simply the probability of negative outcomes in mental health. However, due to the nature of probability, this does not guarantee that anyone who responded with a lower number will end up with negative mental health outcomes. This lack of objectivity could be viewed as an issue, as no concrete evidence of mental health problems is shown. With the possibilities of this format of study, however, it is most reasonable to examine risk factors, regardless of their lack of firm evidence.

Future direction for studies of this nature should examine different academic institutions. This study was only tied to one university. By looking into different campuses, a more broadly encompassing understanding of the relationship between living situations versus mental health as it’s tied to college students can be found. Furthermore, comparing the different institutions’
policies with each other might help to determine which policies might contribute to positive mental health and which may hinder it. This mindset could be expanded further, as different areas across the country could be compared to further expand the understanding of this relationship on a holistic level.

Another suggestion for further research could be to examine more factors. The factors examined here, as mentioned previously, only discuss two out of the four groups of factors. Furthermore, the questions asked do not necessarily encompass every aspect of the groups of factors discussed. By expanding the questions asked, a more thorough understanding of the impacts of certain factors compared to others can be determined. This especially could be found if the studies include multiple dependent variables, making each factor its own variable to be contrasted with the others. This could provide further evidence on which factors have the highest likelihood to impact mental health outcomes, which could lead to even more focused research down the line.

Moreover, a study that could allow for more unique input from the respondents could be valuable to get a more nuanced interpretation of participants' mental health. The current study allows for very little subjectivity in response, so by allowing free-response questions and answers, more details could be revealed to researchers than they might have initially considered. This could lead to a more meticulous understanding of the impacts of certain situations, factors, and various other components might have on overall mental well-being. As discussed above, there is difficulty in conducting studies that look extensively into the subjectivity of mental health. However, if further examination can provide insight to assist with that difficulty, more studies in the future will likely be able to give better insight into mental health on a wider scale.
Mental health is a topic that deserves as much attention as it can get. It is useful for those in education to understand what impacts students at their institutions to better support them and prepare them for life beyond college. The current study shows that there is some discrepancy between the different conditions of living. Although limitations do exist in this study, it should be used as a branching-off point for further research, policy making, and healthcare decisions in the future. Achieving better mental health outcomes for all students, regardless of where they live, should be a goal to strive to for any university. By giving more attention to the topic, the best steps forward can be found to make mental health less of a burden for all.
References


<table>
<thead>
<tr>
<th>Gender</th>
<th>Male</th>
<th>Female</th>
<th>Non-Binary / Third Gender / Other</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>37</td>
<td>111</td>
<td>16</td>
</tr>
</tbody>
</table>

**Total Participants** 164

*Note. N = total number of participants*
Note. The average scores for either living condition, including standard calculated error bars. A significant difference was found between the two conditions, showing that those living on-campus have significantly higher scores than those living off-campus.
### Appendix A

**Living off campus has:**

<table>
<thead>
<tr>
<th></th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neither agree nor disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helped me feel more connected to UNO.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enhanced my overall experience at UNO.</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Enhanced my academic performance.</td>
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<td></td>
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<tr>
<td>Helped me to connect with campus resources and supports.</td>
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<td></td>
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<td></td>
<td></td>
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<tr>
<td>Enhanced my overall well-being.</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Been supportive for my mental health.</td>
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<tr>
<td>Helped me develop meaningful interpersonal relationships.</td>
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<td></td>
</tr>
<tr>
<td>Helped me more effectively communicate with others.</td>
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<td></td>
</tr>
</tbody>
</table>

*Note.* This is the setup for asking those living off-campus. Those completing the survey in either condition saw the same questions.