

Student finance and mental health



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Ron Roberts, John Golding and Tony Towell look at the implications of financial hardship for the well-being of students and the wider community.

IN RECENT years, the UK has witnessed a rapid expansion in the numbers of students enrolling in further and higher education. Between the academic years 1990/91 and 1994/95, for example, numbers in full-time higher education increased by 55 per cent (Central Statistical Office, 1997). This expansion was most pronounced among females, whose numbers rose by 72 per cent.

The forces responsible for restructuring the wider labour market toward more part-time and casual employment — chiefly of females in low-paid work (Hutton, 1995) — seem to have been similarly active in the arena of higher education. During the above period part-time undergraduate enrolments for females increased by 88 per cent, in comparison to an increase of only 9 per cent for males.

Commentators have been quick to point out that this expansion has not been matched by increases in real spending (Central Statistical Office, 1997). Spending for further, higher and continuing education increased by only 17.4 per cent during this time.

One consequence of these changes has been a reduction in the value of the student grant: frozen for four years in the early 1990s, followed by reductions of 10 per cent a year. This diminution in value has been accompanied by increasing numbers of students taking out loans of various kinds. In response to the Dearing Report (National Committee of Inquiry into Higher Education, 1997), the government has proposed introducing tuition fees, abolition of the mandatory grant, and further expansion of the loan system.

An inevitable consequence of these changes is that large numbers of students are falling into debt, as well as working increasingly longer hours in an attempt to maintain viable living standards. A recent estimate from the National Union of Students (NUS) suggested that the average debt for final year students was in the region of £4800. (Swanton, 1997).

Lindsay and Paton-Saltzburg (1993) found 57 per cent of their sample worked regularly during term time, with one-third of these working in excess of 20

hours each week.

Current trends would suggest that these financial pressures upon students will grow — placing increasing numbers under stress and at risk of dropping out from higher education (Edmundson & Carpenter, 1995).

Several studies have documented the role and the extent of financial problems in UK student life (National Union of Students, 1994; Windle, 1993). The NUS survey found just over half of the sample (53 per cent) reported being in debt at the time of the study.

A number of smaller scale investigations lend support to these findings. Berry's (1995) study of 169 women attending a northern English university found over 90 per cent of the respondents unhappy with their financial resources — with a number expressing the possibility of dropping out because of the difficulties. On the other hand, Rickinson and Rutherford (1995) found severe financial problems reported by only 18.5 per cent of their sample, although here too such problems appeared connected to the risk of withdrawal from academic life.

As the structure, delivery and funding of higher education in the UK comes to resemble that seen in other countries, no comfort can be gained from a review of student life elsewhere. International data paint a similar picture of students under financial strain.

In Tyrell's (1992) survey of Irish undergraduate students, financial problems (in addition to academic issues, time pressures and interpersonal relationships) loomed large. Managing money was seen as the most important stressor among first-year students (reported by 44 per cent as moderately or severely stressful).

Similar figures to these have been reported from the US. Forty per cent of Dunkel-Schetter and Lobel's (1990) students described financial responsibilities as being often or very often overwhelming. And of 282 female students studied by Frazier and Schauben (1994), 60 per cent indicated they had experienced financial problems within the preceding six months.

Estimates from all the above studies vary somewhat, but given the diverse

composition and locations of the student populations studied, this cannot be considered surprising. However, all are consistent with the presence of financial problems in a large proportion of the student population. Whether these estimates will converge as sampling methods and location are standardised cannot be answered as yet.

Personal financial difficulties have been of interest to health scientists and of relevance to psychologists and health practitioners because a strong body of evidence points to associations between financial stress and mental and physical ill-health. These may be direct, arising from poor nutrition and bad housing for example, or indirect, arising from the social meanings and implications of having relatively little money (Wilkinson, 1996). The latter might include poorer physical health through lack of suitable opportunities for physical exercise, as well as reduced levels of social support and low mood as opportunities to interact with others are curtailed through a lack of money.

Low income may also entail having to live in a deprived neighbourhood which itself constitutes a further source of psychosocial stress. For students, this might also mean longer working hours and less time available for study or rest.

Marmot *et al.* (1997) found that difficulty in paying bills was a major factor in explaining social class inequalities in depression and psychological well-being in British civil servants. Van de Mheen *et al.* (1997) in the Netherlands concluded from their work that adult health differences between occupational groups arose principally from differences in the childhood environment, with one of the principal determinants being financial circumstances.

Though financial difficulties in students have been documented in a number of investigations, the possible effects of these upon health and psychological functioning have to date received little attention.

Survey

Over the past year we have undertaken a preliminary study of the relationships between students' economic circumstances, their health behaviours, lifestyle and mental and physical health. A sizeable proportion of our sample of 103 were psychology students (65 per cent), with most of the total sample (79 per cent) in full-time as opposed to part-time education.

Numbers were also heavily weighted towards undergraduates (83 per cent). The predominance of psychology students among the respondents is unlikely to have produced a serious bias in our data, as findings revealed economic and occupational circumstances comparable to those observed in representative

national student surveys: 41 per cent were in debt, owing on average approximately £3000, with a large majority (85 per cent) working in addition to studying.

For those working, an average working week amounted to 12 hours (ranging between two and 50 hours). In addition, we found just under three-quarters (70 per cent) experienced difficulty paying bills.

The physical health of those participating in our survey appeared broadly similar to normative data (Jenkinson *et al.*, 1993), as did the propensity to engage in unhealthy behaviours (indexed by tobacco, drug or alcohol consumption). By contrast, their psychological well-being was markedly poorer than the population norms established for people of the same age and sex (Cox, 1987; Goldberg & Williams, 1988).

Our data echoed Hodgson and Simoni's (1995) findings that found financial problems in students were linked with poor mental health. These authors found depression, poor psychological functioning and poor academic performance to be corollaries of financial hardship. In our own study, poorer mental health (indicated by General Health Questionnaire scores) was significantly related to difficulty in paying bills as well as to longer working hours outside university.

In addition, we found that people who had considered abandoning their course of study for financial reasons had significantly poorer mental health, poorer perceived general health, lower vitality and poorer social functioning.

All the effects we observed were far from small. Given the current picture of widespread economic problems in the student body, these findings suggest that large numbers of students may be at risk.

We found no relationships between self-esteem and extent of financial problems. Among undergraduates, trends according to year of study were observed for: worsening mental health and vitality; increasing impact of emotional problems on social functioning and role limitations; and deepening financial hardship. Numbers in the third year were, however, insufficient to permit meaningful statistical analysis of any of these trends.

Given the obvious need to replicate these findings, our study is continuing with a substantially enlarged sample at another university over the forthcoming year.

Implications

On a practical front, should the picture painted thus far receive further validation, then it is imperative that a number of issues be considered. Even if subsequent data fail to support the hypothesis that financial hardship impacts directly upon students' physical health, a con-

cern must remain for the physical health of the children of students.

Of the 14 members of our sample who had children, most (11/14) reported difficulty in paying bills and nearly half (6/14) reported being in debt. Economic hardship for students who are also parents must entail economic hardship for their offspring.

As numerous studies attest to a direct link between poor childhood socioeconomic conditions and future morbidity (Barker, 1990; Lundberg, 1991; Wright *et al.*, 1994; James *et al.*, 1997; Roberts, 1997) there are likely to be adverse consequences of student hardship on the health of future generations. With upwards of 2.4 million people currently in further and higher education (for 19- to 20-year-olds, almost 30 per cent of the available population is in higher education (Wisniewski, 1997)), the burden of the ensuing potential ill-health should not be underestimated.

Poor student mental health on a large scale would carry implications for the provision of mental health services within the confines of the university and the wider community of which the university forms a part. In all, given the number of people students come into contact with, widespread psychological ill-health in the student body would impact on the quality of life of a substantial section of the population.

Likewise, the presence of psychologically distressed students on campus must inevitably affect the provision and quality of higher education. The increased class sizes and lower levels of personal contact with staff which restructuring has brought are already causing difficulties for staff and students, without the added problems which long-term financial and psychological hardship may bring. If these deleterious consequences do come to fruition, one wonders what plans are afoot for academic and ancillary staff to cope with growing numbers of students with problems.

We are thus arguing that the practical and wide-ranging significance of student health be recognised, with further investigation urgently required. As a principal goal, such research must seek to clarify the nature of the causal relationship between financial problems and poor mental health.

As it stands, a correlation could arise in two ways — either the stress of monetary problems could directly affect mental health or people with poorer mental health may be more likely to get into financial difficulty. With existing data the latter possibility cannot be entirely eliminated.

Similarly, the relationship we observed between mental health and the possibility of abandoning study for financial reasons is open to interpretation. Either those with poorer mental

health are more likely to subsequently consider abandoning their course when faced with financial difficulty, or the financial difficulties themselves lead to poorer mental health.

We propose that a number of longitudinal studies be undertaken across the country to resolve these questions.

Where longer working hours are associated with poorer mental health, however, it is difficult to envisage any obvious reasons why those with poorer mental health would work longer hours. Indeed, it can be argued that in modern, highly competitive economies such as we live in, it is those people with poorer mental health who are more likely to be denied the opportunity to work (Fox, 1990; Jones *et al.*, 1993; Bartley & Owen, 1996).

The lack of association between self-esteem and financial difficulty could be explained on the basis that students attribute the source of their financial problems not to their own ability to manage money (i.e. an internal attribution) — but to an external one (probably the inadequacy of the state's funding arrangements for students).

Attribution theory might lead one to predict that this picture would continue to hold. However, the issues of health behaviours or physical well-being are less certain, though at present the data suggest only that the immediate adverse effects of student finances are psychosocial.

In conclusion, while we urge caution in the interpretation of existing data, the overwhelming importance of the questions raised here means that this caution should not be interpreted as a recipe for inaction.

Students may never have been particularly well off financially, but in the brave new world of underfunded higher education for all, poverty appears to be becoming entrenched — a situation that carries dangers for the wider society. This is something we should all be concerned about.

Both the short and long-term implications of widespread financial hardship for the well-being of our students and our wider communities warrant serious attention. Further extensive studies are necessary and psychologists have a duty to present the findings from these to a wider audience.

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