Introduction

Mental health has become a staple in college students' lives, particularly since COVID-19. This has led to an increase in mental health issues, not only for college students, but people worldwide. Studies have shown COVID-19 pandemic is not only a threat to physical health, but also mental health as well. In order to cope, people are turning to alcohol, drugs or potentially addictive behaviors such as gaming and gambling.

COVID-19 has increased stress, causing people to be fearful of living life, leading to anxiety about the virus. The COVID-19 pandemic is associated with psychological distress, declines in well being and the rise of psychopathological symptoms. (Brose A). Since returning to campus, regular in person events have been hosted through zooms, affecting student’s motivation to decline and a lot of the first year students are living isolated in their dorm rooms which can also help decrease their mental health and well being.

We have decided to put together activities that are in person in hopes of getting people out and active. Engagement in physical activities can improve quality of life and reduce isolation by providing opportunities to return to activities people usually enjoy. Physical activity can reduce anxiety symptoms and is an effective treatment for those who have to deal with panic disorder or anxiety disorder (Peddie N). There is a positive relationship between physical activity and mental health, and many doctors say that physical activity is almost always beneficial to improving one’s mental health and is encouraged by many doctors and psychologists.
College Students’ Mental Health Is a Growing Concern, Survey Finds.

“The history of mental illness in the United States is a good representation of the ways in which trends in cultural understanding of mental illness influence national policy and attitudes towards mental health. Many cultures have viewed mental illness as a form of religious punishment or demonic possession. In ancient Egyptian, Indian, Greek, and Roman writings, mental illness was categorized as a religious or personal problem. In the 5th century B.C., Hippocrates was a pioneer in treating mentally ill people with techniques not rooted in religion or superstition; instead, he focused on changing a mentally ill patient’s environment or occupation, or administering certain substances as medications. During the Middle Ages, the mentally ill were believed to be possessed or in need of religion. Negative attitudes towards mental illness persisted into the 18th century in the United States, leading to stigmatization of mental illness (and often degrading) confinement of mentally ill individuals” (Unite for Sight).

“Mental Health America (MHA), originally founded by Clifford Beers in 1909 as the National Committee for Mental Hygiene, works to improve the lives of the mentally ill in the United States through research and lobbying efforts. A number of governmental initiatives have also helped improve the U.S. mental healthcare system. In 1946, Harry Truman passed the National Mental Health Act, which created the National Institute of Mental Health and allocated government funds towards research into the causes of and treatments for mental illness. In 1963, Congress passed the Mental Retardation Facilities and Community Health Centers Construction Act, which provided federal funding for the development of community-based mental health services. The National Alliance for the Mentally Ill was founded in 1979 to provide “support,
education, advocacy, and research services for people with serious psychiatric illnesses” (Unite for Sight).

**Mental health issues are prevalent on college campuses**

- 75 percent of lifetime cases of mental health conditions begin by age 24.(1)
- One in four young adults between the ages of 18 and 24 have a diagnosable mental illness.(2) More than 25 percent of college students have been diagnosed or treated by a professional for a mental health condition within the past year.(3)
- More than 11 percent of college students have been diagnosed or treated for anxiety in the past year and more than 10 percent reported being diagnosed or treated for depression.(4)
- More than 40 percent of college students have felt more than an average amount of stress within the past 12 months.(5)
- More than 80 percent of college students felt overwhelmed by all they had to do in the past year and 45 percent have felt things were hopeless.(6)
- Almost 73 percent of students living with a mental health condition experienced a mental health crisis on campus.(7) Yet, 34.2 percent reported that their college did not know about their crisis.(8)
- Colleges across the country have reported large increases in enrollment.(9) At the same time, college counseling centers have also observed an increase in the prevalence and severity of mental health issues experienced by students and an increase in the number of students taking psychotropic medications.(10)

**Mental health issues are a leading impediment to academic success.**
• In an American College Health Association report released in 2011, students cited depression and anxiety as among the top impediments to academic performance.
• 64 percent of young adults who are no longer in college are not attending college because of a mental health related reason.(11) Depression, bipolar disorder and posttraumatic stress disorder are the primary diagnoses of these young adults.(12)
• 31 percent of college students have felt so depressed in the past year that it was difficult to function and more than 50 percent have felt overwhelming anxiety, making it hard to succeed academically.(13) (Chadron State College) Statistics from an actual college.”
(American Psychological Association).

The Importance of physical and mental health in explaining health-related academic role impairment among college students

“Research consistently documents high rates of mental health problems among college students and strong associations of these problems with academic role impairment. Less is known, though, about prevalence and effects of physical health problems in relation to mental health problems. The current report investigates this by examining associations of summary physical and mental health scores from the widely-used Short-Form 12 (SF-12) Health Survey with self-reported academic role functioning in a self-report survey of 3,855 first-year students from five universities in the northeastern United States (US; mean age 18.5; 53.0% female). The mean SF-12 physical component summary (PCS) score (55.1) was half a standard deviation above the benchmark US adult population mean. The mean SF-12 mental component summary (MCS) score (38.2) was more than a full standard deviation below the US adult population mean. Two-thirds of students (67.1%) reported at least mild and 10.5% severe health-related academic
role impairment on a modified version of the Sheehan Disability Scale. Both PCS and MCS scores were significantly and inversely related to these impairment scores, but with nonlinearities and interactions and much stronger associations involving MCS than PCS. Simulation suggests that an intervention that improved the mental health of all students with scores below the MCS median to be at the median would result in a 61.3% reduction in the proportion of students who experienced severe health-related academic role impairment. Although low-cost scalable interventions exist to address student mental health problems, pragmatic trials are needed to evaluate the effectiveness of these interventions in reducing academic role impairment. Research consistently documents high rates of mental health problems among college students and strong associations of these problems with academic role impairment. Less is known, though, about prevalence and effects of physical health problems in relation to mental health problems. The current report investigates this by examining associations of summary physical and mental health scores from the widely-used Short-Form 12 (SF-12) Health Survey with self-reported academic role functioning in a self-report survey of 3,855 first-year students from five universities in the northeastern United States (US; mean age 18.5; 53.0% female). The mean SF-12 physical component summary (PCS) score (55.1) was half a standard deviation above the benchmark US adult population mean. The mean SF-12 mental component summary (MCS) score (38.2) was more than a full standard deviation below the US adult population mean. Two-thirds of students (67.1%) reported at least mild and 10.5% severe health-related academic role impairment on a modified version of the Sheehan Disability Scale. Both PCS and MCS scores were significantly and inversely related to these impairment scores, but with nonlinearities and interactions and much stronger associations involving MCS than PCS. Simulation suggests that an intervention that improved the mental health of all students with scores below the MCS median to be at the
median would result in a 61.3% reduction in the proportion of students who experienced severe health-related academic role impairment. Although low-cost scalable interventions exist to address student mental health problems, pragmatic trials are needed to evaluate the effectiveness of these interventions in reducing academic role impairment” (Wilks).

Proposal

College is full of new life lessons, accomplishments, dreams and experiences. These experiences may range from positively life changing to learning how to cope with stress and anxiety. As a student, learning how to manage time for social activities and school work is a delicate process. With COVID-19 restrictions, it has become more difficult to meet people and have the typical college experience. Because of this, students feel lonely, unmotivated and bored. Our proposal for this issue would be outings once a month for students to meet or engage in new activities. These activities may take place on one of the ASU fields for a kickball day with other food and drink stands, group hikes at sunset to A Mountain, meal preparation groups, and Tempe Town Lake boating. These are just a few ideas of ventures that Sun Devils can participate in. These are all activities that can be done Covid-19 safely, as well as people being tested before the outings. The food and drinks provided at field days may be bought with M&Gs as well as USD payments. The staff running the events may be volunteers, paid staff, or other trained students on campus.

Solution

Our solution is to help college students improve their mental health by providing activities and various information sessions to help them cope with what they need. Our goal is to try and get the mental health of student’s to become better rather than get worse as their time progresses on or off campus at ASU. We would split students up based on the different challenges they face, in
order to allow students to not only feel comfortable, but also gain a support system. Some activities we would provide include: hikes, field days, cooking classes, and boating. We want to focus on making sure students are getting outside and doing physical activities. As of now we would make sure all activities will be covid friendly until further notice. Counseling offices will also be instituted to ensure students are staying active and improving their mental health.
Works cited

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