

Sara Webel

Dr. Jareb, Prof. Moras

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Anxiety Disorders: The Change Over Time and Their Effect on College Students Today

The mental health of people has become a forefront issue of the 21<sup>st</sup> century and there has been much more of a focus on improving treatments for those affected by mental health issues.

Anxiety disorders have been an issue that is on the rise, especially in college students. Anxiety disorders change the way that the brain operates in that they alter the neuron pathways which can then affect the way the other body systems function. By changing the ways of the central nervous system, there is then a tendency to change the way the rest of the body operates, whether that be behaviorally or systemically. In the early 1900s, the standard of care for mental patients was quite poor; health care professionals did not take care of the patients in the same way that they do today. There is still a stigma against the mentally ill however, there has been many changes that have occurred in health care that allowed for more acceptance. With this change, there have been more people that were able to come forward and get treated for their anxiety and depression, some of these people being college students.

There is a tendency for college students to be affected by anxiety and depression because of the changes their body go through as well as the change in their environment. They are at the point of their life where they just went through the most significant bodily change that a person goes through in their life (puberty) (Steinberg 2010). Furthermore, their experience with the transition from relying on their parents every day to suddenly living by themselves is a major cause of their homesickness and their possibility of feeling lonely or developing anxiety and other mental

health issues. The rise in people being affected by anxiety disorders has led to the breakthroughs that are happening in mental health treatments. There are an increasing amount of resources that are available to this age group; the problem is getting them to accept that something is wrong and that they need to reach out and get help.

### **The change in treatment and diagnosis of mental health disorders over time**

There have been many changes to the way people view mental health today since there are now many people that are able to be diagnosed. Additionally, there is a much greater sense of acceptance to those with mental illness. Especially in the 21<sup>st</sup> century, there has been an increased focus on boosting mental health and many people had begun participating in activities that establish good mental health. This, however, was not always a promoted ideology. In times earlier than the 2000s, people with mental health issues were not able to receive treatments that are as beneficial as those that are available today. Because many people saw the need for change, there has been improvements made for these patients and now more than ever, patients are able to get the help that they need.

With limited resources and research on mental health disorders in the late 1800s, there were many people that were “tested” for a mental illness and was then given a misdiagnosis. There were very few types of mental illnesses you could have, which was basically limited to panophobia, neurasthenia and anxiety neurosis (Crocq 2018). These specific disorders were only related to anxiety, which was then thought to be caused by fear and not a brain disturbance. The symptoms experienced were mainly fear and anxiety, but ranged as far as vertigo, hallucinations, diarrhea and nausea. Even with the obvious physical symptoms, the psychologists only saw that there was a mental disturbance and not a deeper-rooted problem.

As universities began to notice that their students needed mental health help, they began to offer resources to help students to manage this. This began as early as the 19<sup>th</sup> century but became more prominent in the early 21<sup>st</sup>. This was mainly due to the fact that so many students were not able to complete their college curriculum due in part to mental health disorders, though it was at the time thought to be because of personality issues (Kraft 2011). Since psychiatrists were not trained or available to help in schools, many universities were not able to provide mental health resources for their students. Only the most mentally disturbed students were sent away to a mental hospital, where there were insufficient resources for their condition. With increasing demands while nearing into the 1940s and 1950s, there was still 17% of schools that had no mental health services, while the rest did but provided no diagnoses and the programs were most times unknown or unacknowledged by the students (Kraft 2011).

Because of the misdiagnoses given to patients, they were not able to benefit from the treatments given to them. With more and more people being suspected of some sort of mental disturbances, and with so many students still suffering in universities, more research was put into learning more about mental health disorders. Rather than just seeing anxiety as a fear response, psychologists began to dissect generalized anxiety disorders and learned that there were somatic issues that comes with anxiety (Crocq 2018). With more and more discoveries being made, more mental disorders were able to be dissected from the generalized categories. These discoveries led to more people being successfully diagnosed. This had also led the way to better treatments and geared programs to help the individual.

There was an increased in funding towards many universities after the end of World War II since many veterans decided to go to school, and with the recently passed GI bill, they were going for free (Kraft 2011). The veterans brought about many new mental disorders, which lead to mental

health programs being introduced and promoted in the universities. The success of these programs and the organizations that brought them about also implemented benchmarks that each college had to comply with so that their students could stay mentally fit (Kraft 2011). Also, with standardized programs, they were able to use the statistics collected as a way to study the students which allowed for the expansion of the anxiety disorder spectrum and even more diagnoses. These new aspects in the colleges were able to bring about change in how scientists and psychologists deal with mental health.

**Brain development: Brain chemistry changes with puberty and affects the likelihood of a mental health disorder developing**

Adolescents go through the biggest change in their life, allowing them to become adults. This happens through puberty, where hormones are being produced and used more rapidly, causing changes in sex organs, height, weight, and brain chemistry. The increased number of hormones in the body is regulated by the brain which will then lend itself to affecting the psychological aspects of the teen, causing social and behavioral changes. This change in brain chemistry is important in how the mental state of college students is maintained, since puberty changes the needs of the body and the mind. College students for the most part have just finished going through the remaining physical changes of puberty, including changes in the brain (Steinberg 2010). This could be a reason why they are more prone to mental health issues.

Structural and morphological changes occur in the brain during an adolescent's change into adulthood, which influences a significant change in function of the structures (Steinberg 2010). Because of this change, there is more likely for stress and anxiety to develop. Changing neuron pathways to allow for new ones to form, affects how neurotransmitters do their assigned jobs. Most of these pathways have stayed the same since birth. The fact that adolescents now are

creating new brain pathways for new tasks to be performed is what sometimes causes harm to the other pathways, or the new pathways are what cause some hormones, such as serotonin, to be blocked from entering the neurons. Serotonin is known as the “happy hormone” since it releases endorphins that make a person feel well. In many teens, the serotonin receptors become damaged or blocked, which is then harmful because those endorphins are not being released, which is then a main factor in developing depression. Endorphins can be released in other ways however serotonin is the main hormone responsible in their release.

Another important change in the brain during this time of development is the change in the balance of white and grey matter. This mainly occurs as the prefrontal cortex is developing. Though many scientists first believed that the increase in white matter was due to new myelinations in the brain, it is now being found that the change in cellular processes in the brain are most likely responsible (Steinberg 2010). With this discovery, the importance of neurons comes about. The synaptic pruning of the cortexes in the brain is what changes the functionality of that specific region of the brain.

The plasticity of the adolescent brain is what allows for their behavioral changes although it is not well known exactly what is altered in the behavior since it is different for every teenager (Steinberg 2010). Since neurobiology is a relatively new field, there is not a plentiful number of studies that have been conducted to find precise changes of structure to affect behavior.

Researchers have demonstrated however that connectivity in the brain is important in behavioral development (Steinberg 2010). This means that the neuron pathways are changing, as mentioned before, and it is not solely reliant on the pruning of the brain. Because of this, there is more risk-taking behaviors that happens with development. The rising levels of dopamine are what account for this (Steinberg 2010). It is seen that with more to gain and less to lose, the increased amount

of dopamine is then accounting for the “reward-seeking behavior” the adolescents experience. Teens now want to be able to do tasks on their own and want to have new experiences. Their developing body however allows them to be more prone to injury, since their coordination and cognitive control pathways are being heavily altered (Steinberg 2010).

The amount of changes going on within the body of a teenager can be overwhelming which then allows for many of them to become frustrated. This is what is a main cause for students to begin to take their lives into their own hands, since many of them do not feel like themselves during this time in their lives. Their change in brain chemistry is what is changing the way these students think and act, which is why there is most likely an undertone of a growing mental illness in the teen.

### **New realities of college for students can push them to unhealthy habits and loneliness**

Many people experience the excitement of college, especially those who have gone away to school. There is usually a new sense of self, where new responsibilities are given since there can no longer be a reliance on the student’s parents. Students are faced with taking care of themselves as well as their grades, which can easily turn their excitement about being on their own, to stress and anxiety. With a new ability to have power over their decisions, this leads to more freedom, which then also leads to a possible change in decision making.

An adjustment to living full-time by oneself is where the need to decide proper courses of action to promote a healthy lifestyle comes in to play. However, with college students being at such a pivotal point in their development, this idea sometimes does not act as a priority whereas underage drinking or parting and socializing most times will. This is sometimes seen as “coddling” by parents since they did not enforce ways for their children to take care of themselves on their own at home, and rather forced them to partake in healthy decisions (Chan

et. al 2019). This is mainly where substance abuse and major depressive disorders come into play. With students not caring for themselves, there is a high chance they will become undernourished and can begin to suffer mentally from it. Additionally, the common misuse and overuse of alcohol and drugs is detrimental to the mental function of the student's developing brain (Chan et. al 2019). Since most universities do not have adequate systems to address drug and alcohol abuse in their students, the students are then more likely to have unaddressed substance abuse disorders. This is something that is extremely common in college and, affects these students well into their future. Alcohol and other recreational drugs have the ability to inflict major damage to the brain, effecting the pathways and neurons spoken about before (Chan et. al 2019). With limited resources in colleges to help these students realize the error in their ways, there are susceptible to a lifetime of mental illness and/or substance abuse.

Transitioning to college also brings around the topic of loneliness. With loneliness, there is most times a significant correlation between this and anxiety and depression. The social skills developed by college students are important in maintaining a good system of mental health (Moeller et.al 2019). The relationships that are formed between students in college are important in helping students to get through those four difficult years of classwork. A student's ability to socialize is significant in maintaining a good state of mind. Without well-maintained social skills, a student is more likely to feel a sense of loneliness, especially because their previous support system is typically hours away. With all the other usual causes of anxiety and depression, loneliness is able to promote the dark thoughts that come with these disorders. Social connections are able to help pull these students out of their minds and into what is happening right in front of them (Moeller et. al 2019). Verbal social skills are important in pushing students

to get the help that they need as well as form relationships that are able to influence their mental health in a positive way.

Loneliness and poor mental health also lends its way to homesickness, and the desire for the person's life to go back to the way it was before they went away to college. There is typically an attachment to people or places at home that appear more comfortable than people and places are at school. Typically, when a student goes away, they experience an entirely new culture (Thurber et. al 2012). They are exposed to many new ideas and ways of life that sometimes it is an overwhelming experience for the student. With many new people, there are then many new exposures too. Some students that were never exposed to parties are now thrown into the midst of sport and fraternity parties. Most of the students that have never experienced this before will have a longing to go back home, where they were comfortable and were not forced to participate in events that make them uncomfortable.

Being labelled as "mentally ill" is something that many students would be embarrassed to be called. Entering college with a preconceived notion that other students are judging them for having some sort of mental issue is already an uncomfortable idea for them. Though many people would not know about the mental health disorder unless it was disclosed to them, it is still embarrassing to think that an episode may happen and then they would have to disclose their personal information to someone they are most likely not close with. Though the idea of stigmas is true, the personal stigma that students have is actually more common than that of other student's stigmas towards mental health (Downs et. al 2009). Many students are in denial of the fact that they may have some sort of mental health disorder, especially if they feel that people that they trust would not be supportive of them. Students sometimes feel as if they do not have the proper support system that they need to go and get help, even though it would be very



beneficial for them. The negative stereotype that they believe they would receive from their friends is not worth getting the help that they need (Downs et. al 2009). It has been stated that:

“An individual becomes aware of public stigma (i.e., perceived public stigma), then forms personal attitudes (i.e., personal stigma) that may or may not concur with perceived stigma; and then determines whether or not to apply these stigmatizing attitudes to the self (self-stigma).” (Downs et. al 2009)

This is an interesting point in that sometimes the thought of judgement is all in their head, though it may come from past experience with the topic. Just as depression and anxiety brings about negative thoughts of oneself, they also bring about the thoughts of not being good enough for others too. This insecurity that comes with depression can be detrimental to the wellness and the healing of a student that is struggling. By presenting programs and ideas that promote acceptance of people with mental health disorders, the overall stigma can decrease, which will then decrease the likeliness of the people suffering to believe that there is a stereotype. Acceptance for all is something that many people of this generation strive to fight for.

All of these issues can be helped with some techniques that allow for acceptance of other people's beliefs and the ability to cope with unwanted thoughts. There are many ways to bring about acceptance through research about the college being attended (Thurber et. al 2012). With researching party scenes, demographics, and any other important information about the school can help to alleviate the initial surprise of college life. Being able to know what to expect can reduce the need for students to hold on to their past ideologies about life and give them a smoother transition into college life. Additionally, coping skill are important since the student will be by themselves having to handle uncomfortable situations or unwanted thoughts (Thurber et. al 2012). By devising a set of coping skills for the student, a level of comfort within their own

mind can be reached. Especially if there are no on-campus counselors, it is significant for the safety of the student to be able to find their own way out of dark thoughts, since they can sometimes be alone when they come about. Acknowledging the problem and finding a solution is just as important as pushing for programs in the college to cope with these issues.

### **Addressing the stigma and supporting fellow students**

As a college student and a s.w.e.e.t. (student wellness education and empowerment team) member, I have had extensive experience with mental health and the hardship that comes with it. I have firsthand seen friends and students struggle to keep up with their mental health resulting in them suffering immensely. College is more than just a way to earn a degree in my opinion, rather it changes the way some students perceive the world and themselves. There are many people that do not see the importance of keeping up with their internal feelings. They do not see an importance in programs such as s.w.e.e.t. because they see mental health as controllable. They believe that “it’s all in their head” or “they’ll get over it eventually”.

In the Sacred Heart University community, there were three students in the 2019-2020 academic year that had decided that their depression and anxiety was something they could not live with anymore and, decided to take their own lives. It is hard for many students to hear this, since so many of us had the same experiences as them, socializing, partying, stressing, et cetera, and we know their struggles all too well. When something like this occurs, many students need help getting past it, but never reach out because of the stigma, just as these students also decided not to get help, and now they do not have the chance to. As a peer educator, I try and find ways to combat this. We create programs to help deal with stress, anxiety, homesickness and many more issues. By conducting these programs, we see the students that want to change and how many people really do have the desire to reach out and get help.

In my own experiences, I have seen the stigma. I have seen people that have denied the existence of mental health disorders such as anxiety and depression. I, myself, have found it hard to reach out about my own internal hardships. There are some friends and family that I feel I cannot talk to about mental health, since they do not believe that it is as big of an issue as I feel it actually is. They sometimes also see that people are getting diagnosed just to get a diagnosis, even if it appears that nothing is wrong with them. My response to this is that many people may be upfront about their mental state. If this kind of person feels that they need help but are extremely vocal about it, they are not wrong in going to a psychiatrist and getting the help that they need. If they are open about their treatment or exaggerate their symptoms, sometimes it is a turn off to others. However, I can also see it as a normalization. Even though sometimes there are people that fake a mental health disorder, this should not impede others from reaching out. Speaking about or hiding symptoms of mental health disorders is the choice of the person. If someone thinks that they should get help, then they should be able to advocate for themselves and get help, regardless of their personality. Suicide happens so much more often than it should because of the people that are hiding their feelings. We should not be afraid to come forward about our mental health even though there sometimes are people that are just in it for the attention. There are many more active cases of patients with mental health issues than there were in the 19<sup>th</sup> and 20<sup>th</sup> centuries however, without a stigma, there could be many more people that have the support to go out and get the help that they need.

### **Conclusions**

The students in college today are under an immense amount of stress with political, social and educational issues that have been happening over the course of their lifetime. Although many of these issues are ones that are working to be resolved, there are still many different people that are

still being affected by them. Mental issues are still on the forefront of the age since so many people are now able to be diagnosed and are affected by them. Because of this, there is more of a fight for acceptance. In colleges, the changes that brought about mental health help have only happened within the past 50 years, which means that there are many improvements that can still be made. There can be better diagnosing tools, coping mechanism, resources and much more. These changes however should be started within the college communities so that adults can grow from this and continue to practice acceptance.

College students are the most susceptible to judgement for their mental issues as well as developing a mental health disorder. Their changing atmosphere could be cause for anyone to develop anxious tendencies and the desire for their life to go back to the way it was before college. There are many challenges that come with adjustments, the most prominent being mental health alterations, since these can sometimes end up being deadly. Without their parents and previous support systems, the student is left to be vulnerable. Because of the college environment also, there are many different negative activities that will result in a decreased overall health. The risk-taking behavior of many students can hurt them in the long run.

These students with mental health issues going into college have a more difficult time adjusting than others. They no longer can rely on their parents for help, or even their home therapists. They must be able to come up with their own coping strategies that will help them to deal with their thoughts. With the change of scenery, there is a chance of triggering events that are likely to happen. Hopefully, with programs such as s.w.e.e.t., colleges can now begin to have the desire to help their students. Homesickness programs have been positively affecting their students. With so many students having diagnosed mental health issues, there is more of a reason for colleges to invest in their student's well-being.

I have found that colleges are no longer about just grades and classes. It is now about finding where a person fits in best, what ideas they truly agree with and what they can do to better themselves. Seeing students come forward with their mental health issues is truly a huge step in the process of getting better. These students can change the way that mental health disorders are dealt with and perceived.

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