

# UNDERSTANDING STUDENTS WHO MAY BE AT INCREASED RISK OF MENTAL ILL-HEALTH

Tertiary education students, including VET students, might also experience additional risk factors, such as financial stress, lack of sleep, poor nutrition, balancing work and study responsibilities, increased autonomy and responsibility (if there is inadequate support), and pressure to excel(1).

Research shows that people from certain groups are at greater risk of experiencing mental ill-health, and can also face additional stigma, discrimination and inequality. These include (but are not limited to):

- Aboriginal and Torres Strait Islander students
- Culturally and linguistically diverse students (including international students)
- LGBTQIA+ students
- rural and remote students
- students with a disability
- apprentices and young males.

This resource should be used alongside other resources (such as the **Mental Health 101** and **Guides for: senior leadership; trainers and assessors; and administration staff**) to provide tailored mental health support for the student groups outlined below.



STUDENT GROUP	BACKGROUND	POTENTIAL BARRIERS TO ACCESSING SUPPORT
<b>Aboriginal and Torres Strait Islander students</b>	<p>Mental ill-health is higher among Aboriginal and Torres Strait Islander students compared with non-Aboriginal students, including a higher rate of hospitalisation for a mental health-related condition due to exposure to:</p> <ul style="list-style-type: none"> <li>• racism</li> <li>• trauma, including intergenerational trauma</li> <li>• cultural incompetence: implicit Western values and assumptions can be a barrier to achieving the best outcome for Aboriginal and Torres Strait Islander people(2)</li> <li>• socio-economic disadvantage: Aboriginal or Torres Strait Islander people are more likely to face greater levels of socio-economic disadvantage and have a higher risk of poverty than the broader population.</li> </ul>	<p>May experience stigma and shame in accessing mental health supports.</p> <p>Issues around confidentiality, trust and anonymity.</p> <p>Distrust in the service system and a negative perception of safety in treatment.</p> <p>Language: many Aboriginal and Torres Strait Islander communities refer to social and emotional wellbeing (SEWB) rather than mental health, viewing health in a holistic context that includes mental health and physical, cultural and spiritual health. Western medicalised language around mental health can act as a barrier.</p> <p>Lack of culturally responsive support. Specific cultural issues are often not understood or addressed by mental health professionals, including ways in which Indigenous knowledge, family, and spirituality interact with SEWB(3).</p>
<b>Culturally and Linguistically Diverse students</b>	<p>Culture may relate to values, beliefs, customs, communication styles and more. It can support people to build strong connections and communities with others, and be a source of pride, belonging, shared heritage and identity.</p> <p>However, it can be a source of stress if people feel that:</p> <ul style="list-style-type: none"> <li>• their culture is dismissed</li> <li>• it is not safe to express their culture with others</li> <li>• it is projected onto them</li> <li>• they're disconnected from their own or their family's culture</li> <li>• their culture doesn't support other aspects of their identities (for example, gender identity or sexual preferences)(4).</li> </ul> <p>They may also experience bullying, harassment and racism.</p> <p>Refugee and asylum seeker students may also experience visa and financial pressures, limited social supports, and stress caused by the inaccessibility of family or friends overseas. These students may have had traumatic experiences in their country of origin, for example being survivors of torture and trauma from war zones and civil conflicts(4).</p>	<p>These students may have difficulties accessing services on and off campus, due to:</p> <ul style="list-style-type: none"> <li>• English language barriers (particularly for communicating cultural concepts relating to mental health)(4)</li> <li>• cross-cultural issues around different expectations and ways of dealing with mental ill-health</li> <li>• access to appropriate/tailored support structures to tackle stigma and shame in accessing mental health supports</li> <li>• lack of counselling services that account for language and cultural diversity needs</li> <li>• lack of visible diversity in the mental health workforce may influence perceptions of the suitability of services.</li> </ul>

STUDENT GROUP	BACKGROUND	POTENTIAL BARRIERS TO ACCESSING SUPPORT
<b>International students</b>	<p>International students are at increased risk of experiencing poor mental health. Key reasons include:</p> <ul style="list-style-type: none"> <li>• isolation from families and culture</li> <li>• language barriers</li> <li>• financial stress</li> <li>• academic pressures.</li> </ul> <p>They may also experience bullying, harassment and racism(5).</p>	<p>International students have been found to be less likely to seek help for mental ill-health than domestic students.</p> <p>They may experience similar difficulties accessing services to Culturally and linguistically diverse students (see above), as well as lack of support structures to help them with the unfamiliar academic environment, new culture, and address language barriers(5).</p>
<b>LGBTQIA+ students</b>	<p>LGBTQIA+ people are more likely to attempt suicide and more likely to be diagnosed with a mental health disorder. Discrimination, social exclusion, isolation and abuse are key factors contributing to this increased risk(6).</p>	<p>Discrimination, social exclusion, isolation and abuse also serve as barriers for LGBTQIA+ people accessing mental health services, along with fear of rejection and fear of their confidentiality being breached(6).</p>
<b>Regional and remote students</b>	<p>Many rural and regional areas lack access to mental health supports. As such, students from rural and regional areas may not be able to access support and may have greater mental health needs(6).</p>	<p>Distance barriers in accessing mental health supports, such as inaccessible referrals, difficulty accessing psychiatrists, and lengthy response times for community mental health services.</p> <p>Lack of availability or continuity in the trained workforce(6).</p>
<b>Regional and remote students who have relocated to study</b>	<p>University students who relocate from rural or regional areas have very high levels of psychological distress. This may relate to:</p> <ul style="list-style-type: none"> <li>• lack of parental and peer support in the new location</li> <li>• increased likelihood of financial stress</li> <li>• increased mental health needs due to lack of access to support/early intervention prior to relocation</li> <li>• challenges with mental healthcare coordination(6).</li> </ul> <p>More study is needed to determine whether this experience is similar to the experience of VET students.</p>	<p>Rural and regional students who relocate for study may have had fewer opportunities to access support(6). This may contribute to a range of barriers even when access is now easier, such as:</p> <ul style="list-style-type: none"> <li>• perceived stigma about seeking help</li> <li>• lack of knowledge about what support is available</li> <li>• reduced peer networks, which could prompt help-seeking behaviours.</li> </ul>
<b>Students with disability</b>	<p>Living with disability may contribute to an increased risk of mental ill-health due to several social factors such as loneliness and social isolation, lack of employment opportunities, financial difficulty, and discrimination(6).</p>	<p>University students with disability have reported not feeling appropriately supported with their studies. They also report feeling hesitant to disclose their disability to academic staff for fear of being considered lazy, or fear that other students may think adjustments they receive due to their disability are unfair(6). More study is required to understand whether this experience is similar to the experience of VET students.</p>

STUDENT GROUP	BACKGROUND	POTENTIAL BARRIERS TO ACCESSING SUPPORT
<p><b>Students from low socio-economic backgrounds</b></p>	<p>Income and social status are key determinants of mental health and wellbeing. Students from low socio-economic (low-SES) backgrounds are at increased risk of mental ill-health. Exposure to additional risk factors, such as poor-quality housing conditions, food insecurity, poor nutrition and discrimination, may heighten the challenges faced by these students(6).</p>	<p>Barriers include reduced time and money available for help-seeking, effects of stigma in relation to a range of circumstances (e.g. homelessness), and often fewer support resources to promote wellbeing and recovery.</p>
<p><b>Young men</b></p>	<p>Males tend to disconnect from healthcare services when they enter adolescence, and this often continues throughout early and middle adulthood. Young males experiencing mental ill-health report low rates of help-seeking and low awareness of mental health services(7).</p>	<p>Western culture promotes strength, competitiveness and inexpressiveness for males, viewing emotionality as weakness, which can serve as powerful barriers to help-seeking(7). These cultural norms are more likely to be embedded in industries dominated by males, such as building and construction. This results in workplaces with limited support networks and support policies and the risk of young men experiencing shame and stigma about accessing mental health supports.</p>

**REFERENCES**

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The information contained in the Resources is intended only as a guide to relevant legislation and policy and does not constitute legal advice, impose additional legal obligations on RTOs or purport to provide binding interpretations of legislative obligations (for example, those under the *2025 Standards for Registered Training Organisation (RTOs) (Commonwealth)*, the *Disability Discrimination Act 1992 (Commonwealth)*, and the *Disability Standards for Education 2005 (Commonwealth)*).

The information contained in the Resources is accurate as at the date of publication. RTOs should seek legal advice specific to their individual circumstances to understand their legal obligations. For any questions about the Resources, please contact the [Department of Employment and Workplace Relations](#).

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