



Student Mental Health Study 2024

A call to improve and sustain students' and graduates' mental health

IN PARTNERSHIP WITH



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The true cost of university – an empty bank account and your mental health in tatters? In the four years we’ve been doing this study, the proportion of undergraduates whose mental health declined while at university has been steadily increasing.

This year’s research shows a marked increase in respondents reporting a mental health disability. While that’s a clear indication that students’ mental health should continue to be a primary focus of support services, I’m also hopeful this rise is in part due to increased awareness and reduced stigma of mental health difficulties, leading to more students seeking a diagnosis and treatment that otherwise may not have happened.

Raising awareness of the importance of mental health remains relevant, however, our focus should shift towards prevention of decline and intervention when needed. Cost-of-living continues to contribute to students’ stress and limits their ability to maintain a physically and socially health lifestyle – buying healthy food is becoming less affordable, and socialising is rarely completely cost-free. Our research consistently shows the importance of friends and community on mental wellbeing, and this year we’re starting to see a link with diet too. Educators and employers can and should do more to implement and encourage healthy working practices to improve mental wellbeing. The time of listening has passed, the time of action has come.

This research is only possible through the support of our partners. I would like to express my gratitude to Accenture for its continued commitment to the study; Universities UK and Student Minds for their expertise and advice; and to our many university partners that make this study the largest of its kind. And finally, thank you students for taking the time to fill in the survey.

Lisa Marris
Head of Research, Cibyl

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Once again we are delighted that Accenture has partnered with Cibyl to bring this, our fourth annual report, to publication. Each year builds a bank of knowledge about the mental health challenges young people face as they enter adulthood. Students and graduates, particularly the cohort transitioning into the workplace in the coming year or two, have faced challenges unknown to previous generations. Improving our own understanding of these challenges helps Accenture shape practices that support, improve and maintain the mental health and wellbeing of future employees. We hope that this report, conducted by experts at Cibyl, encourages and enables schools, universities and employers to do their best for students as they enter what should be an exciting and fulfilling time in their lives. Good mental health foundations allow every one of us to reach our full potential.

Talking about mental health and being open when we face challenging times extends the range of support available. The honest responses provided by this year's research participants back our own view that all of us will experience mental health issues, directly or indirectly, at some point in our lives. Having personally trained as a mental health ally I have seen first-hand the value of creating a workplace in which all our people can thrive, which includes being able to tackle mental health issues the moment they arise. Understanding, respect and compassion are key to that support.

As a Recruitment Lead, I was interested to read that 54% of respondents said their mental health had declined while job hunting. It reminded me how important it is to consider all aspects of the individual candidate experience. Inclusion is an ongoing part of the attraction, assessment, pre-joiner and induction phases of our recruitment process. People are the heart of our business and by enabling them to feel their best we foster optimum results for themselves, teams and ultimately for the clients we work with too.

We are already engaging with the insights found in this report, building on previous years' recommendations and knowledge, and shaping our plans for 2025 and the years ahead.

Joan Moore

Head of Early Talent Recruitment

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University student services and mental health teams are doing incredible work to provide the necessary support for the growing numbers of those who need it. Our mental health is critical for academic success, and we mustn't lose sight of the fact that mental and emotional health is the number one reason given by students considering leaving their course.

Unsurprisingly, financial pressures come out as a strong theme in this year's study, with the percentage experiencing frequent money worries rising to 2 in 3. Anxiety is coming out highest when it comes to the challenge of the cost of living, which is preventing many from feeling mentally healthy.

Government must take heed of these findings. If we are serious about spreading opportunity, and ensuring students are best set up to succeed, government must increase maintenance support for students, particularly those from disadvantaged backgrounds.

But we need to go further. Deeper and more ambitious partnerships between universities and the NHS can help close gaps in services and support for students and staff. Together we should work towards establishing dedicated student pathways within the NHS, recognising their unique needs and circumstances.

Supported by this year's findings, it's clear that the time to act is now. The number of young people with poor mental health is rising, and these interventions would be significant steps to supporting the success of our students and graduates into the future.

Dan Hurley

Deputy Director, Policy

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Cibyl's Student Mental Health Study 2024 sheds valuable light on the key issues shaping students' mental health and where improvements are necessary. The importance of identifying and dismantling barriers to good mental wellbeing remains clear.

It's no surprise to see the impact of the cost-of-living crisis highlighted throughout, with Cibyl's findings further echoing the concerns of Student Minds and the wider higher education sector. The impacts of financial hardship are profound – more students are juggling paid employment with the pressures of studying, and many are also socialising less and experiencing loneliness and isolation as a result. With almost half of students experiencing money worries daily, further support is clearly an urgent priority.

This year's report also highlights the significant academic pressures on students. With the long-term impact of the pandemic on learning still not fully understood, it's vital that students' worries about exams, deadlines, academic performance and graduate employability are effectively addressed by universities.

With 56% of respondents reporting current or previous experience of mental health difficulties, it is essential that universities and the NHS work for students. As the number of students entering higher education with diagnosed mental health conditions grows, Student Minds hopes

to see improved transitional support between services and institutions. A specialist, specific, consistent student healthcare support pathway which accounts for and addresses the unique challenges faced by the student population would enable students to access the timely and tailored support they often need.

The Student Mental Health Study 2024 is an important reminder that improving student and graduate mental wellbeing requires a concerted, whole-institution approach, from pre-arrival through to the transition into the workplace.

ABOUT THIS SURVEY

What this survey found

New in 2024



- The connection between MH and:
- lifestyles and eating habits
 - stress relating to graduate job search
 - engagement in employment
 - community and social involvement at work

Plus

- Respondent experience according to work sector, role and salary
- Mental health as a defined disability

12,644 respondents from **145+ universities** took part, made up of 7% graduates and 92%* current students.

Student respondents were made up of:

- 85% full-time students
- 4% part-time students
- 1% completing a placement year (at the time of the survey)
- 1% completing a year abroad as part of their studies
- 1% completing an apprenticeship

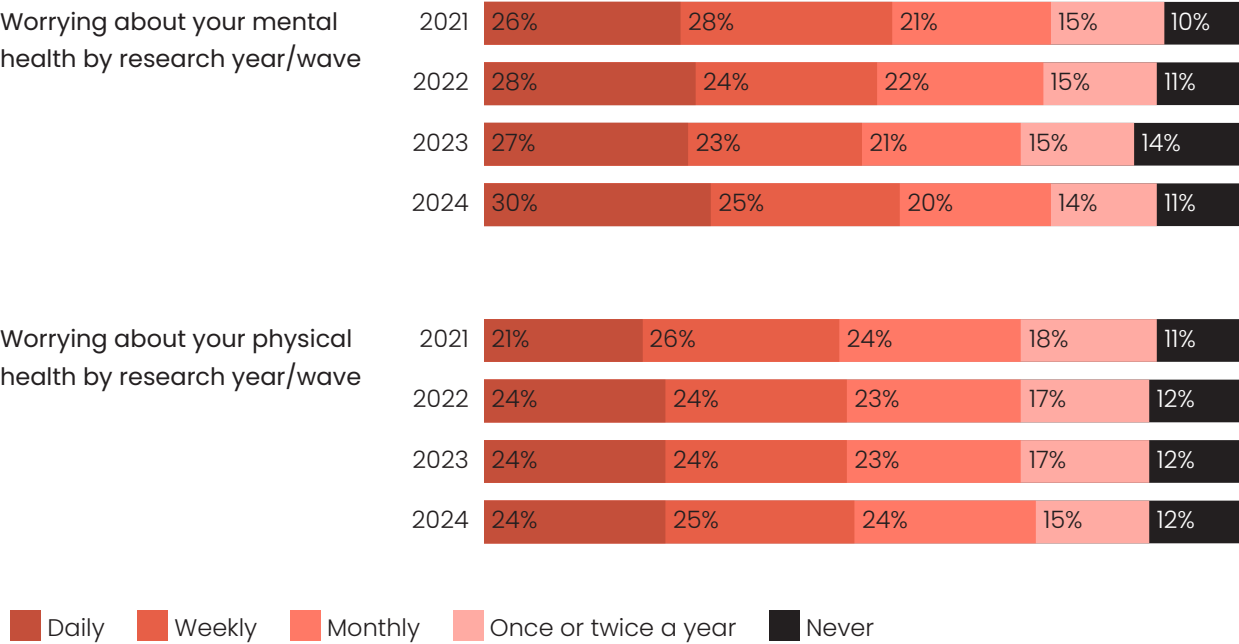
*Percentages are rounded to the nearest percentage point.

Over the last four years the Cibyl Student Mental Health Study has invited students and recent graduates from more than 140 universities to give an up-front appraisal of their own mental health (MH). They have been candid in disclosing how their lives are shaping up.

Key among this year’s revelations are that 3 in 4 (75%) respondents regularly worry about their MH and a similar proportion (73%) worry about their physical health, showing just how much mental load young people carry day to day.

Thinking back over the last 12 months, how often have you experienced the following?

OVERVIEW



The 2024 survey separates responses experienced year by year throughout university and into early careers, so the full data set offers additional valuable insights.

Understanding what is happening in young people’s lives enables universities, supportive student bodies, employers and MH practitioners as they build strategies and programmes to mitigate difficulties and break down the barriers to seeking help.

None of this would be possible without students and recent graduates sharing, albeit anonymously, some of their deepest thoughts and concerns. So we at Cibyl thank them for their time and reiterate our mission to keep opening up conversations to make students’ and graduates’ lives better.

Student life

Media headlines tend to depict students as brilliant or lazy, partying or protesting, debt-ridden or privileged, yet we know that real life is more nuanced. Regardless of how brightly a student appears to shine outwardly the inner truth can be darker and harder to navigate. Students, their backgrounds and circumstances are not easy to pigeonhole, but we can look at trends and assess possible causes of overwhelm and anxiety. We also look at the factors that might put students and graduates off seeking help and support for declining MH.

Degree and postgraduate courses require investment of time and money. Higher education brings greater expectations from family and friends, and of oneself and future prospects and employers. That’s never been truer in the UK than it is today.

Money worries

Full-time undergraduate higher education students starting in academic year 2023/24 are predicted to borrow on average £42,800 to fund their learning, according to Office for Statistics Regulation (OSR).

In July 2024 the BBC posted a comprehensive article weighing up the financial benefits and costs of going to university and quoting The Student Loans Company’s estimated average at £44,940.



Student funding is devolved across the UK so Scottish, Welsh and Northern Irish students receive different levels of funding, dependent on where they were born and where they choose to study. Overseas students’ fees are higher.

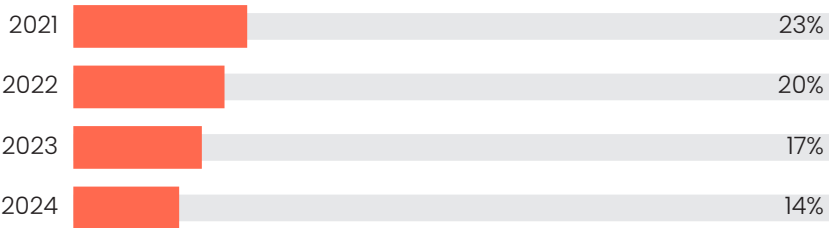
- [UCAS Student Finance in England](#)
- [Student Awards Agency Scotland](#)
- [Student Finance Wales](#)
- [Student Finance NI](#)

The UK economy and universities’ own financial challenges have had an impact on many young people from a variety of backgrounds. [Universities](#) typically offer bursaries and scholarship grants to high achieving A level pupils, including those who are ‘first in family’ to go on to higher education.

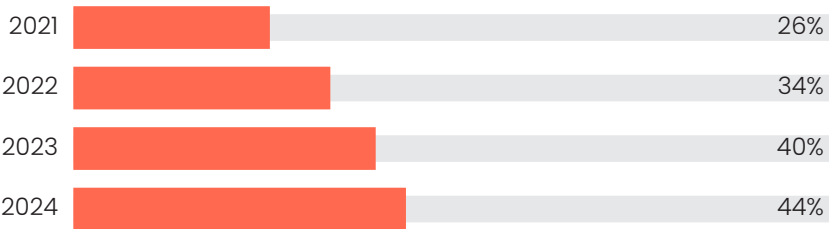
But despite such support, the number of respondents experiencing frequent money worries in the last 12 months has risen to 2 in 3 (67%) with only a cushioned 1 in 7 (14%) saying they had never experienced money worries, or only had money worries once or twice a year. Year on year the percentage of this cushioned few has dropped from nearly 1 in 4 (23%) in 2021, while those experiencing money worries daily has risen markedly from 1 in 4 in 2021 to more than 2 in 5 in 2024.

Experiencing money worries never/once or twice a year

MONEY WORRIES



Experiencing money worries daily



To put those answers in context 8% of all 2024 responses were from low socio-economic (SE) groups based on meeting four metrics. The report examines socio-economic methodology and indices of deprivation such as POLAR4 in greater depth on pages 152-153.

Mental load

Managing adult life independently as a student – juggling part-time paid work, household tasks, course assignments and extra-curricular activities – adds to the mental load young people say they carry daily or weekly.

That mental load may not decline, even if a graduate is starting a career with prospects of higher earnings, as stresses such as relocation, employer expectations and work deadlines are combined with professional studies and other factors. We look at these in greater depth in our transitions to workplace pages 112-127.

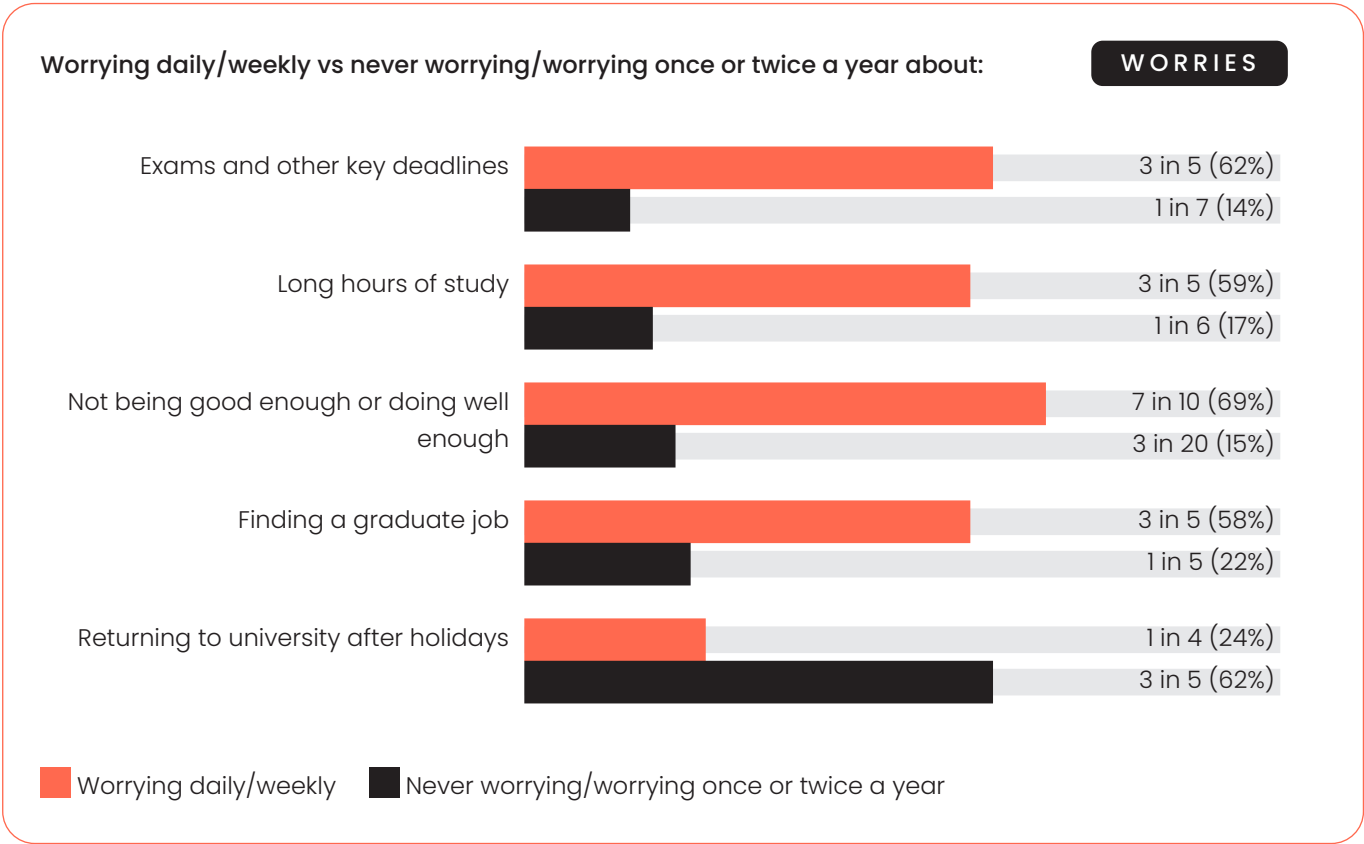
Across the years the Cibyl Mental Health survey has tracked students’ level of life satisfaction out of 10.

In 2024 the mean average was 5.6 out of 10 across all year groups, the same as in 2022, down on last year’s rating of 5.9, but higher than 2021’s respondents whose life satisfaction rate was 5.4.



What students worry about

We investigated what students are most worried about and how frequently they experienced those worries and compared results against students who worry far less.



Respondents in work revealed:

- 1 in 4 (25%) fear losing their job daily or weekly
- Nearly 1 in 4 (36%) never think about losing their job
- More than 1 in 4 (27%) worry daily or weekly about returning to work after time off for a holiday or after the weekend
- 1 in 4 (28%) never have such worries.

Around 2 in 3 respondents – students, postgraduates and recent graduates feel anxiety about finding a place to live, while nearly 1 in 3 (31%) never think about it.

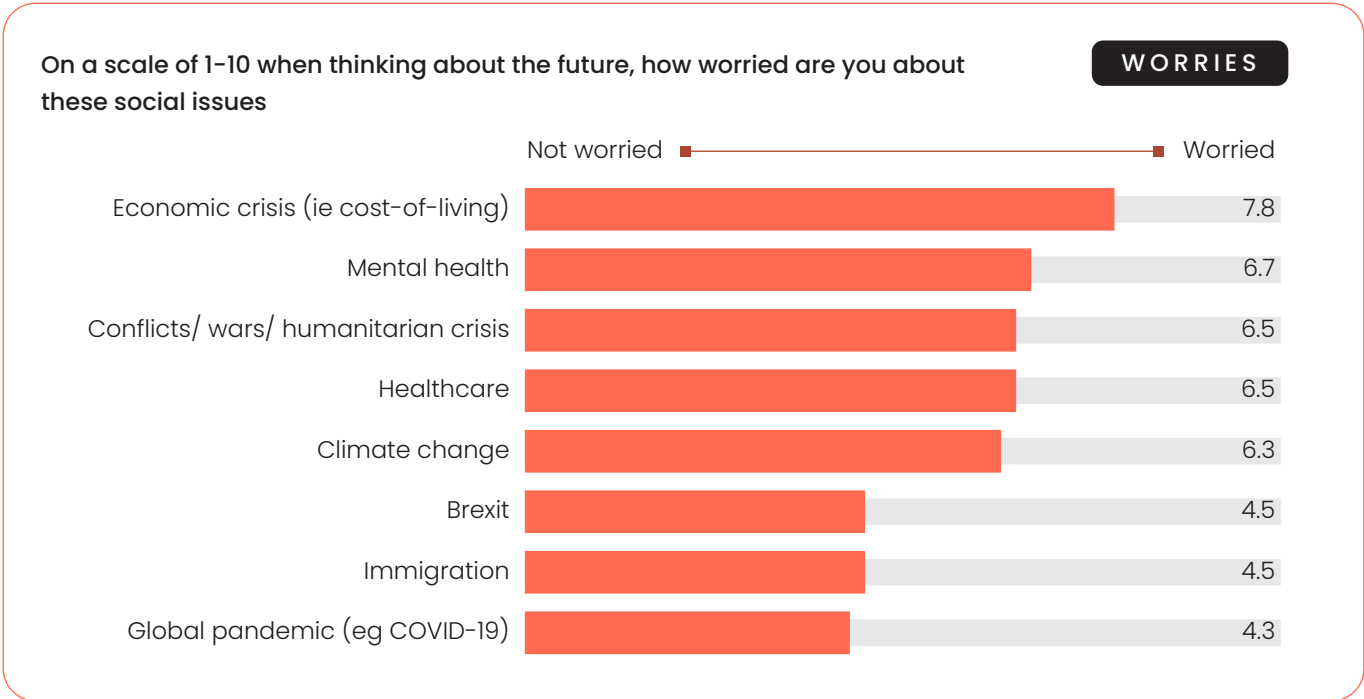
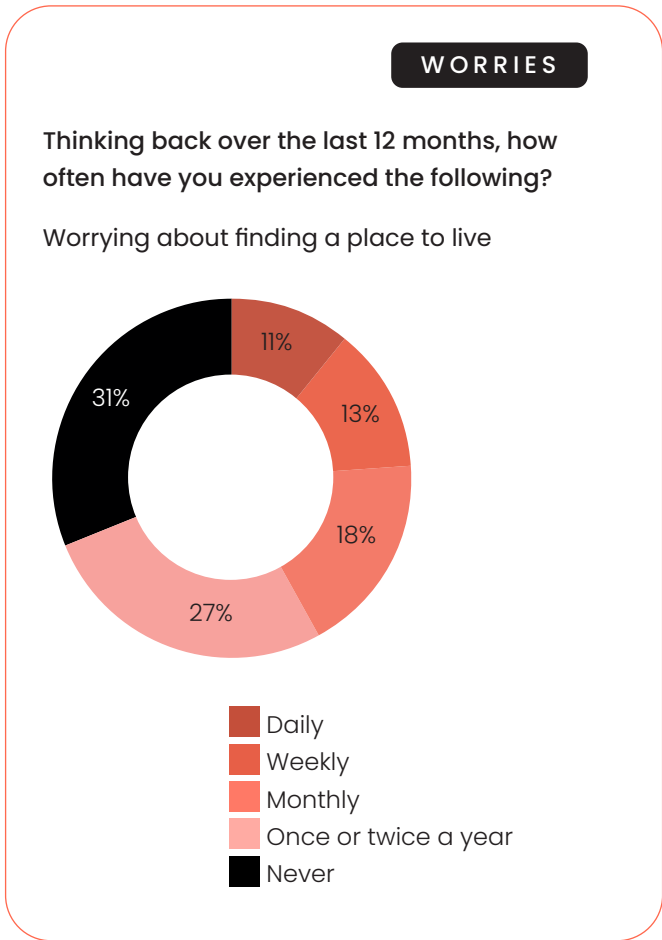
- 1 in 4 (27%) worry once or twice a year
- 1 in 4 (24%) worry every day.

We asked students to rate their levels of anxiety about a range of social issues on a sliding scale of 1 to 10 and top of the list (mean average) at 7.8 was cost of living/economic factors with mental health second at 6.7 out of 10.

Some issues have receded – such as the stresses of COVID-19, some are ongoing, such as climate change anxieties, the geopolitical turmoil in Ukraine and the cost of living crisis. Other factors, such as the Hamas-Israel conflict, have added headlines to news feeds and caused on-campus demonstrations and protests.

A standard list of factors signalling MH concerns allows us to assess how significantly respondents have been affected over the last 12 months, and how frequently those worries surfaced.

Across all 2024’s respondents, more than 1 in 20 (6%) said they had experienced none of the signs we suggested, and 1 in 100 (1%) preferred not to say which affected them. These figures are similar across every Cibyl MH report (2021–2024).

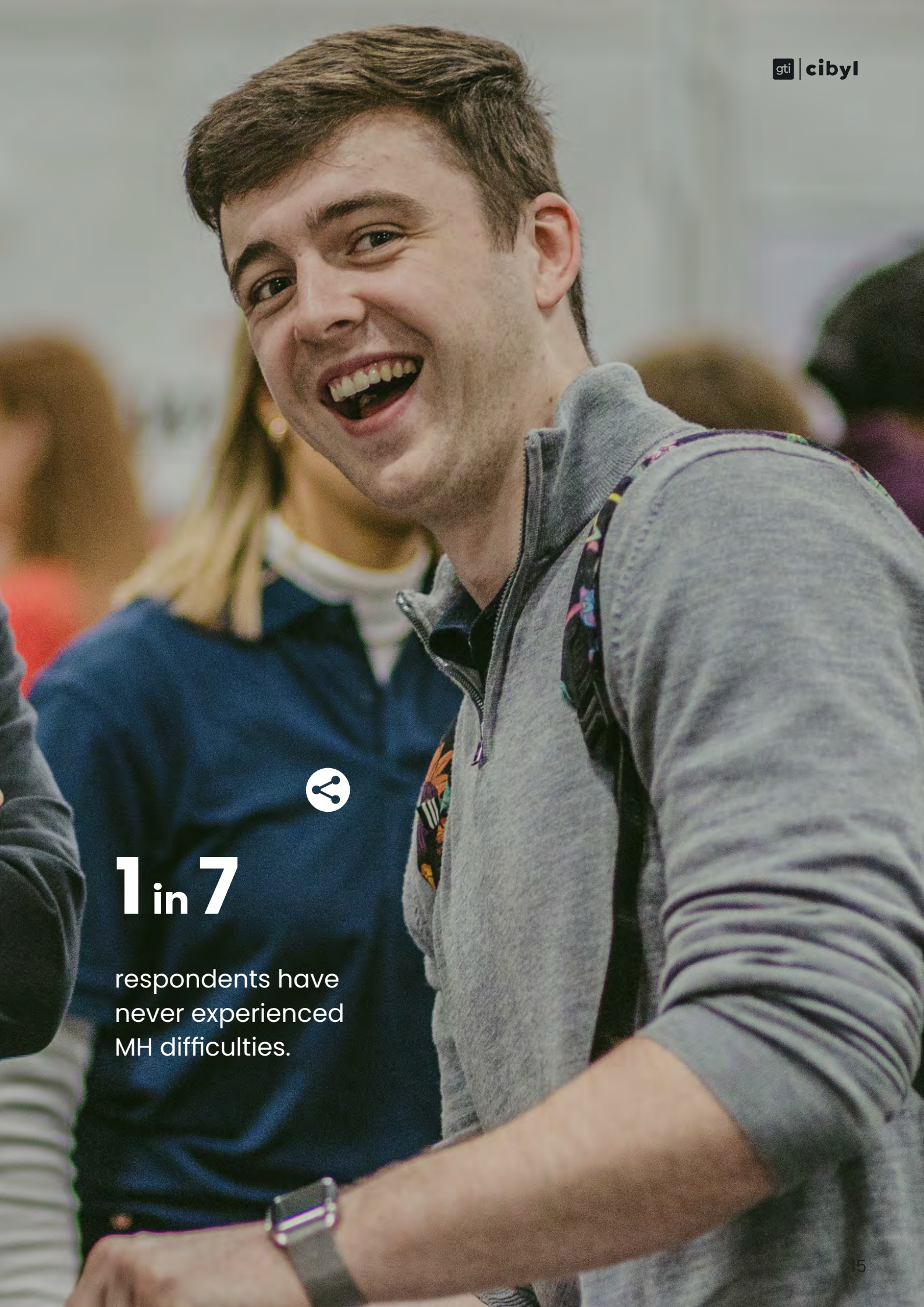
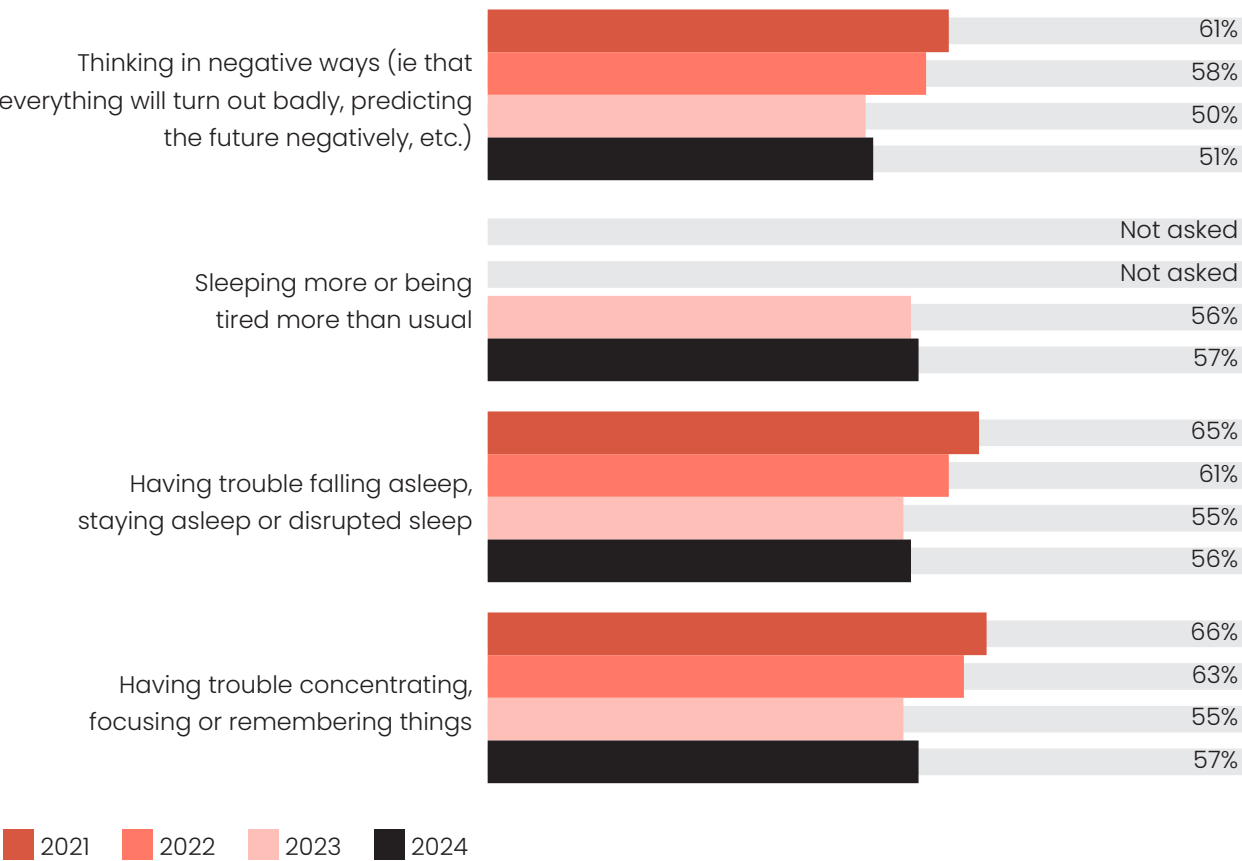


Half or more respondents admitted that in the last 12 months they had experienced:

- thinking negatively about the future (51%)
- being tired (57%)
- being unable to sleep (56%)
- having difficulty concentrating, focussing or remembering things (57%).

Which, if any, of the following have you experienced over the last 12 months?

WORRIES




1 in 7
respondents have never experienced MH difficulties.

Why the highs and lows?

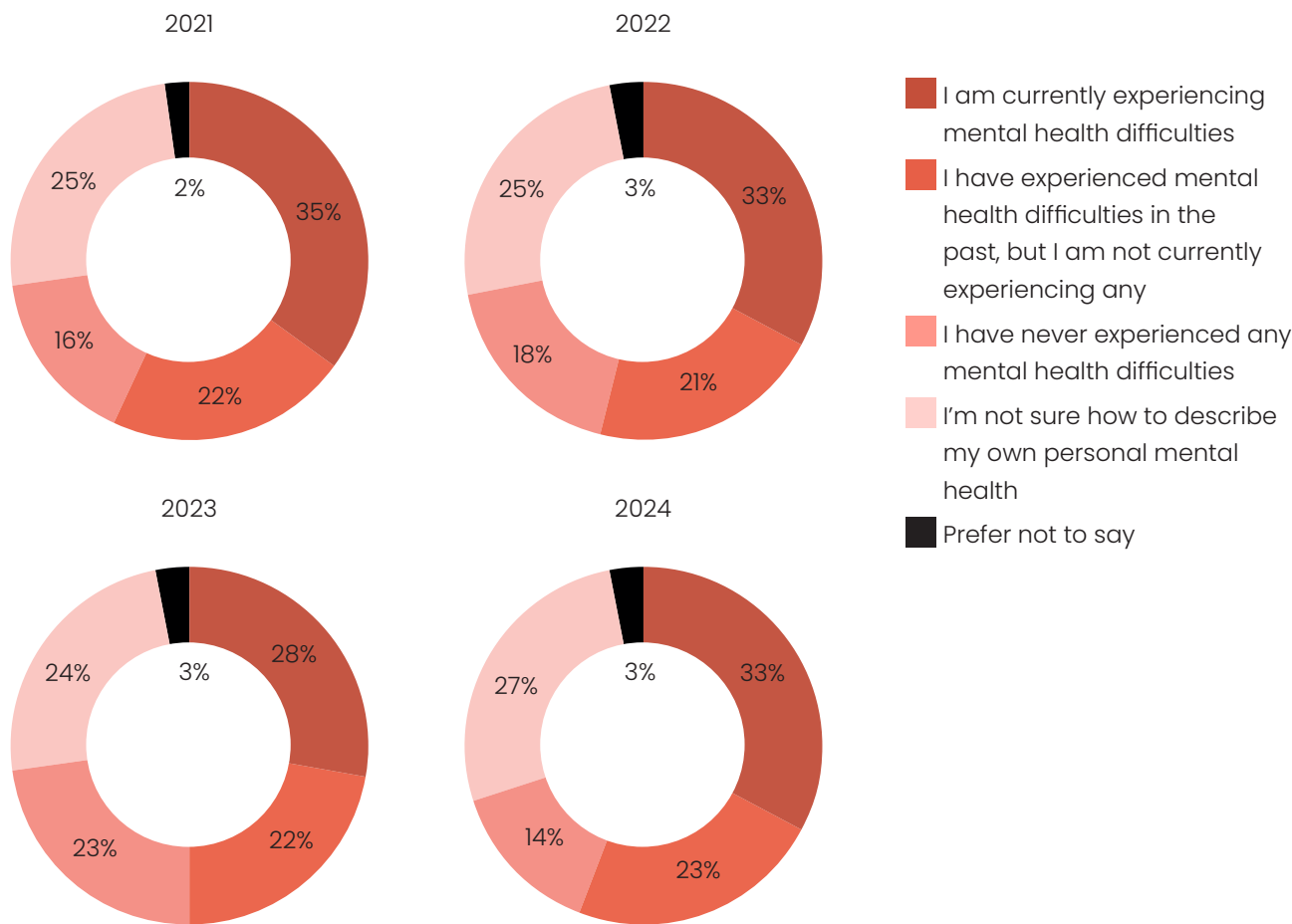
This report goes on to examine the highs and the lows of the Cibyl Mental Health Survey 2024, and analyse the factors that might lead to so many young people reporting MH difficulties – in private if not to family, friends and support services.

A key and notable finding in 2024 is the year on year change to the number of respondents saying they have never experienced MH difficulties, down from 23% (1 in 4) in 2023 to 14% (1 in 7) in 2024.

This finding implies that student and graduate MH is worse than reported in the immediate pandemic and post-pandemic years of 2021 and 2022, 16% (1 in 6) and 18% (around 1 in 5) respectively. Plus 1 in 3 (33%) of our 2024 survey respondents reveal they were experiencing MH difficulties at the time they were answering our questions and more than 1 in 4 (27%) said they were not sure how to describe their own MH – that’s the highest number ever across all years of the survey.

Which ONE, if any, of the following BEST describes your own mental health?

WORRIES

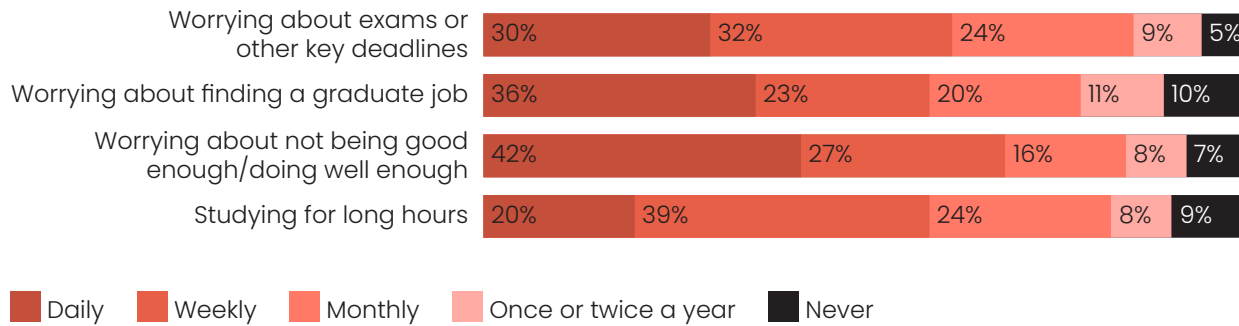


Remaining largely unchanged across the years, however, are the numbers of respondents who say they have experienced MH difficulties in the past, but not currently (23%), and those who preferred not to reveal their MH status (3%).

All these results are examined in more detail across the report. By collecting such data, Cibyl enables universities, employers, parents, tutors and students themselves to establish pathways to managing MH pressures effectively and promote a happier, mentally healthier future for all.

Thinking back over the last 12 months, how often have you experienced the following?

WORRIES



1 in 3

respondents were experiencing MH difficulties at the time of the survey.

STUDENT MENTAL HEALTH

The inside story

Everyone offering support and help to the many students and graduates who face mental health (MH) challenges each year wants the best outcomes for them. Just 1 in 7 (14%) respondents say they have never experienced MH difficulties and 1 in 8 (12%) respondents have not worried about their MH at all in the last year. No-one is immune from everyday stresses and worries, but some people's MH challenges turn into serious difficulties and worse, while others can be overcome by strong supportive networks.

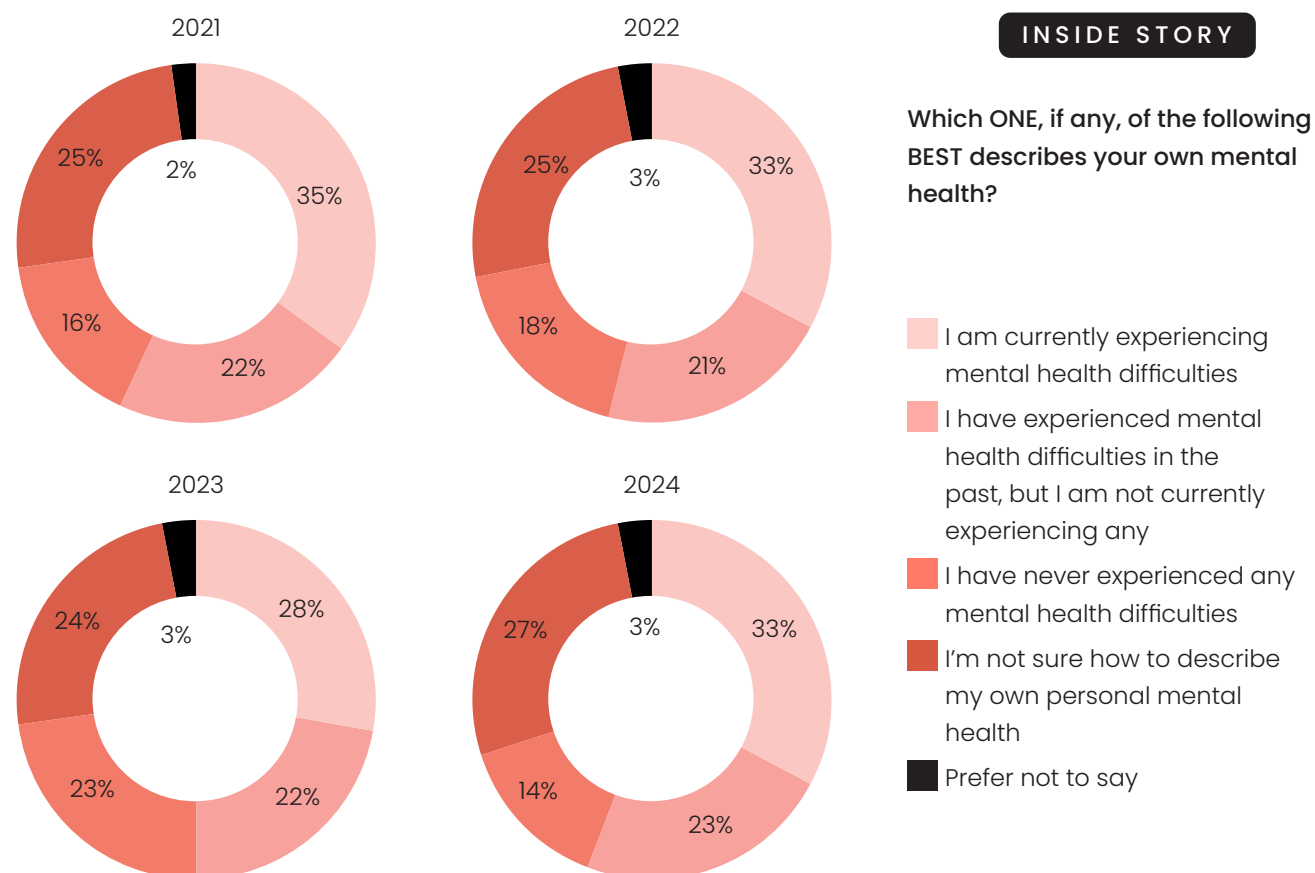


The Cibyl UK Mental Health Survey 2024 reveals the inside story:

- 1 in 3 (33%) respondents were experiencing MH difficulties at the time of the survey
- 1 in 4 (23%) have experienced MH difficulties in the past but not currently
- 1 in 2 (49%) worried about their MH either daily or weekly in the last 12 months
- 1 in 4 (24%) worried monthly
- 3 in 20 (15%) worried once or twice a year.

There's strong evidence to show that students and graduates facing MH difficulties are helped by good services and those that feel supported by friends, family, their university or their employer report better outcomes than those without support.

Terminology used in this report and others differ, so it is important to understand the difference between experiencing MH difficulties or challenges, a low MH score and being diagnosed with a MH condition.



Cibyl makes a distinction between:

- mental health (MH) difficulties, such as three or more negative feelings or behaviours
- MH disability, such as schizophrenia, depression or anxiety disorder
- low MH score – which is explained on page 152 of this report.

Across its surveys with young people, Cibyl's research shows that:

- nearly half (46%) of first year undergraduates were diagnosed with a MH condition prior to university
- 11% of first years were diagnosed at university.

Pre-university diagnoses have risen from 42% last year. Meanwhile ADHD diagnoses increased by a third from nearly 1 in 10 (9%) in 2023 to nearly 1 in 8 (11%) in 2024. This could be because more people are asking for help and diagnosis, or employers, university staff and MH professionals are recommending that a diagnosis is sought.

Looking across all respondents who sought help for, or were diagnosed with, a MH condition:

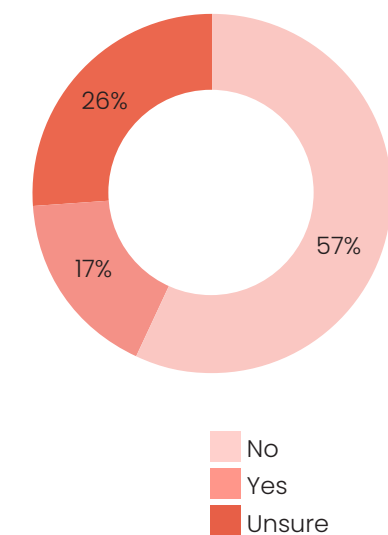
- nearly 2 in 5 (36%) said this had happened prior to starting university
- nearly 1 in 5 (19%) said at university
- nearly 2 in 5 (39%) preferred not to say.

Among first year undergraduates, 3 in 20 (15%) have a MH disability and across all respondents 21% have a MH disability.

Between 2023 and 2024 there was a slight rise in the percentage of people with a MH condition who had received or applied for Disabled Students' Allowance (DSA) or the equivalent, (10% vs 11%).

INSIDE STORY

Do you consider your mental health condition to be a disability?



Respondent numbers who said:

- they knew of funding and knew they were not eligible remained unchanged this year at 3 in 10 (29%)
- they knew of funding but did not know if they were eligible rose slightly on last year (20% vs 22%)
- they did not know of available funding fell slightly (31% vs 27%).

The remaining 1 in 8 (12%) either did not know if they had received DSA or preferred not to say.

MH challenges can lead to studies being interrupted and work days lost.

While nearly half (48%) of all respondents said they had never taken time out for MH at uni, only 1 in 5 (18%) with a MH condition could say the same, rising to 1 in 3 (33%) for respondents with a low MH score. Year on year the overall figures have remained similar, though there is a slight dip in the number of respondents saying they have never taken time off work because of MH challenges, from 61% in 2023 to 57% in 2024.

Mental and physical disabilities are examined in more detail on pages 32–33 and 51–56.



Loneliness, support and new environments

The University Mental Health Charter Framework (see page 151) was published by Student Minds in autumn 2019 and this report's partner UUK's suicide-safer universities report published in association with [Stepchange: mentally healthy universities](#) in 2018.

Transitions are critical in people's lives, and these are covered on pages 68–83 and pages 112–127. The stress of making a transition out of one familiar environment and into one less familiar, whether that's housing, friendships, or settling in to a new way of studying or working, can leave people feeling adrift from past support networks whatever age or stage of life they are at. First year students may be experiencing these challenges for the first time and for graduates the stress is added to by the start of a career. That is also true for job-seeking graduates whose university life has ended but whose working life has not begun.

This year's findings show that nearly 2 in 5 (37%) graduates seeking work have low mental health, more than any other group by year. Almost 7 in 10 (68%) said their MH declined while looking for jobs. Graduate job seekers worry about not being good enough, finances, and their MH daily or weekly and 1 in 2 (49%) feel isolated or lonely.

Feeling lonely can indicate MH difficulties, but the loneliness charity [Marmalade Trust](#) points out that loneliness in itself is not a MH condition, though it can lead on to mental and physical health conditions if left unresolved. The trust states that people aged between 16 and 29 are twice as likely as over 70s to experience loneliness, though overall, nearly half (45%) of adults in England say they feel occasionally, sometimes or often lonely.

Cibyl UK Mental Health Survey 2024 undergraduates said help to make friends would be more beneficial than the wellbeing activities put on by their university. There are a lot of special interest and sports societies, groups and activities available at university – more than in workplaces.

Many universities do post articles, blogs and [vlogs](#) online suggesting how and where to meet new people and make new friends. And there are plenty of independent posts on TikTok and YouTube – so perhaps the problem is less about the amount of help universities are putting out there and more about students finding it. Even the [Universities and Colleges Admissions Service \(UCAS\)](#) – which students use to make their application to university – has helpful tips on how to meet people and make new friends.



Official statistics

Recent available statistics from the [Office for National Statistics \(ONS\)](#) show that among higher education students in the academic year ending in 2020, the suicide rate for England and Wales was 64 deaths, or 3 per 100,000 students. Across all age groups, 5,642 suicides were registered in England and Wales, 10.7 deaths per 100,000 people, in 2022 (calendar year). Males were more likely than females to take their own lives – 3 in 4 vs 1 in 4.

[Scotland](#) counts deaths by intentional self-harm and undetermined intent as ‘probable’ suicides. Across all age groups 753 probable suicides were registered in 2021, 13.8 deaths per 100,000.

Scotland, and England and Wales are no longer updating data in the same way, so 2021 and 2022 (respectively) figures were the last sets to be published.

Suicide and self-harm

The anonymity afforded by Cibyl’s surveys allows for openness without fear of judgement or identification – given a chance to opt out, 9 out of 10 respondents chose to continue the survey to answer questions about suicide and self-harm.

Suicide is the biggest killer of people aged 35 and under in the UK, according to [PAPYRUS](#), the national charity dedicated to the prevention of young suicide. More than 2 in 5 (42%) respondents to the Cibyl UK Mental Health Survey 2024 said they had experienced suicidal thoughts and feelings, though 1 in 2 (51%) had not and 1 in 14 (7%) preferred not to answer.

Of respondents who experienced suicidal thoughts and feelings:

- 2 in 3 (67%) had not acted on those thoughts
- 1 in 7 (14%) had made a plan to take their own life
- 3 in 20 (15%) had attempted to take their own life
- 1 in 25 (4%) preferred not to say
- 1 in 7 (14%) experienced suicidal thoughts and feelings for the first time at university
- 17 out of 20 (85%) first experienced suicidal thoughts or feelings pre-university
- 1 in 50 (2%) preferred not to say.

This year, for the first time, Cibyl asked whether respondents had ever thought of harming themselves:

- 1 in 3 (32%) answered yes
- 3 in 5 (62%) said no.

Of those thinking of self-harm nearly half (48%) had gone on to self-harm. Among respondents who had self-harmed:

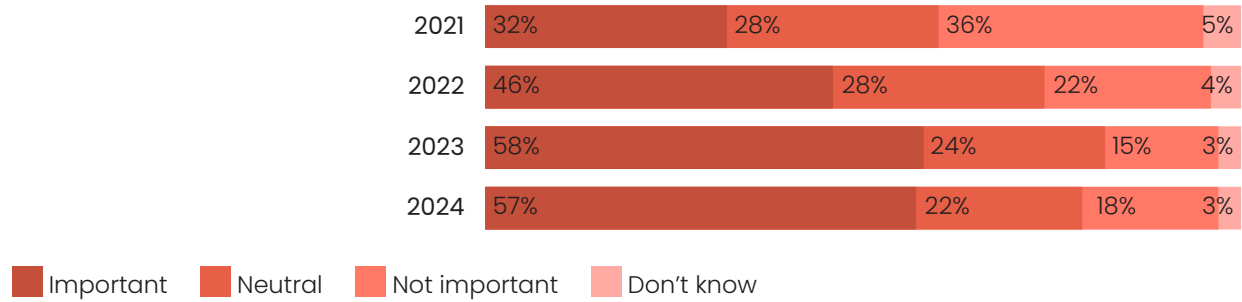
- nearly 17 in 20 (83%) had started self-harming before university
- 3 in 20 (15%) started at university
- 1 in 100 (1%) had started self-harming since leaving university
- 1 in 50 (2%) preferred not to say.

What is liked...

In a rising trend, 3 in 5 first year undergraduates now consider the importance of MH provision when choosing their university and this is also true of graduates assessing the kind of employers they want to work for, something covered on pages 75 and 119 of this report. Regardless of whether they have had MH issues themselves, 3 in 5 (57%) undergraduates said they thought MH provision was important when choosing their university.

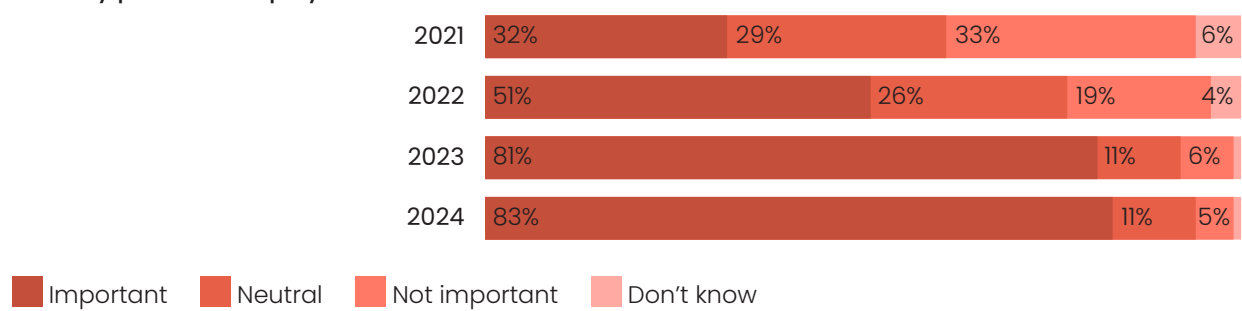
When you chose your current/ last university, how important was it to know that they prioritise students’ mental health?

INSIDE STORY

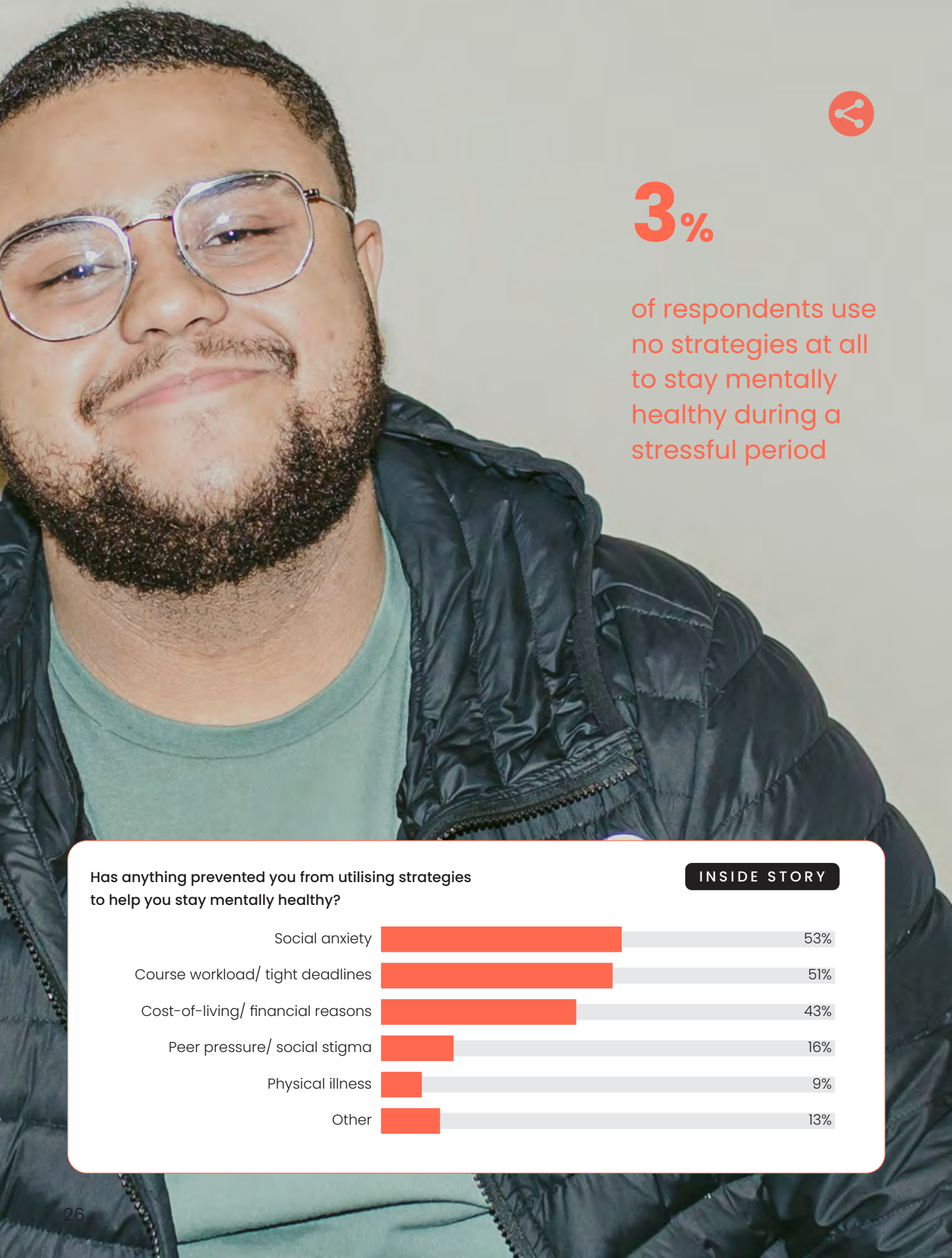


When choosing an employer, how important is it to know that they prioritise employees’ mental health?

INSIDE STORY



Ongoing support is available for undergraduates not just for the first few weeks, but throughout university and many employers recognise the need for support services. The likelihood of a respondent saying they have had MH difficulties and low MH increases as they go through university, dropping significantly among postgraduates. This year’s survey shows that employed graduates are more likely to say their MH has improved since starting work than last year’s respondents, and more likely to say it has declined. After all the stress of final year graduation and job hunting, it could be that MH challenges at work lie ahead.

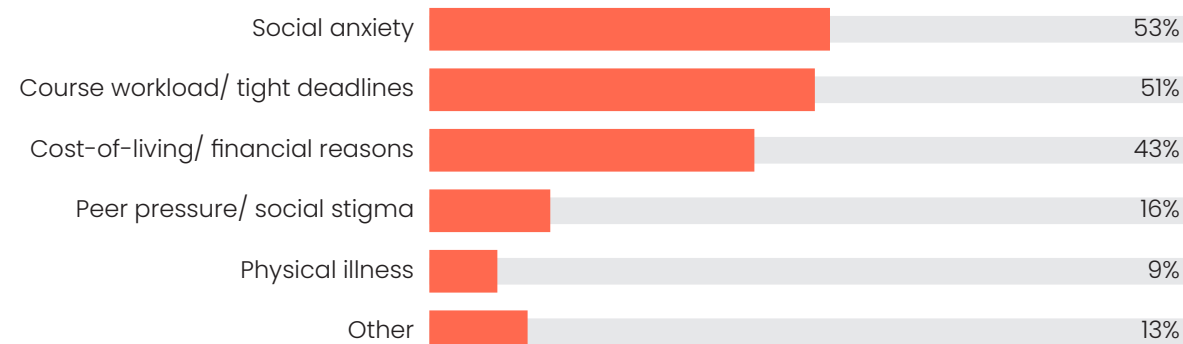


3%

of respondents use no strategies at all to stay mentally healthy during a stressful period

Has anything prevented you from utilising strategies to help you stay mentally healthy?

INSIDE STORY



...and what is used

If they are resilient, students and graduates may be able to maintain their own MH during stressful periods through strategies such as listening to music, prioritising sleep, practising self-care, exercise, mindfulness and a range of other pursuits. In fact, only 3% of respondents use no strategy at all to stay mentally healthy. The reasons for not using self-help strategies range from social anxiety and workload to physical illness and social stigma, and for more than 2 in 5 (43%) respondents, finances.

A person's search for more formal support networks is likely to be the first time they need to use them, but ideally, knowledge of their existence would be ahead of the curve.

There is a rising trend in the number of respondents knowing none of a list of specific MH support services typically offered by universities or Student Union (SU), from 1 in 14 (7%) in 2021 to 1 in 4 (25%) in 2024, implying that the message is being lost somewhere.

Though fewer respondents this year than last (44% vs 47%) said they did not know of preventative and recreational therapies offered by their university, such as yoga, mindfulness and nature walking groups, more students said they were aware and had no intention of using them (27% vs 21%).

On pages 119-120, the transition from university to workplace, there is more information about what kind of MH support graduates like from current or future employers – topping the list were:

- wellbeing benefits, such as gym membership and private health insurance
- healthy working practices, such as no emails at the weekend
- onsite/in person counselling services.

Employees sharing personal MH stories was the least popular suggestion, though 1 in 14 (7%) said they would appreciate this kind of support.

Despite, as set out in the opening of this section, only 1 in 7 (14%) of all respondents saying they have never experienced MH difficulties, 2 out of 3 (66%) respondents have never used a university or SU MH service. All respondents would have been students at some point recently.

Once a single service has been engaged with others may also be used. The most used of all was university/SU counselling (26%), followed by the university/SU MH advisers (21%).

University wellbeing and support services are currently maintained, despite budget shortfalls in higher education institutions' (HEIs) finances. They might be a first port of call if a student is struggling with finances, friendships, their course or settling into accommodation. But despite the range of services on offer, more than half (55%) of respondents said when it came to seeking advice about their MH, they had used none of a list of general university student support services. In 2023, fewer than half (45%) said they had used none.

Across the years a steady 1 in 50 (2%) respondents said they seek general MH support elsewhere, and the number of respondents saying they have used specific MH support services from that list has fallen from 3 in 10 (30%) in 2023 to 1 in 4 (25%) in 2024.

Year on year, there has been an increase in the number of respondents, students and graduates, accessing other types of support when difficulties arise and using their own strategies to maintain MH through challenging times. People can register for NHS services wherever they live, or if they prefer, some universities and workplaces have in-situ services.

General practitioners (GPs) are frequently a first line of support when it comes to consulting NHS services and they refer patients to other MH services, so it is no big revelation that:

- more than 2 in 5 (43%) respondents have used their GP services
- 3 in 10 (29%) of all respondents have used NHS/HSE or private healthcare counselling
- nearly 2 in 5 (38%) have used IAPT (talking therapies).

Help and support needs are often bridged by charity helplines and online advice services, such as [Samaritans](#), [Student Minds](#), and PAPYRUS. Nearly 2 in 5 respondents are aware of these and 1 in 7 (14%) have used them.

What is concerning is that nearly 1 in 5 (18%) respondents have used hospital accident and emergency (A&E), which implies a lack of access to a GP, or a crisis so severe no other service can help.

Respondents say that they have not used university services in the past because they have felt embarrassed or ashamed, that they have felt no-one could help, or they have not known how to express what is happening. More than 1 in 10 (11%) said difficulty securing an appointment had prevented them using a service.



[The King's Fund](#) analysis of NHS mental health services highlights growing demand from patients combined with MH staff recruitment and retention challenges, which has the [highest vacancy rate](#) across the NHS at 11.7%.

2 in 5

respondents say finances prevent them using strategies to stay mentally healthy



Money worries

What is meant by cost-of-living crisis and how do money worries affect mental health?

More than 7 in 10 (71%) Cibyl UK Mental Health Survey 2024 respondents attributed their MH difficulties either partially or fully to cost-of-living pressures and more than 2 in 5 (43%) said finances were the reason they do not use strategies to stay mentally healthy. The report covers more on the issue of money worries on pages 60-66 and 126-127.

The independent think tank the [Institute for Government](#) explains the cost-of-living crisis as the fall in 'real' disposable incomes, ie that household incomes are not keeping up with living costs.

In its [June 2024 report](#) on the cost of living, the Joseph Rowntree Foundation (JRF) stated that food was the most forgone item, and that 5.1 million low income households (44%) cut down on the size of meals or skipped them, and 4 million households (34%) went hungry.

In September 2023, reported by the [Daily Express](#) the Open Data Institute (ODI) revealed that 3 in 4 (76%) of all (ie not just students) low-income 18- to 24-year-olds in the UK were going without essentials, and nearly half (46%) were in arrears with their energy or utility bills.

Another [JRF report](#) published in June 2024 points to hardship impacting primary and community healthcare such as GP services and primary schools where pupils are coming to school hungry – an indicator of family hardship. More than 3 in 4 healthcare staff said they had seen an increase in patients experiencing poor MH because of hardship over the last two years, and more than 6 in 10 had seen an increase in poor physical or dental health.

The report's qualitative research also emphasised concerns about growing levels of mental ill health, exacerbated by patients' financial worries and stresses.

Unhealthy eating and food issues

This year Cibyl asked students whether their eating habits had improved or declined since going to university. Nearly 2 in 5 (39%) said they were eating healthier* foods, but 1 in 4 (26%) said they were eating more healthily. That left nearly 1 in 3 (32%) whose diet remained unchanged, (3% preferred not to say).

More than 2 in 5 (43%) said they ate unhealthy foods a few times a week, and 1 in 4 (23%) said that rose to a few times a month. However, 1 in 6 (16%) ate unhealthily daily, and only 1 in 50 said they never ate unhealthily. Interestingly, no respondent preferred not to say how often they ate unhealthily.

Students with unhealthy eating habits are proportionally more likely to have a low MH score, and social anxiety and not use any MH coping strategies.

*Such as takeaway foods, sugary drinks and ultra-processed meals.

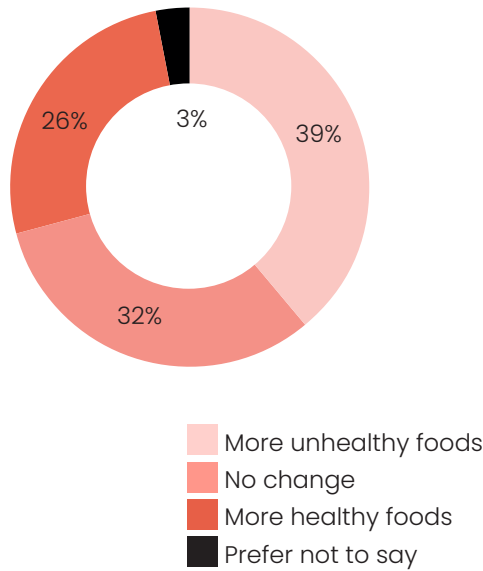
Having a takeaway or ready meal a few times a month is not generally a cause for concern, but food itself can be a source of anxiety, and unhealthy eating may signal something more serious, according to [The Food Foundation](#). Its 2023 report *The Broken Plate* states that the poorest fifth of the population would have to spend half their disposable income on food to meet the cost of the government recommended healthy diet.

After falling in 2023, the percentage of respondents who were eligible for free school meals or means tested bursaries from their higher education provider rose to 3 in 10 (30%).

[Mind](#) offers help and tips for people who are suffering eating problems and eating disorders and the charity distinguishes between the two.

INSIDE STORY

Has your diet changed since starting university?



1 in 10

1 in 10 respondents had sought help for, or been diagnosed with, an eating disorder

These issues are beyond the stereotypical student diet of baked beans on toast, or cold pizza for breakfast. Mind highlights the link between eating problems, depression and anxiety, and other disorders such as obsessive-compulsive disorder (OCD) and self-harm, MH conditions also covered in the Cibyl UK Student MH survey 2024.

Who needs support most?

Students with low MH* worry more than their peers about social issues, especially when it comes to the economy, MH, and healthcare. They also feel less well prepared for university life than their peers. Non-binary respondents show high levels of worry about the future, which could correlate with 1 in 2 non-binary respondents having a low MH score.

It is not surprising that students from low socio-economic (SE) backgrounds are most likely to be affected by financial concerns. The knock-on effects of that include changing career plans, feeling unprepared for independent living and being less likely to be prepared for their course. More than 7 in 10 (71%) respondents said cost of living was a contributing factor to their MH difficulties.

In what could become a downward spiral, a low SE background leads to worry about finances and the cost-of-living leads to low MH score, leading to more worry.

Respondents from low SE backgrounds are more likely than those from high SE backgrounds to have MH difficulties (33% vs 26%) and more likely to have an unseen disability or health condition (13% vs 7%).

1 in 12 (8%) respondents come from low SE backgrounds and 1 in 16 (6%) come from high SE backgrounds (the majority, nearly 9 in 10 (86%), are somewhere in-between).

LGBTQ+ and non-binary respondents are most likely to have MH difficulties (40% and 61%), compared to the mean average of 1 in 5 (21%). Black and Asian respondents underreport disabilities, with 4 in 5 (80%) and 3 in 4 (76%) stating they had no known disability, compared to the mean average of 3 in 5 (62%). Around 1 in 10 (9%) Black and Asian (11%) respondents said they had MH difficulties compared with the mean average of 1 in 5 (21%).

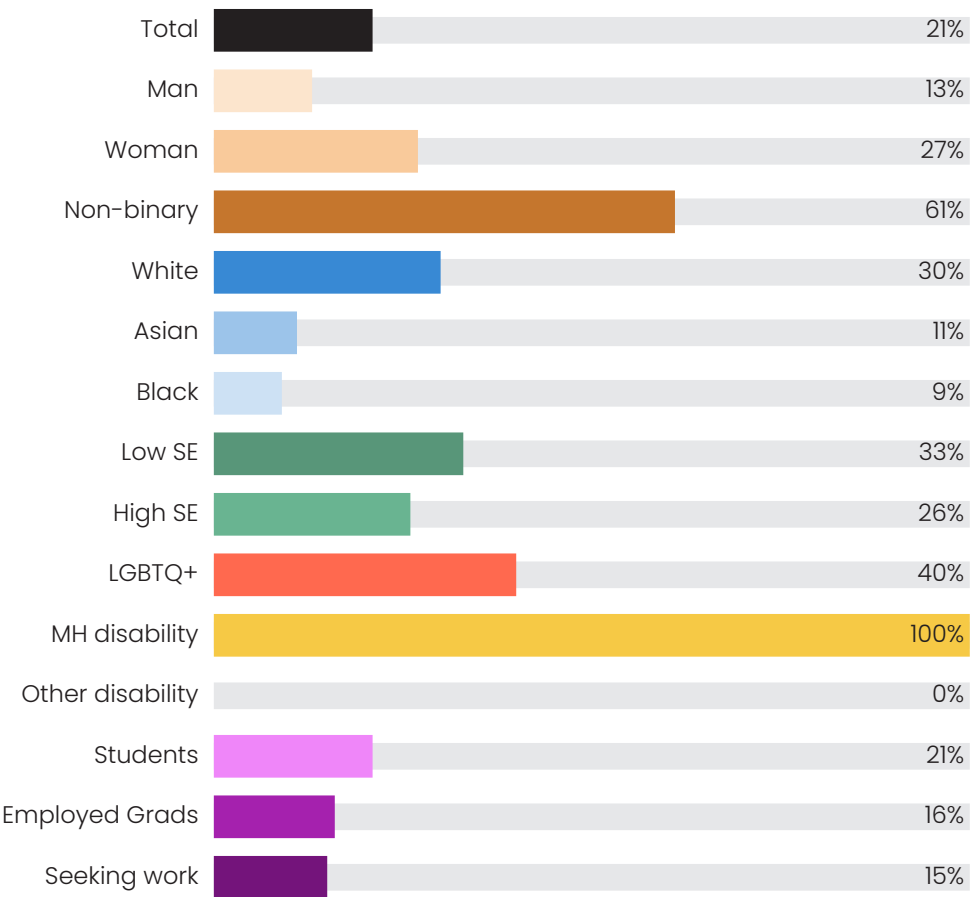
Respondents with a physical impairment – eg wheelchair users – made up 1 in 50 (2%) of all respondents on average. Just 1% of respondents were deaf or hard of hearing, and a further 8% of respondents had an unseen disability or health condition.

Among Black respondents who said they had a disability 1% were blind or had a vision impairment as well as 3% of respondents who had ‘other’ disabilities (some may be the same respondents). Excluding MH conditions 1 in 5 (21%) respondents were disabled.

*For definitions of Low MH, Low SE, High SE and other terms, please go to pages 152-153.

Disability by Demographics: Mental health difficulties

INSIDE STORY



Gender, sexuality and mental health

This year’s respondents

When asked if their gender identity was the same as the one assigned at birth almost all men and women (96% and 99%, respectively) identified as cisgender (ie their gender identity matched their sex assigned at birth). No women (0%) and 1 in 25 (4%) men identified as transgender.

Of those who preferred to use their own term (OT) for their gender:

- 1 in 7 (14%) identified as cisgender
- 3 in 5 (63%) as transgender
- 1 in 4 (23%) chose not to say.

Of those who said they were non-binary:

- 1 in 20 (5%) were cisgender
- 17 in 20 (86%) were transgender
- 1 in 10 (10%) preferred not to say.

Around 1 in 50 (2%) respondents initially preferred not to describe their gender at all, but within that group:

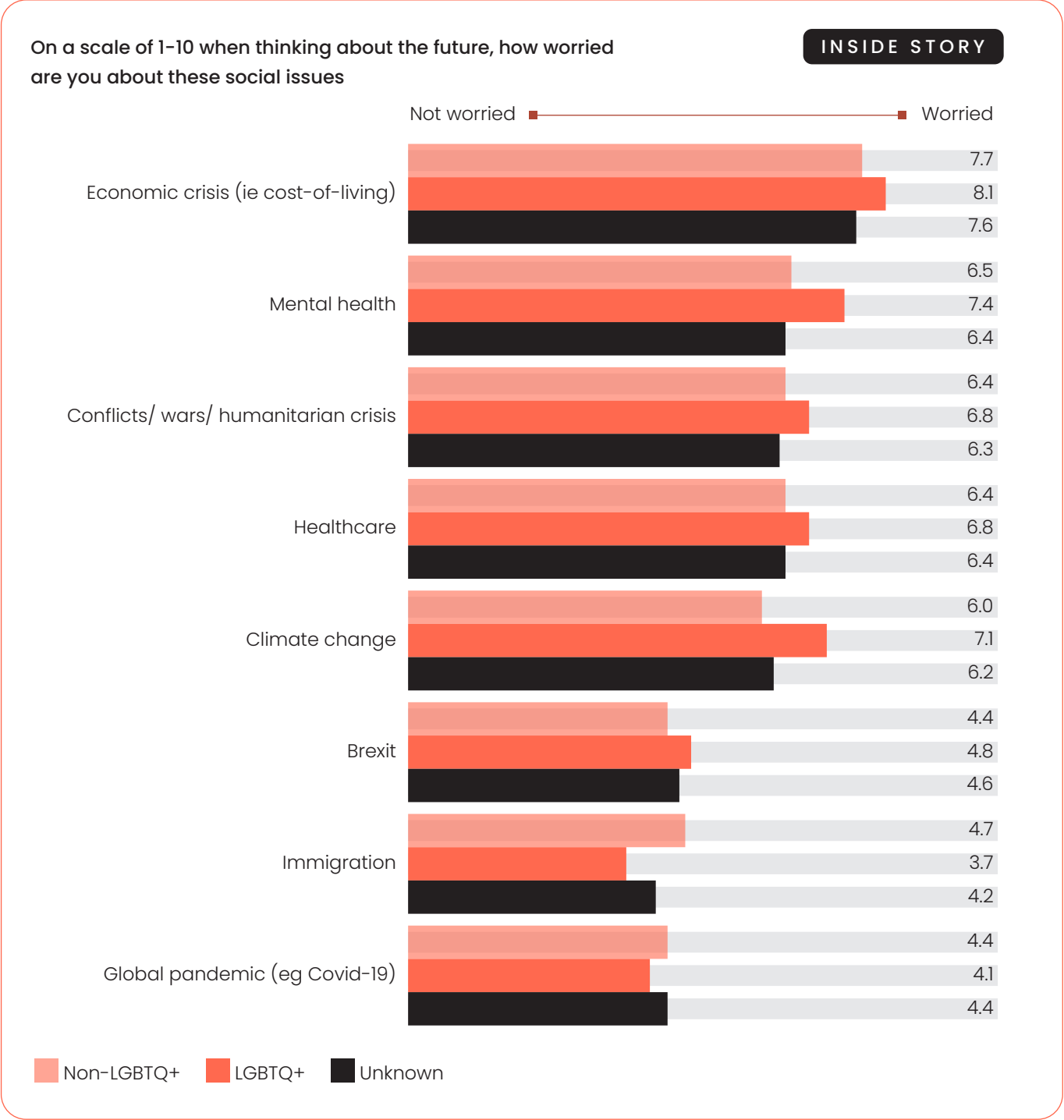
- 1 in 5 (22%) identified as cisgender
- 1 in 17 (6%) identified as transgender
- 7 in 10 (72%) preferred not to say.

Asked to choose from a range of sexual orientation options, including bisexual, lesbian, gay, asexual, queer, questioning or unsure:

- 4 in 5 (81%) men and 7 in 10 (71%) women were straight/ heterosexual
- 1 in 6 (16%) men and 1 in 4 (25%) women were LGBTQ+
- 3% of men and 4% of women preferred not to say
- 1% of OT and non-binary respondents were straight/heterosexual
- 9 in 10 (92%) OT and 19 in 20 (97%) non-binary respondents were LGBTQ+
- 1 in 17 (7%) OT and 1 in 50 (2%) non-binary respondents preferred not to say.

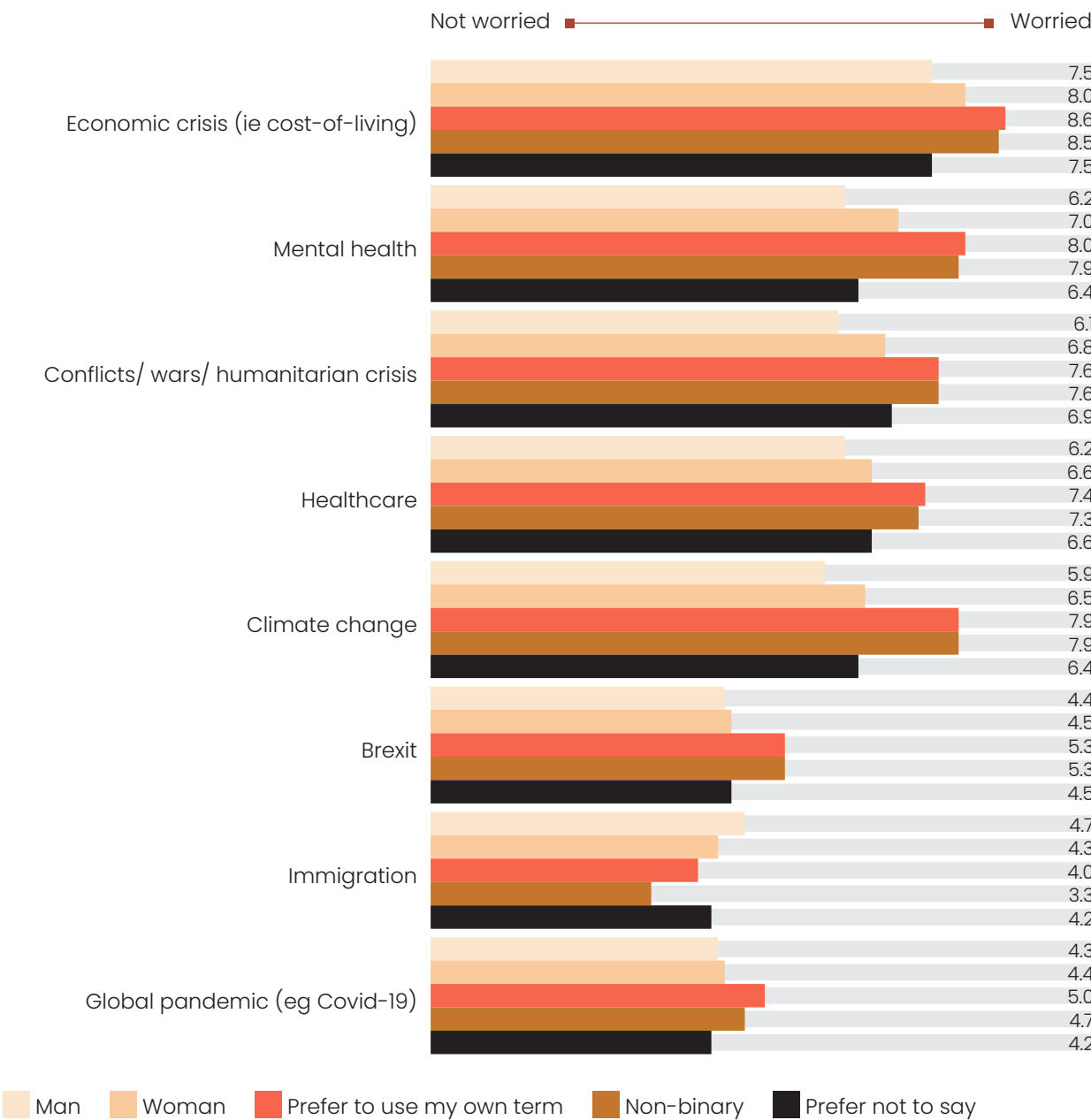
Non-binary respondents and those who prefer to use their own term for their gender (OT), are particularly concerned about their future. They worry more about a range of issues than women, who in turn rate the issues more worrying than men. The only exception was immigration, which men gave a higher rating than women, OT and non-binary respondents.

LGBTQ+ respondents consistently rate their concerns higher than non-LGBTQ+ respondents across a range of issues, excepting immigration and the global pandemic (see graphic).



On a scale of 1-10 when thinking about the future, how worried are you about these social issues

INSIDE STORY



Rates of worry can be linked to higher rates of mental health (MH) difficulties – half of this year’s non-binary respondents have a low MH score (for definitions please turn to pages 152-153).

Gender, sexuality and mental health

Challenges associated with gender difference and LGBTQ may add to young people’s MH difficulties. Non-binary or OT respondents were overwhelmingly more likely to have a MH condition than men or women. They were also more likely to be neurodivergent and to have a physical disability (see graphic).

Looking at these figures by sexuality:

Non-LGBTQ+

- 7 in 10 (70%) had no known disability
- 3 in 20 (15%) had a MH condition
- 1 in 11 (9%) was neurodivergent
- 1 in 50 (2%) had a physical disability
- 1 in 9 (11%) other.

LGBTQ+

- 2 in 5 (38%) had no known disability
- 2 in 5 (40%) had a MH condition
- 3 in 10 (29%) was neurodivergent
- 1 in 20 (5%) had a physical disability
- 1 in 5 (17%) other.

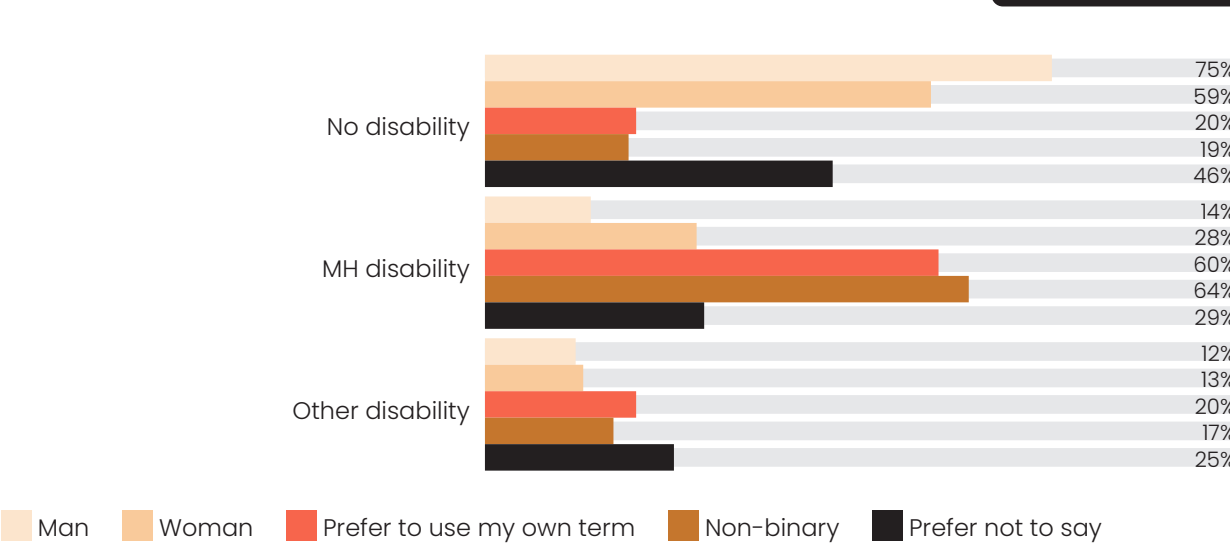
Some respondents preferred not to disclose their sexuality, and these were classified as:

Unknown

- 1 in 2 (53%) had no known disability
- 1 in 4 (23%) had a MH condition
- 1 in 7 (17%) was neurodivergent
- 1 in 25 (4%) had a physical disability
- 1 in 7 (21%) other.

Disability

INSIDE STORY



Socio-economic factors and study

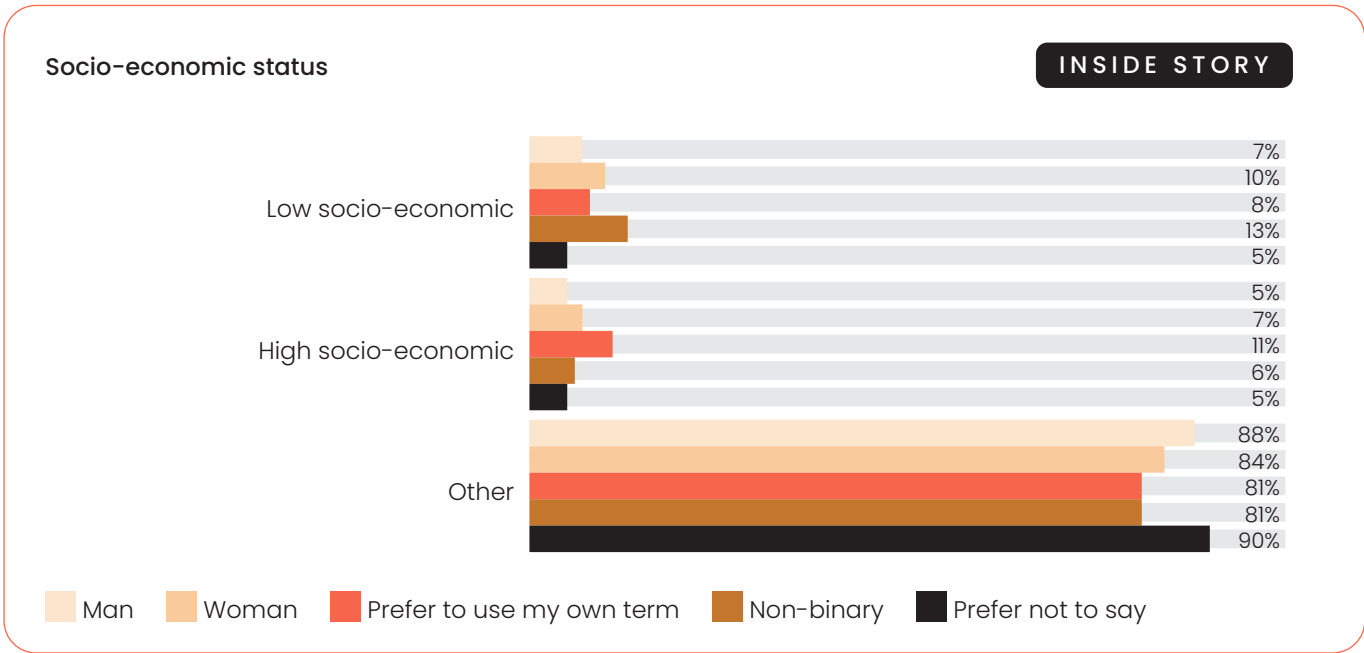
While there was little difference in socio-economic status (SE) by gender, there were:

- half as many low SE Asian respondents than high SE Asian respondents who were LGBTQ+ (11% vs 22%)
- more than three times as many low SE Black respondents than high SE Black respondents who were LGBTQ+ (20% vs 6%)
- a marginally higher percentage of low SE white respondents than high SE white respondents who were LGBTQ+ (39% vs 35%).

Across all groups by ethnicity fewer Black respondents were LGBTQ+ (6%) than Asian (11%), white (33%), mixed ethnicity (28%) or other (16%).

Significantly greater percentages of non-binary and OT respondents were studying design, creative and performing arts subjects than men or women (20% and 25% vs 5% and 8%). This was also true of respondents who were LGBTQ+ compared with those who were non-LGBTQ+ (15% vs 5%).

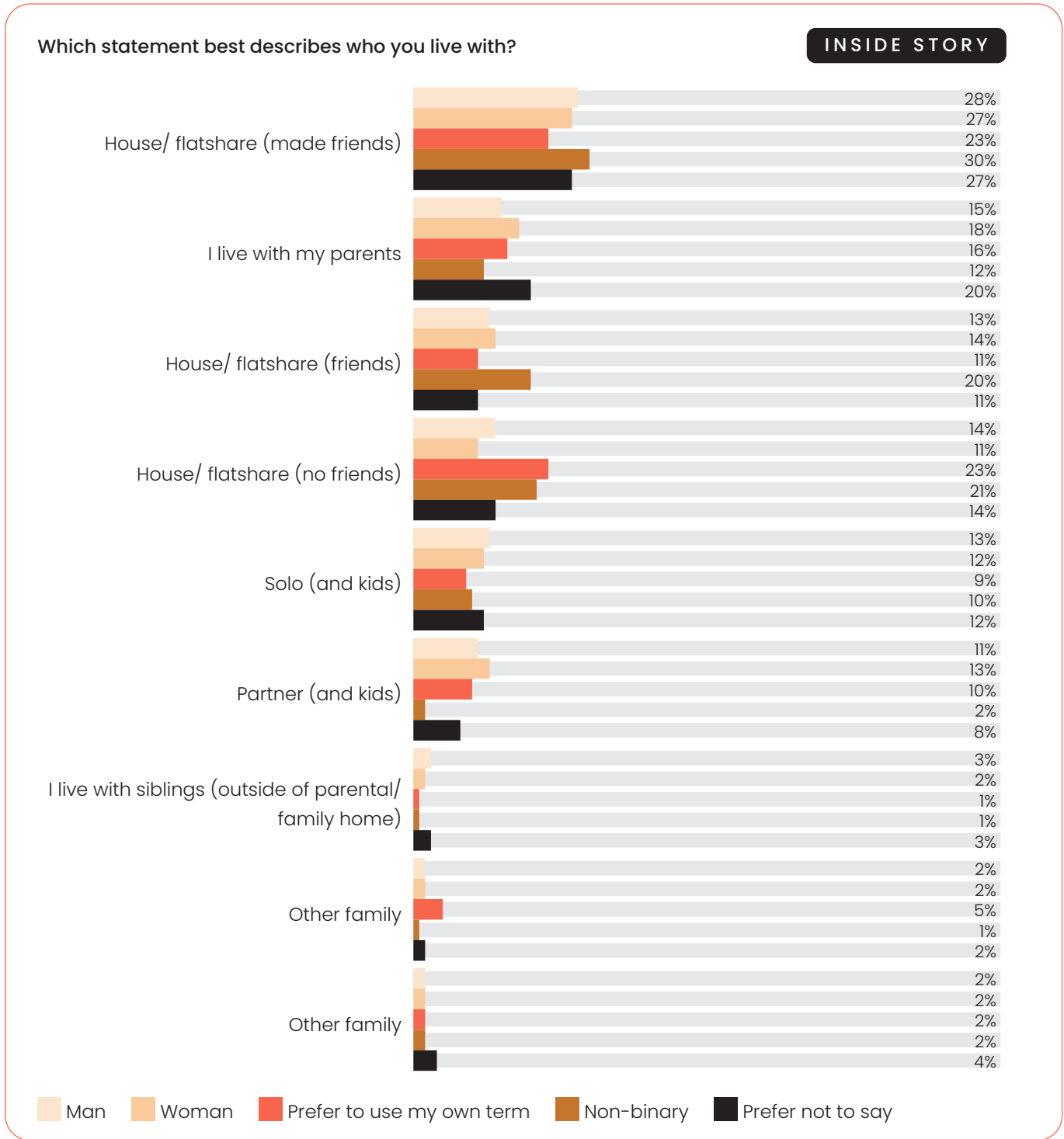
Non-binary and OT respondents were far less likely to study business and management than men or women (2% and 2% vs 21% and 14%) and this was also true of respondents who were LGBTQ+ compared with non-LGBTQ+ (7% vs 20%).



Living arrangements

Non-binary and OT respondents were more likely to live in a house or flat share with no friends than peers who described their gender as men or women (21% and 23% vs 14% and 11%), but higher percentages of non-binary respondents (21%) were sharing a house or flat with friends than other groups (see graphic).

LGBTQ+ respondents were more likely to live with friends than non-LGBTQ+ respondents (48% vs 39%) and more likely not to live with friends or family than non-LGBTQ+ respondents (15% vs 11%).



Though this may seem a discrepancy, deeper analysis shows that LGBTQ+ respondents are less likely than non-LGBTQ+ respondents to live with:

- their parents (14% vs 18%)
- their siblings or other family (1% vs 2%)
- a partner (and children) (9% vs 13%)
- solo (and kids) (10% vs 13%).

Knowing respondents’ living arrangements can give pointers to how much home support they are likely to have. Across the survey, respondents are most likely to turn to a friend, partner or colleague when they have MH difficulties. The next most likely confidante is a family member.

This was true for:

- 3 out of 4 (72%) non-binary respondents
- 3 in 5 (62%) women
- 1 in 2 (49%) men
- 2 in 3 (67%) of OT respondents.

However, 1 in 5 (19%) men do not speak to anyone about their MH difficulties, and this compares with 1 in 8 (12%) women and 1 in 12 (8%) OT or non-binary respondents.

LGBTQ+ respondents are far more likely than non-LGBTQ+ to speak to a friend, partner or colleague (69% vs 52%) about MH difficulties and far less likely to say they have not sought any advice (9% vs 17%).

However, LGBTQ+ respondents are less likely than non-LGBTQ+ to agree they know where to go for help for themselves or a friend/colleague in times of MH difficulty (52% vs 59%) and more likely than non-LGBTQ+ to disagree (26% vs 19%). Looking at answers made by non-binary, OT, men and women, they agree and disagree in similar proportions with around 3 in 5 agreeing (62% and 64%) and around 1 in 6 (16% and 16%) disagreeing.

Transition to university from school or college

More men found it easy than hard to transition from school or college to university (39% vs 36%) but more women, OT and non-binary respondents found it hard than easy. In fact, twice as many non-binary respondents said it was hard than said it was easy (56% vs 26%), in line with the experience of OT respondents (55% vs 28%) and women (50% vs 30%).

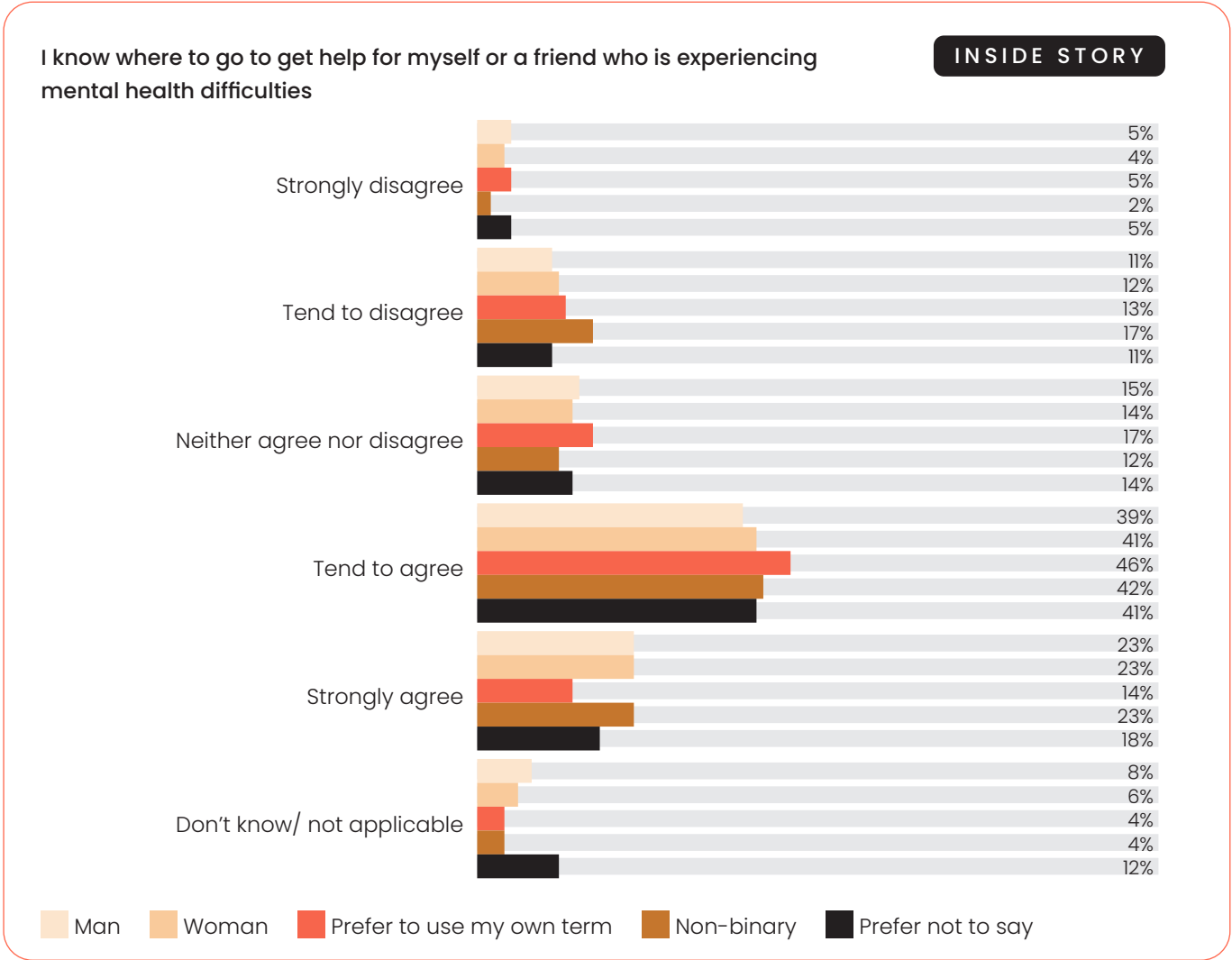
Among non-LGBTQ+, LGBTQ+ respondents, and those who preferred not to say, around 1 in 3 had found the transition easy (35%, 31% 32%). But around half (52%) of LGBTQ+ respondents and those whose sexuality was undisclosed (47%) had found the transition hard, compared with 2 in 5 (42%) non-LGBTQ+ respondents.

Twice as many men said choosing a university prioritising students’ MH provision had been important than those felt it was unimportant in their choice (51% vs 23%).

Four times as many women said it was important than rather than not important (61% vs 15%).

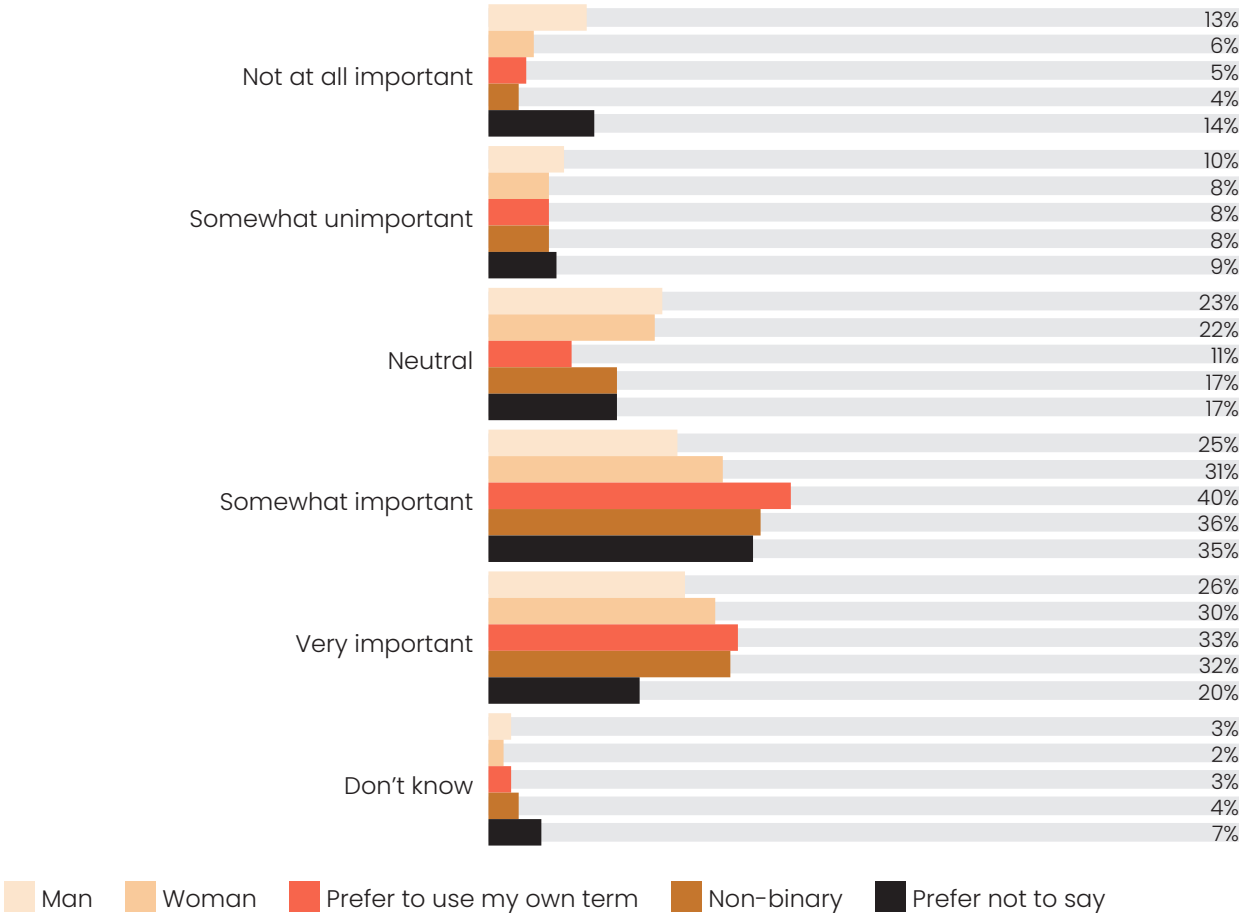
There was an even wider gap between OT respondents (73% important vs 13% unimportant), similarly, significantly more non-binary respondents rated it important rather than unimportant (68% vs 12%).

LGBTQ+ respondents answered in similar percentage to women, (63% important vs 16% unimportant) while non-LGBTQ+ respondents answered the question, important vs not important



When you chose your university, how important was it to know that they have a robust mental health provision?

INSIDE STORY



(55% vs 19%). Among those who chose not to disclose their sexuality, 50% said their uni prioritising MH had been important and 22% said unimportant.

It may be that MH provision is not really thought about much when students are putting choices down at UCAS, especially if they have never experienced MH issues at that point. But significant numbers of respondents report that their MH declines after starting university. Half of women, non-binary and OT respondents said their MH declined (49%, 51% and 46%) compared with fewer than 2 in 5 (37%) of men. Men were most likely to say their MH had not changed since starting university (33%) compared with women (26%) non-binary (19%) and OT (23%) respondents. Men (26%) reported that their MH had improved since starting university in similar percentages to non-binary (27%) and OT (29%) respondents, but only 1 in 5 (20%) of women said the same.

Though the sample size was small, it was notable that all (100%) non-binary and OT graduate respondents said their MH had declined while job-hunting. This compares with around half of men

and women (56% and 51% respectively). And while 3 in 10 (29%) men said their MH had not changed, and 1 in 17 (7%) said it had improved, this compares with 2 in 5 (39%) women whose MH had not changed and 1 in 25 (4%) whose MH had improved during their job-search.

Work choices

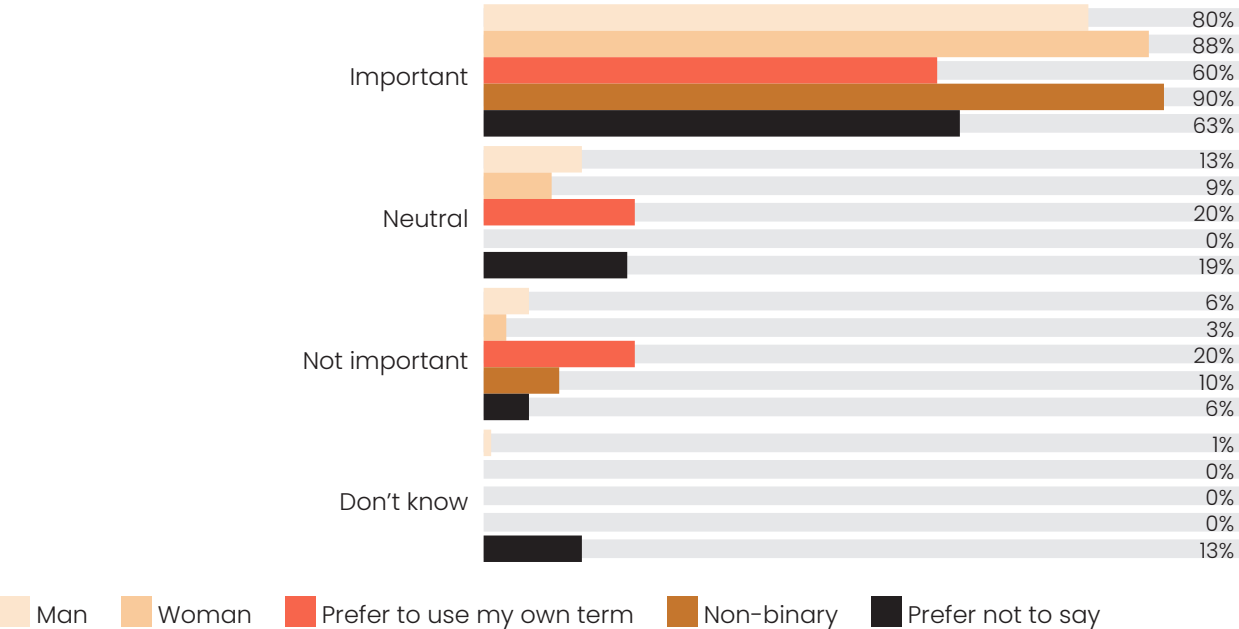
Respondents with disabilities are more likely to work in the public sector than those without (see page 55). This is also true of non-binary and OT respondents (higher proportions of these respondents have a disability). LGBTQ+ respondents were twice as likely as non-LGBTQ+ to work in the public sector (27% vs 12%), in retail (10% vs 5%) and media and advertising (8% vs 3%).

However, non-LGBTQ+ respondents were four times more likely to work in the medicine, dentistry, or veterinary sector than LGBTQ+ respondents (9% vs 2%) and three times more likely to work in IT and technology (9% vs 3%). And while 6% of non-LGBTQ+ respondents worked in engineering, design and manufacturing, there were no LGBTQ+ respondents working in that sector.

On how important it was that their employer prioritised employee MH, 4 in 5 (80%) men considered it important while only 1 in 16 (6%) said it was not important (14% were either neutral or did not know) and 9 in 10 (88%) women and non-binary (90%) respondents said it was important.

When choosing an employer, how important is it to know that they prioritise employees' mental health?

INSIDE STORY



However, while only 1 in 33 (3%) women felt the matter was unimportant, 1 in 10 (10%) non-binary respondents felt that way. In addition, 1 in 11 (9%) of women said they were neutral about employers prioritising MH or said they did not know, while no non-binary respondent was neutral or did not know.

This difference may be due to the much smaller sample size of non-binary respondents in this section of the study. There were similar discrepancies in the OT respondents' replies, 3 in 5 (60%) felt employers prioritising MH was important, 1 in 5 (20%) said it was unimportant and 1 in 5 (20%) were neutral. Once in work, all OT and non-binary respondents said their MH had declined, compared with just over half (56%) of men and women (51%).

Self-harm and suicide

Across the survey, the hardest to reach groups can be those most susceptible to MH decline, or most vulnerable to the severest MH difficulties. But there is also a need to watch students and graduates who do not engage with services, or even know of their existence. Looking at groups, sub-groups and categories can help identify those who may need extra support, but do not ask for it.

Non-binary respondents are more likely to say they have self-harmed than women and men (67% vs 53% and 38%), and OT respondents have the highest rate of self-harm by percentage within their grouping (69%).

OT respondents are also more likely to have experienced suicidal thoughts (75%) but proportionately non-binary respondents are the most likely to have attempted to take their own life (28%).

Men do not tend to engage or use MH services provided, and this is more noticeable at university, where sample sizes were greatest. Nearly 3 in 10 (28%) men said they were not aware of MH support services provided by their current/last university or Students' Union, and 7 in 10 (70%) had not used any of the services. This compared with around 1 in 4 women and OT respondents (23% and 22%) and 1 in 8 (13%) of non-binary respondents who did not know about the services. Nearly 2 in 3 (64%) women had not used them, compared with 2 in 5 (41%) OT and 1 in 2 (48%) non-binary respondents.

About 3 in 10 (27%) non-LGBTQ respondents said they were not aware of MH support services provided by their current/last university or Students' Union, and 7 in 10 (70%) had not used any of the services. This compared with 1 in 7 (17%) LGBTQ+ and 1 in 5

(19%) of those who preferred not to disclose their sexuality, who said they were not aware and 11 in 20 (55%) LGBTQ+ and 2 in 3 (66%) undisclosed who had not used any of the services.

There is more on these subjects in the University Mental Health Charter (page 151) and on page 24.

Respondents by ethnicity

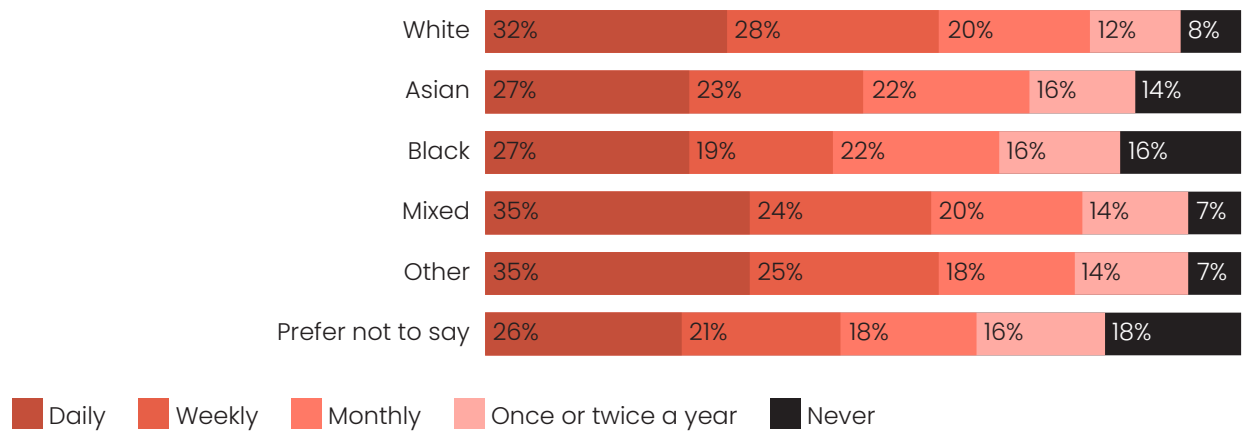
Looking at survey participants with MH difficulties Black and Asian respondents are the most likely to say they have no experience of MH themselves compared with their white and mixed ethnicity peers (24% and 19% vs 9% and 7%). Black and Asian respondents were the most likely to say they were not sure how to describe their own MH compared with white and mixed ethnic respondents (34% and 31% vs 23% and 27%).

Black and Asian respondents were also more likely to say they never or rarely worry about their mental health, compared with those from white and mixed ethnic backgrounds (32% and 30% vs 20% and 21%).

Black and Asian participants were more likely to say they have never used NHS services than their white and mixed ethnicity peers (60% and 67% vs 44% and 47%). Asian respondents were the least likely to have used their GP services and NHS/HSE/private healthcare counselling (29% and 17%). Respondents from mixed backgrounds were the most likely to have used talking therapy (47%) and white respondents were by far the group most likely to have used other services (74%).

Thinking back over the last 12 months, how often have you experienced the following: worrying about your mental health?

INSIDE STORY



When asked if they thought their MH condition was a disability, double the percentage of white and mixed ethnicity respondents said yes compared with those from Asian or Black backgrounds (22% and 22% vs 10% and 11%).

Looking at the number of respondents with disabilities by ethnicity:

- 3 in 10 (30%) who were white had MH difficulties (50% had none)
- 1 in 9 (11%) who were Asian had MH difficulties (76% had none)
- 1 in 11 (9%) who were Black had MH difficulties (80% had none)
- 1 in 4 (27%) mixed ethnicity respondents had MH difficulties (52% had none).

The MH picture changes when factoring in socio-economic backgrounds (SE) (see page 152 for an explanation of terminology).

Among respondents from:

- white low SE, 2 in 5 (41%) had MH difficulties vs 1 in 4 (27%) white high SE
- Black low SE, 2 in 9 (22%) had MH difficulties vs 1 in 9 (11%) Black high SE
- Asian low SE, 1 in 5 (19%) had MH difficulties vs 1 in 6 (16%) Asian high SE.

When asked whether they had received (or applied for) Disabled Students' Allowance (DSA) (or the equivalent) respondents who said yes were as follows:

- 1 in 6 (16%) white
- 1 in 25 (4%) Asian
- 1 in 20 (5%) Black
- 1 in 6 (16%) mixed ethnicities.

Ethnicity and employment

Though more detailed analysis results in smaller sample sizes, it is notable that certain ethnic and socio-economic background groups seemed either to target, or were better able to secure, a job in certain sectors.

The work sectors by ethnic background were:

White

All

- public sector, 1 in 5 (18%)
- scientific research and development, 1 in 7 (14%)

Low SE backgrounds:

- public sector, 1 in 4 (25%)
- medicine, dentistry or veterinary, 1 in 8 (13%)

High SE backgrounds:

- scientific research and development, 1 in 4 (23%)
- banking, insurance and financial services 1 in 8 (12%)
- construction, civil engineering and surveying, 1 in 8 (12%).

Asian

All

- scientific research and development, 1 in 7 (14%)
- IT and technology, 1 in 7 (14%)

Low SE backgrounds:

- engineering, design and manufacture 1 in 4 (24%)
- accounting and financial management, 1 in 8 (13%)

High SE backgrounds:

- IT and technology 17 in 20 (86%)
- media and advertising 1 in 7 (14%)

Black

All

- IT and technology 3 in 20 (15%)
- medicine, dentistry or veterinary 3 in 20 (15%)

Low SE backgrounds:

- accounting and financial management, 1 in 2 (50%)
- IT and technology 3 in 10 (31%)

High SE backgrounds:

- scientific research and development, 17 in 20 (86%)

(sample was too small for a second option)

Mixed

All

- the public sector, 1 in 5 (19%)
- charity and not-for-profit 1 in 8 (13%)

(no figures for job sector by low/high SE background x ethnicity).

All groups, regardless of ethnicity, placed significant importance on choosing universities and employers that prioritised students' or employees' MH.

This was especially true of Black respondents, 19 in 20 (95%) of whom said employer support was important, with none saying it was not important. Marginally fewer white, mixed ethnic and Asian respondents felt as strongly, and 1 in 20 (6%) white respondents placed no importance on employers prioritising employees' MH.

Black respondents (13%) and those of mixed ethnicity (12%) were more likely to say that their MH had improved when they were looking for graduate jobs than their white (5%) and Asian (3%) peers. And Black respondents were less likely to say their MH had declined (40%) compared to those from white (49%), Asian (63%) and mixed (54%) backgrounds. Black respondents were also more likely to say their MH was unchanged by job-hunting, in addition, they were also the most likely group to say they never worried about not being good enough or not doing well enough (14%). This compares with responses from those from Asian (7%), mixed (5%) and white (4%) backgrounds.

Looking at the detail by including SE background, 4 in 5 (80%) Asian respondents from low SE said their MH had declined while hunting for graduate jobs, but 17 in 20 (86%) from high SE said it improved.

Among Black respondents from low SE, 4 in 5 (81%) AND all (100%) of those from high SE said their MH had declined during their job hunt.

This compares with white respondents from low SE, 3 in 5 (57%) of whom said their MH had declined during that period, nearly as many as those from high SE (54%). In addition, only 1 in 20 (6%) of low SE white respondents said their MH had improved during their graduate job hunt, and no-one from a white high SE said their MH had improved at that time.

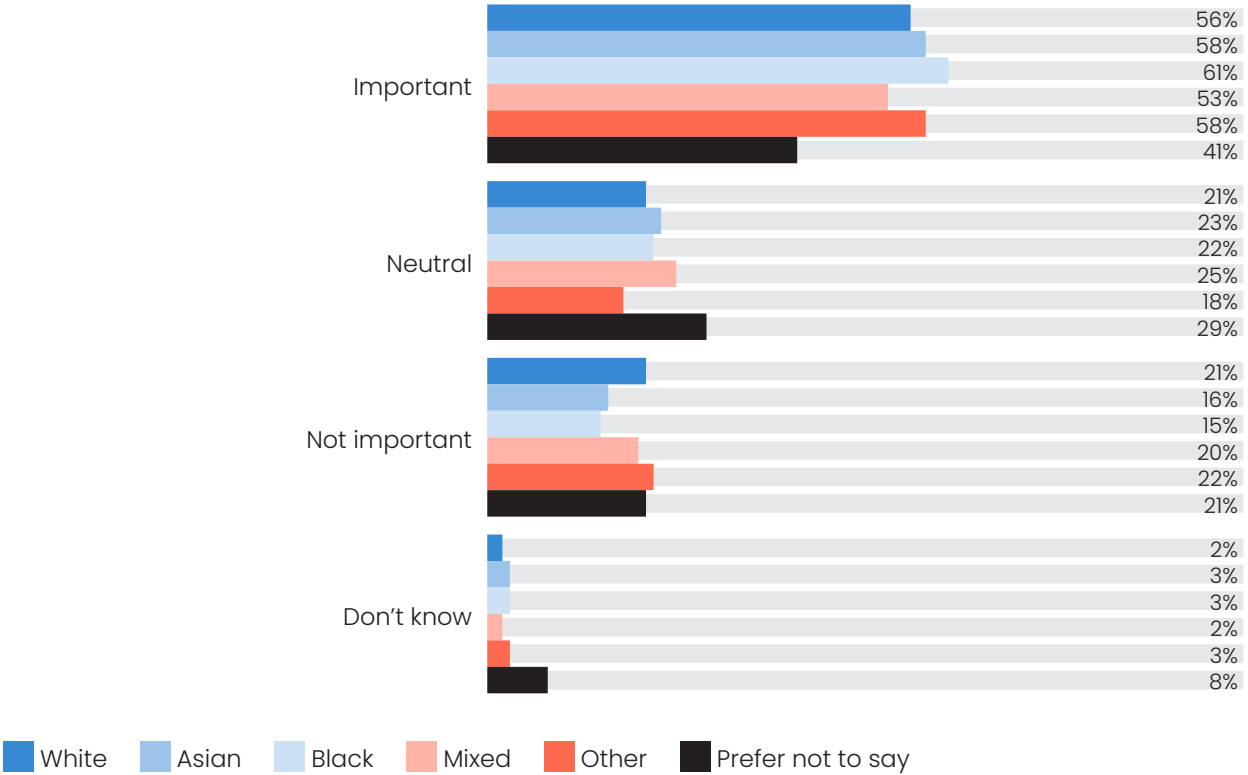
It is notable that when asked if cost-of-living concerns were the cause of MH challenges, there were significant differences between ethnicities and attribution.

- Black – fully (21%) and not at all (20%)
- White – fully (10%) and not at all (24%)
- Asian – fully (18%) and not at all (18%)
- Mixed – fully (12%) and not at all (21%).

Almost all (96%) graduate respondents from high SE Asian backgrounds were still looking for work at the time of the survey, and only 1 in 25 (4%) had secured a graduate scheme role. Around 2 in 5 (37% and 38%) low and high SE white respondents were still seeking work, along with slightly more (44%) respondents from low SE Asian backgrounds and slightly fewer (34%) from low SE Black backgrounds.

When you chose your current/ last university, how important was it to know that they prioritise students' mental health?

INSIDE STORY



No one from a high SE Black background was still job hunting, though 7 in 10 (70%) had accepted an entry level role, along with 1 in 4 (25%) respondents from Black low SE backgrounds.

Graduate respondents taking entry level roles may have higher aspirations but work as a stopgap while saving for postgraduate studies (see pages 114-118). Anyone doing postgraduate studies would not have been included in this part of the survey.

More Asian and Black respondents were seeking work at the time of the survey than their white and mixed peer group (57% and 61% vs 37% and 41% respectively), while more white and mixed ethnic respondents had settled for an entry-level job (ie one for which they did not need a degree) than their Black and Asian peers (19% and 16% vs 6% and 6%). From the whole sample, however, fewer Black graduate respondents had secured a graduate entry role than white, Asian and mixed ethnicity respondents (11% vs 17%, 16% and 17% respectively).

This picture changes when looking at outcomes by both ethnicity and SE backgrounds. Among low SE backgrounds, it is notable that a higher percentage of Asian and Black respondents than white had secured graduate entry roles (22% and 25% vs 5%) or were on graduate schemes (19% and 16% vs 2%).

Black and mixed ethnicity respondents in work were the least likely to say they worried about losing their job at any minute, compared with those from white and Asian backgrounds (47% and 43% vs 35% and 36%).

Although the highest and lowest SE* backgrounds by ethnicity results are small samples, these revelations are significant in comparison with overall outcomes.

In summer 2024 a [research briefing paper](#) was published showing inequality of access and outcomes in higher education in England. Similar studies also highlight that young people from low SE white backgrounds are the least likely group to go to university.

The Cibyl UK Mental Health Survey specifically looks at how respondents feel about transitions and what effect various aspects of young people’s lives have on their MH. There is some difference between ethnic groups from low SE backgrounds and how easy they found transitioning to university, but similar proportions, around 1 in 2, from all low SE backgrounds said it had been hard, compared to 44% of all respondents.

When it came to making friends, those from white and mixed ethnic backgrounds were less likely to say they never worried about making friends, (23% and 22%) compared to those from Black and Asian backgrounds (37% and 28%) – this compares with 1 in 4 (27%) of all respondents. Good quality friendships and support are important in times of MH difficulty and low MH*.

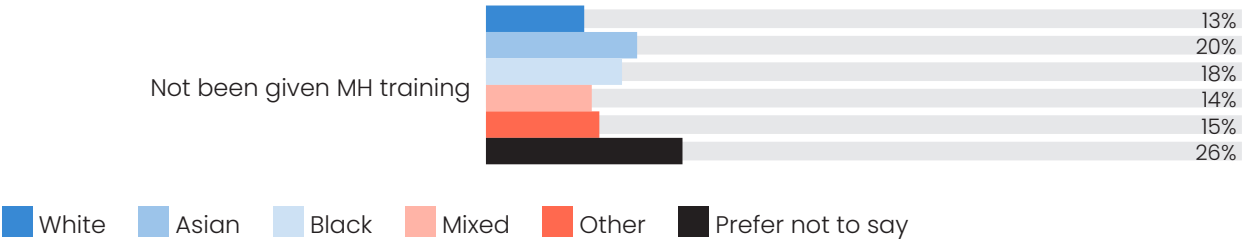
Asked how well their university supported people with MH challenges, Black respondents were more likely to say they did not know than their peers, and less likely to say they did not support MH well. Asian and Black respondents were more likely to say their university supported MH well than respondents from white and mixed ethnic backgrounds (61% and 60% vs 54% and 50%).

Universities are clearly making efforts to get the right messages and information to students, regardless of their background. Across ethnicities around 2 in 5 respondents said they had received MH training, information and advice through uni. However, some ethnicities were more likely than others to receive MH training at school, and there was a difference in the percentages not given MH training.

*See page 152 for terminology.

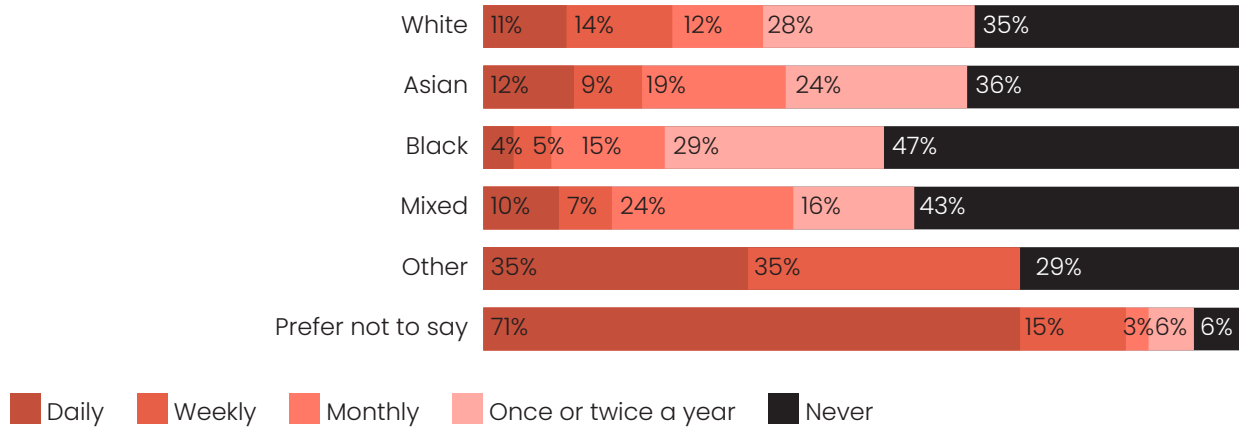
Where have you been given mental health training, information or advice, if anywhere?

INSIDE STORY



Thinking back over the last 12 months, how often have you experienced feeling insecure at work, like you could lose your job at any moment?

INSIDE STORY



Respondents with disabilities

Cibyl’s research across the years has shown that respondents with disabilities – MH or others – find it harder to make friends at university or work than the rest of their cohort. There are also significant differences in the subjects and sectors that they choose to study and work in.

This year’s survey revealed that:

- 1 in 5 (21%) respondents had MH difficulties
- 1 in 9 (11%) had a learning difficulty
- 1 in 12 (8%) had an unseen disability or health condition
- 1 in 20 (5%) had autism or was on the autistic spectrum
- 1 in 50 (2%) had a physical impairment
- 1 in 100 (1%) was deaf or hard of hearing
- a total of 55 respondents (too few to make up a full percentage) were blind or partially sighted.

In addition:

- 1 in 20 (5%) preferred not to say
- more than 3 in 5 (62%) of respondents had no known disability.

Put together, that means 2 in 3 (67%) respondents were not disabled (or their disability was unknown/not disclosed) and 1 in 3 (33%) were disabled, split into 2 in 9 (22%) who had a MH disability and 1 in 8 (13%) who had another form of disability.

When invited to explain in more detail why they did not take part in universities' activities, a number of respondents cited health issues. These included:

- physical health
- mobility conditions
- disabilities not being accommodated
- chronic fatigue
- pain
- MH issues.

Is MH a disability?

As part of the survey respondents who had a MH condition were asked whether they considered it to be a disability and 1 in 6 (17%) said yes. Across the survey 1 in 9 (11%) respondents with a MH condition now applies for, or receives, Disabled Students' Allowance (DSA) or the equivalent, (see pages 21–22).

Respondents with MH disabilities are also likely to have a low MH score (see page 152 for definitions of these terms). For some respondents accessing DSA proved a complicated process, and that in turn caused delays in transportation, meant missing social events, and being unable to get additional tutor support. Other barriers pointed out by people with disabilities included the lack of sign language, for example.

"I just wish they would include all disabilities within the Disability Service at the university," wrote one respondent who was deaf.

While nearly 2 in 5 respondents with MH disabilities and other disabilities (37% and 39% respectively) agreed that their university was doing everything to support their mental wellbeing, 3 in 10 (28%) with MH disabilities and 1 in 5 (21%) with other disabilities disagreed.

This compares with respondents with no disability, more than 2 in 5 (43%) of whom agreed their university was doing everything to support their mental wellbeing and around 1 in 6 (16%) of whom disagreed.

Across all respondents, (those with MH, with other disabilities and no disability), around 1 in 4 neither agreed nor disagreed (26%, 28% and 27% respectively).

The perception of university senior leaders and how much they cared about MH and emotional wellbeing also varied between those with a disability and those without.

While about 1 in 5 respondents, regardless of disability or none, neither agreed nor disagreed with the statement, those with MH and other disabilities were more likely to disagree than those with no disability (19% and 17% vs 12%).

It might be expected that respondents with a MH disability would make use of the general support services that universities offer in greater numbers than anyone without MH disabilities, but notably the Student Union was called on in equal proportion by all groups, with around 1 in 14 (7%) using the service for MH advice regardless of whether respondents had a disability or not.

When it came to using a range of general support services for MH advice at university, 2 in 3 (66%) respondents with no disability had used nothing on offer to seek advice for MH, compared with half (49%) of those with other disabilities and 3 in 10 (28%) of those with MH disabilities.

Do respondents who are neurodivergent consider themselves disabled? This year, 14% of respondents said they were neurodivergent and of those, 1 in 3 (33%) said they had MH disability and 3 in 5 (61%) said they had another disability. Neurodivergent covers such conditions as AD(H)D, autism, bipolar conditions, dyslexia, dyspraxia, dyscalculia, and Tourette's. While women reported in slightly higher percentages than men (16% vs 12%), half (48%) of non-binary respondents were neurodivergent.



OPEN TEXT COMMENTS FROM RESPONDENTS PAINT DIFFERENT EXPERIENCES ACCESSING DSA, FOR EXAMPLE:

'My university worked with the DSA to give me good support.'

'I had a quick DSA assessment and as well as software that will help with my course, they recommended 36 hours of mental health mentorship, which has been invaluable.'

SOME RESPONDENTS NOW CONSIDER THEIR MH CONDITION A DISABILITY BECAUSE THEY RECEIVE DSA.

'I've been approved for DSA, but it doesn't feel like a real disability.'

'I receive DSA and uni disability support. I didn't consider [my MH] a disability before accessing these resources and being recommended them.'

1 in 14 (7%)

used the Student Union for MH advice whether they had a disability or no disability.



Disability charity [Scope](#) has guidelines and legal definitions for students who feel they have been discriminated against because of their disability. It also has pages of help and information on other matters, such as [free careers advice](#) specifically aimed at 15- to 25-year-olds living with disabilities in England and Wales.

Similar services can be found in Scotland through the Disability Information Scotland [website](#) and in Northern Ireland at [Disability Action](#).

Eating healthily and disabilities

Is there a connection between unhealthy eating and MH or other disabilities? Can eating more healthily help boost MH and wellbeing? Although no respondent said they never ate unhealthy foods (such as takeaways, sugary drinks, and microwave meals), 1 in 4 (24%) of those with a MH disability said it was an everyday event, compared with 1 in 5 (19%) of those with other disabilities and 1 in 8 (13%) of respondents with no disability. Around 1 in 5 (18%) with MH disability ate unhealthy foods monthly compared with 1 in 4 respondents with other disabilities, or none (23% and 25% respectively).

There is more information on unhealthy eating on page 31 of this report.

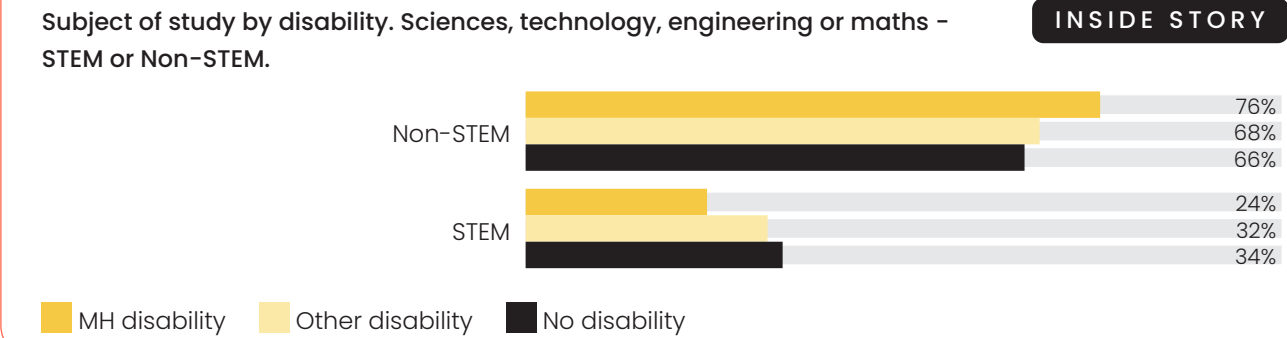
Although accommodating every type of disability or background when setting up help, support and advice services would require access to significant financial and human resources, there are statutory duties. Respondents with disabilities also fall into diverse and specific demographic categories – they may be LGBTQ+, Asian and/or from a high or low socio-economic (SE) background, for example.

Subject preferences, work and support

From the Cibyl UK Mental Health survey 2024, respondents with MH and other disabilities were less likely to study business and management subjects than their non-disabled peers (9% and 11% vs 20% respectively). And there are more people with MH disabilities studying psychology than those with other disabilities or no disabilities (12% vs 8% and 7% respectively).

Respondents to this year’s survey who had a MH disability were more likely to study non-STEM subjects and less likely to study STEM subjects than those with other disabilities or no disability. In fact, 3 in 4 (76%) with MH disabilities opted for non-STEM subjects with 1 in 4 (24%) choosing non-STEM. This compares with 2 in 3 people

with other disabilities or no disability choosing non-STEM subjects and 1 in 3 choosing STEM subjects (68%/66% and 32%/34%) (see graphic).



When it comes to employment, respondents to this survey who had MH and other disabilities are more likely to work in:

- public sector jobs than their peers with no disabilities (25% and 23% vs 10% respectively)
- Hospitality, leisure, and tourism jobs (including entertainment). These were more popular for people with a MH disability than people with no disability (9% vs 5%). However, only 2% of respondents with other disabilities worked in this sector.

Respondents with MH disabilities were more likely to work in creative industries, such as media and advertising, than those without a disability (7% vs 3%).

Respondents with other disabilities were more likely to work in charity and not-for-profit jobs (6% vs 3%) and the manufacturing and marketing sector (6% vs 2%) than respondents without disabilities.

In the legal sector, in this sample, more people with other disabilities were employed than those with MH disabilities or no disability. Only in accounting and financial management were there no differences (see graphic) between respondents.

It is impossible to say that these figures are representative of sectors as a whole, as they are a snapshot of students’ and graduates’ experience and choices. To examine more companies and age ranges would require a different survey altogether. Regardless, it could be early perception of some sectors, fostered at school, university or through placements, that prompts career choices among disabled students and graduates. Visibility and openness can be key to inspiring next generation jobseekers. For example, the Higher Education Statistics Agency (HESA) published

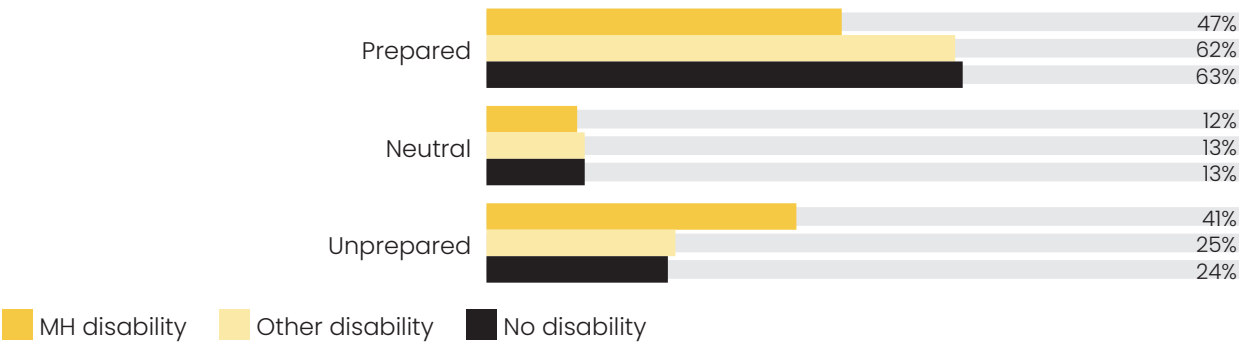
figures that showed only 1 in 16 academic staff declared a disability (see page 108).

Though around half (47%) of respondents with a MH disability feel that they are prepared for work, 2 in 5 (41%) do not, and this compares with respondents with other disabilities, around 2 in 3 (64%) of whom do feel prepared for work.

Given those figures, and the knowledge that disability loads extra challenges on to living well, it may not be such a surprise that 6% of this years' graduate respondents with a MH disability and 2% with other disabilities were not seeking work either because of a disability or because they were suffering from long-term sickness.

Thinking back to when you first started work, how well prepared were you for the realities of working life?

INSIDE STORY



Once in work, just as in uni, the added stress of disability can influence how a respondent sees the world in terms of their future career and their prospects (see page 127).

There is more detail about MH in the transition from university to work on pages 112-129.

THE BIGGER PICTURE

What is happening beyond the study?

Cibyl's fourth annual mental health (MH) study details university and employer MH support and wellbeing performance according to students' and graduates' assessments. As data sets, these can be compared across years, by the factors that create disadvantage and increase mental load, and by improved understanding of what respondents want and need.



Representing many higher education institutions (HEIs), our report partner, Universities UK (UUK) is the collective voice of 141 universities. Its work advocates for students and staff, who in recent times have experienced an unprecedented period of upheaval and uncertainty.

Across the four years of the Cibyl UK Mental Health Study, respondents have coped with disruption to their school education, and often their home life, fragmentation of friendships, the cancellation of events marking the traditional transition into adulthood, such as 18th birthdays, school leaving parties and proms. This year's graduates include the UK school cohort who suffered anxious waits for the first-ever assessed gradings rather than exams (which in themselves caused controversy). They were the undergraduates whose university experience started with restricted socialising from the word go. Their resilience has been tested.

Last year saw a distinct drop in the number of first-year students suffering low MH*, which might have been the bounce-back of a cohort not starting uni life with COVID-19 restrictions. In 2024, however, across all year groups 3 in 10 students had low MH, dropping to 1 in 5 among postgraduates. So why has there been such a rise in students' experiences in 2024?

Financial insecurity adds to students' MH difficulties as they deal with high living costs on top of any stresses encountered through study and exam pressures. Post-uni independence may not bring financial freedom either – 1 in 12 (8%) recent graduates said they could not afford to take part in community or social events at work and nearly 2 in 5 (36%) live with parents (or guardians) post-university, regardless of whether they are working or not.

HEIs cannot be solely responsible for improving students' MH outcomes and levels of resilience. Last year [UUK](#) called for greater government focus on student MH to meet increased demand for university-funded support services. This year, UUK published a university funding and finance report that pulled no punches about universities' sustainability and the challenges they faced.

A UUK [blueprint](#), published in autumn 2024, details the economic growth potential within higher education and universities. It highlights the UK's world class research bases – and though harder to translate into money terms – universities' added benefits such as soft power and international reputation. The report adds that universities are often major local employers.

*For definition of low MH please turn to page 152.



2 in 5

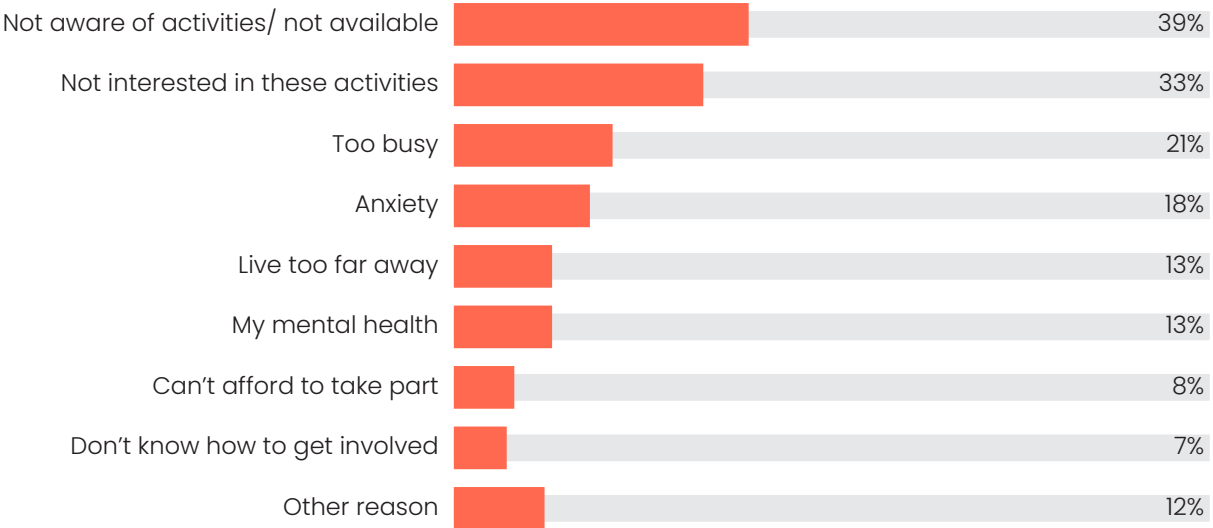
employed graduates live with their parents.

1 in 12

employed graduates cannot afford to take part in work social events.

What has prevented you from taking part in community or social events at work?

BIGGER PICTURE

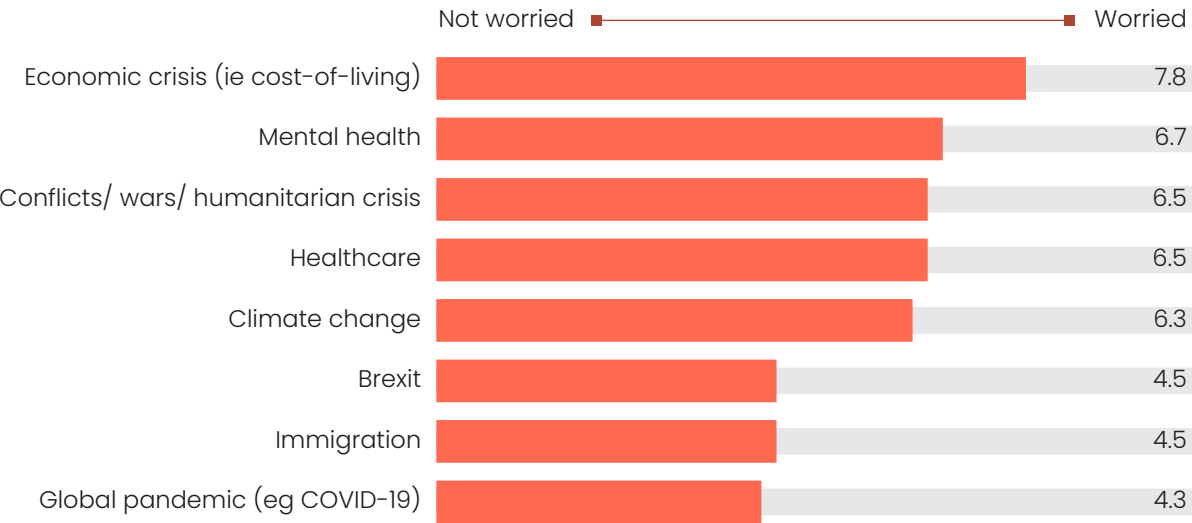


Student life

By their own assessment, this year’s student respondents were better prepared for uni (something we look at in more detail in The transition from school to university on pages 68–83). But social issue worries, such as climate change and geopolitical turmoil have worsened. Closer to home, travel, food, utility, and [accommodation](#) costs have risen, leading to hardship for some students and anxiety for many more. An [Office of National Statistics \(ONS\)](#) survey revealed that last year more than 9 in 10 (92%) students found their living costs had increased. In real terms, all but the most privileged students are poorer as maximum maintenance loans remain unchanged despite inflation.

On a scale of 1-10 when thinking about the future, how worried are you about these social issues?

BIGGER PICTURE



There’s a brief insight into the different UK funding bodies on page 9 of this report. Whether graduates consider their debt a student loan or graduate tax, the [Student Loans Company](#) currently has £260.8bn on its books, owed by 9.7 million customers.

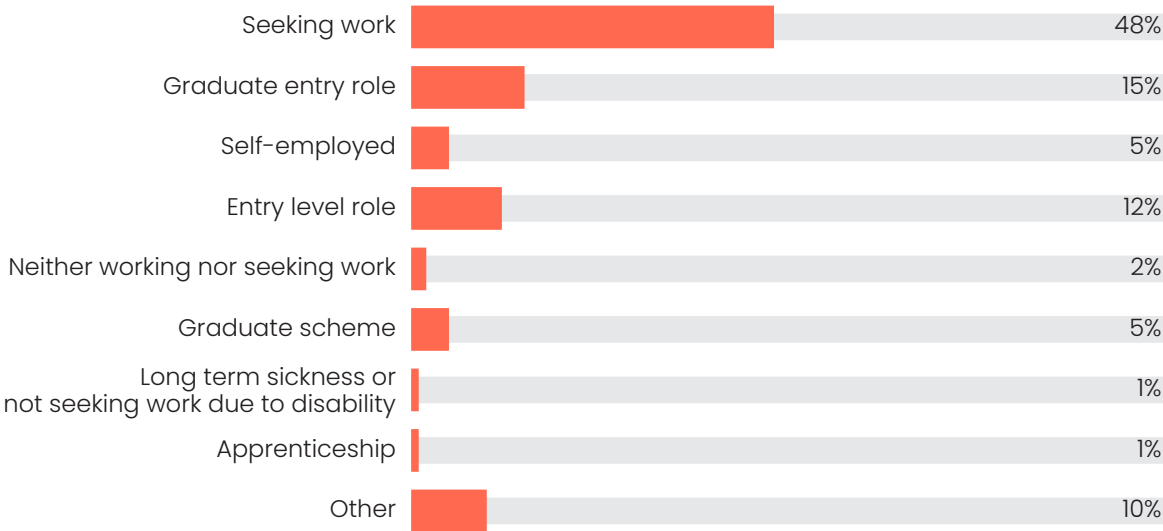
According to [The Observer](#) newspaper, loan repayments rose due to surging interest rates, adding to graduates’ overall living costs and the general sense of malaise. Some graduates note that despite all the repayment from their salary during years in employment, their overall debt has risen, not fallen, as a result. Others are choosing to pay off their debt, for example by extending their mortgages. Out of frustration, a few graduates are deliberately earning below the threshold at which money starts

being deducted from salary, according to The Observer, and some wish they had never gone to university and are advising young family members to skip the opportunity.

Though not representative of all UK graduates, 1 in 12 (8%) respondents in this part of the Cibyl UK MH survey 2024 survey were employed in entry-level jobs (see pages 49 and 114–118 for more information).

What is your employment status?

BIGGER PICTURE



Should the funding system behind student maintenance grants be overhauled? A panel of opinion makers and financial consultants, writing for UUK, have differing views on why and how student loans and repayment models could be changed and whether maintenance grants should be reintroduced.

Can universities justify asking for higher fees, despite knowing students are feeling the squeeze? In January 2023 fees were capped at £9,250 for two more years, but this sum, allowing for inflation, is the equivalent of £6,600 in 2012.

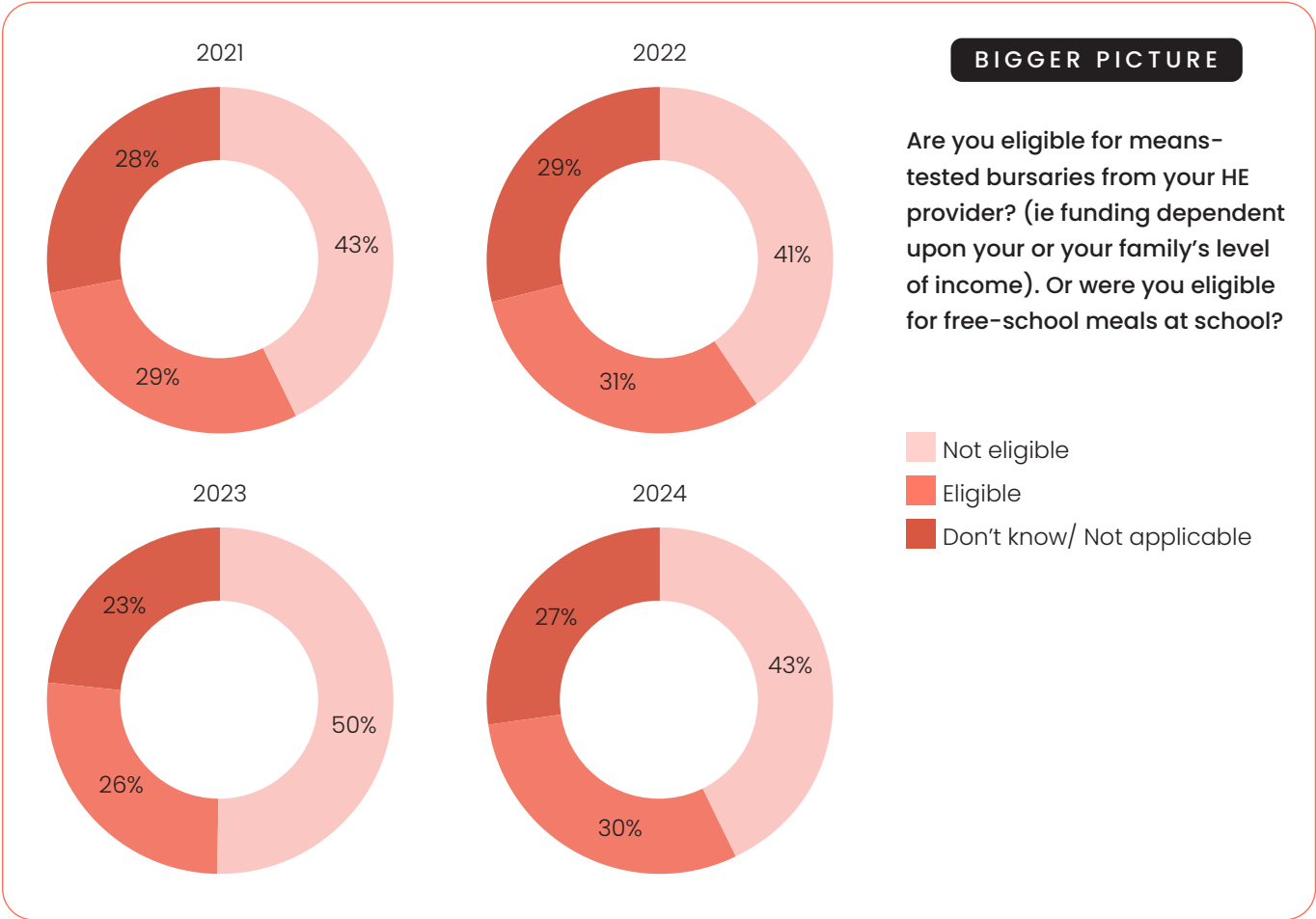
Looking at year on year figures, fewer than 1 in 3 (30%) of respondents were eligible for means-tested bursaries from their HE provider, or had been eligible for free school meals, a similar percentage to:

- 2021 (29%)
- and 2022 (31%)
- but marginally more than those in 2023 (26%).

In May 2024, the Office for Students (OfS) published [an independent view](#) of the higher education sector’s financial position and its resilience to financial challenge. Its modelling suggests that two-thirds of institutions could be in deficit by 2026-27, with 2 in 5 (40%) facing low liquidity at year end. Overall, based on financial information gathered from universities and other higher education providers, plus forecasts, the OfS cautions against overoptimism in future student growth.

[Reuters](#) reveals that the number of international postgraduate students paying a deposit to study at British universities has dropped by 63% on 2023 figures, citing a Migration Advisory Committee report. Losing fee income from overseas students is adding to universities’ woes.

International education facilitator ICEF attributes the decline to restrictions to education visas, and separately highlights [economic troubles in Nigeria](#), the UK’s third-largest student source market. Increased visa costs were cited by [Cancer Research UK](#)’s 2024 policy paper, which calls for an improved career pipeline to attract more talent, including PhD students, from overseas.



Is a degree worth the financial outlay?

The Office for Students (OfS) released figures last year claiming that 1 in 5 graduates would be financially better off if they had not gone to university. This year it announced the first and second waves of degree apprenticeship funding from a pot of £40m.

Last year’s UUK president Professor Steve West CBE said the benefits of going to university were not confined to salary and employability outcomes, and that many roles vital to the UK’s economy and society, and meaningful to graduates, had low starting salaries. He said that more than 4 in 5 graduates were engaged in meaningful activity and of those working, 9 in 10 (88%) felt their job fitted their career plans.

[UCAS](#) details the pros and cons of going to university, including the financial commitment of a degree and the pressures on some students’ MH.



In summer 2023 the TUC issued a warning that [work intensification](#) was putting people of all ages at risk of exhaustion, and a Royal College of Psychiatrists' spokesperson stated that burnout could lead to prolonged MH problems when not treated appropriately.

Though they cannot exactly predict the long-term employment benefits of a degree, or offer a guarantee, key points from the UK government working age* graduate labour market 2023 statistics, published in June 2024, include:

- 9 in 10 graduates and postgraduates (88% and 89% respectively) were in employment, compared to 7 in 10 (70%) non-graduates – up on 2022's figures
- 2 in 3 (67%) graduates and 8 in 10 (79%) postgraduates were in high-skilled employment in 2023, compared to 1 in 4 (24%) non-graduates
- the median nominal salary for graduates was £40,000 and £45,000 for postgraduates, compared to £29,500 for non-graduates (to the nearest £500).

However, the median premium on average earnings enjoyed by graduates (not including postgraduates) over non-graduates had fallen by £1,500 to £6,500.

Is a degree still worth the financial outlay and mental health burden to the next generation of students and graduates? Will financial deficits see HEIs merging or closing? Reframing 21st century challenges could lead to a radical rethink and better solutions for students, staff and institutions. After all, the University of Oxford and the University of Cambridge were founded nine centuries ago to take advantage of geopolitical turmoil and adversity, and the first Oxford overseas student enrolled just 25 years later.

*The results relate to working age (16–64 years old) data gathered via the Office for National Statistics' (ONS) [Labour Force Survey](#) (LFS), not just recent graduates' outcomes. And the falling number of responses to the LFS has led to increased sampling variability.

TRANSITIONS

School to university

How difficult is the transition to university? Is it easier for mature undergraduates? And is student life generally harder than it used to be?



Life changes can be stressful, regardless of age or life stage, even those that are positive, exciting and hard won. Finishing school or college brings a pause in long-term friendships, a reset of routines and a change of location.

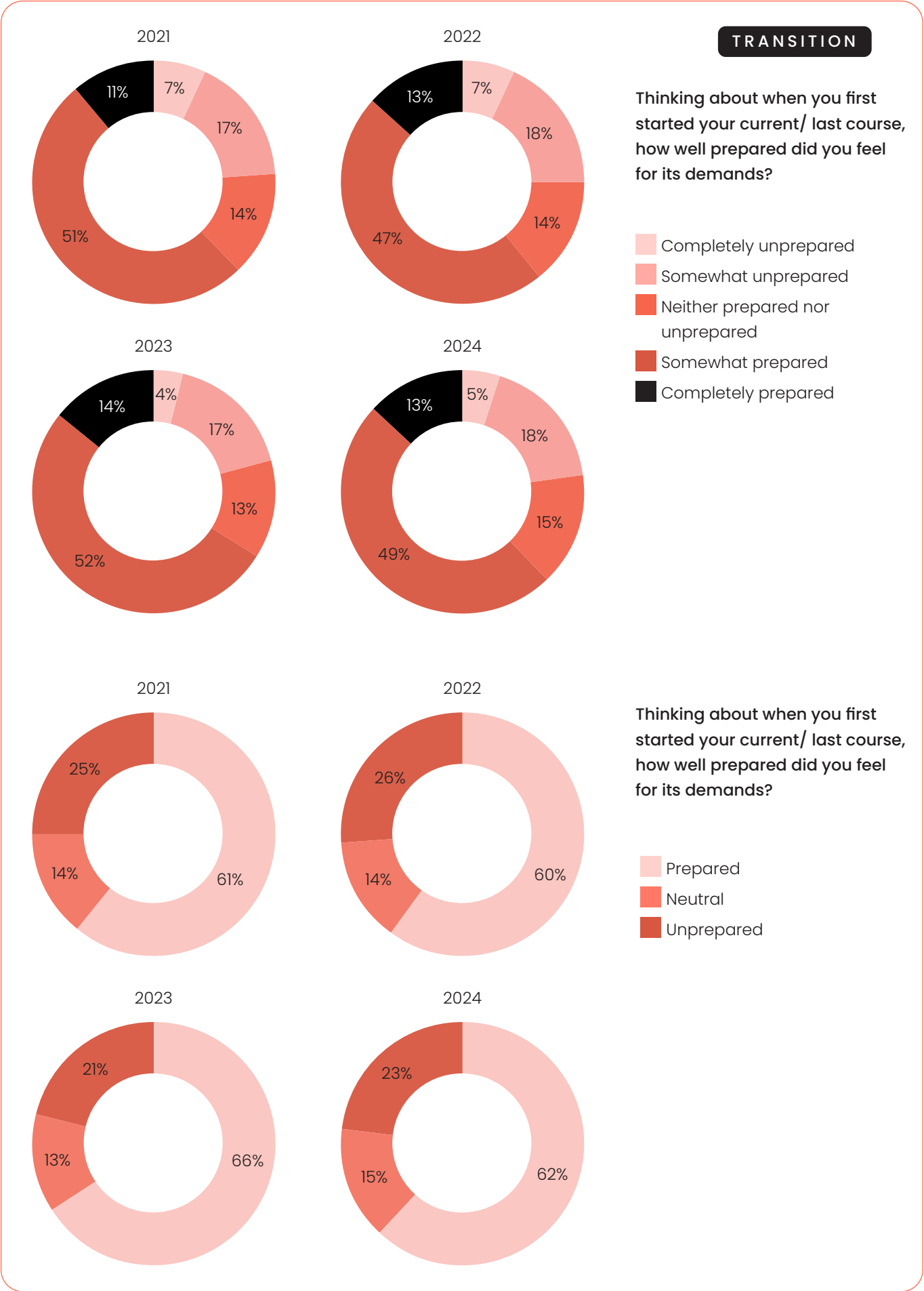
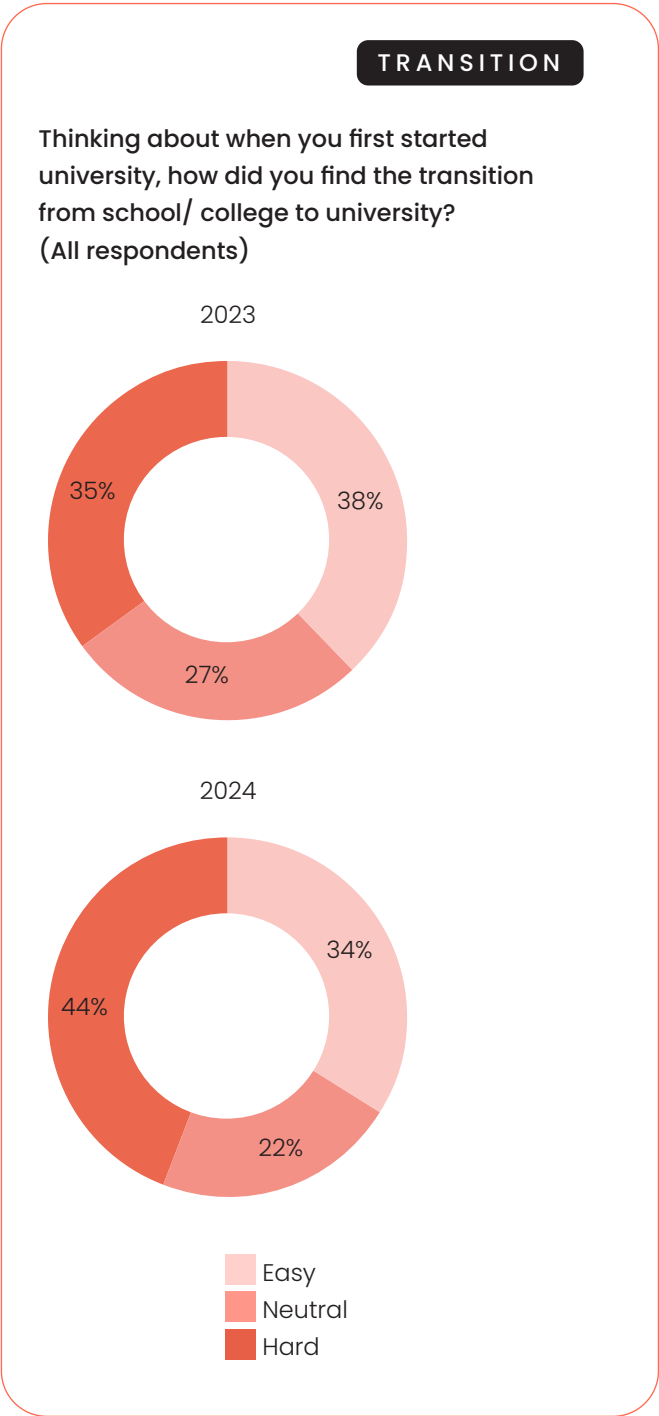
The percentage of this year's first year undergraduates who said they had found the transition to university hard was significantly up on 2023's figure (34% vs 45%) while the proportion of those who had found it easy had dropped from 39% to 34%.

The challenges of change and managing MH

Looking at first year students only, 2 in 3 (68%) of our 2024 respondents felt prepared for independent living, with 1 in 6 saying they were unprepared, and 1 in 6 saying they were neither. This is a drop from our 2023 survey, when nearly 3 in 4 (75%) first year respondents felt prepared and 2022 when 7 in 10 (73%) felt prepared.

As might be expected, age is a factor in how easy students felt about the transition, as over 25-year-olds entering their first year of study were the most likely to feel prepared for independent living (77%).

Looking at those from more privileged, high socio-economic (SE) backgrounds 77% (8 in 10) felt well prepared compared with around half of respondents from low socio-economic backgrounds (54%).





WHAT WOULD HAVE HELPED
YOUR TRANSITION TO UNIVERSITY?

'More clear guidance on
accessing mental health
support.'

'I had problems with
literally everything, setting
up a bank account, council
tax, NHS...'

'I started during COVID-19
so it was very isolating.'

'More information about
what the Student Union
is, how the registration/
financial side works. As the
first person in my family to
go to uni it was very much
learn on the fly.'

Mental health can be a factor in coping with any aspect of life and only 55% of respondents with low MH said they'd felt prepared for independent living. Key to this are the 2 in 5 (41%) respondents in their first year of study who found their MH had declined since starting uni.

As a comparison, 1 in 2 (50%) final year students and 2 in 5 (39%) postgraduates reported that their MH had declined. Across all students, 3 in 10 (29%) respondents said their MH had not changed, and 1 in 4 (23%) had seen improvements in their MH since starting university.

Among first year undergraduates 3 in 20 (15%) disclosed they have been diagnosed with a MH condition prior to starting university (10% were diagnosed at university). The most common conditions diagnosed are:

- anxiety (43%)
- depression (34%)
- eating disorder (13%)
- ADHD (12%)

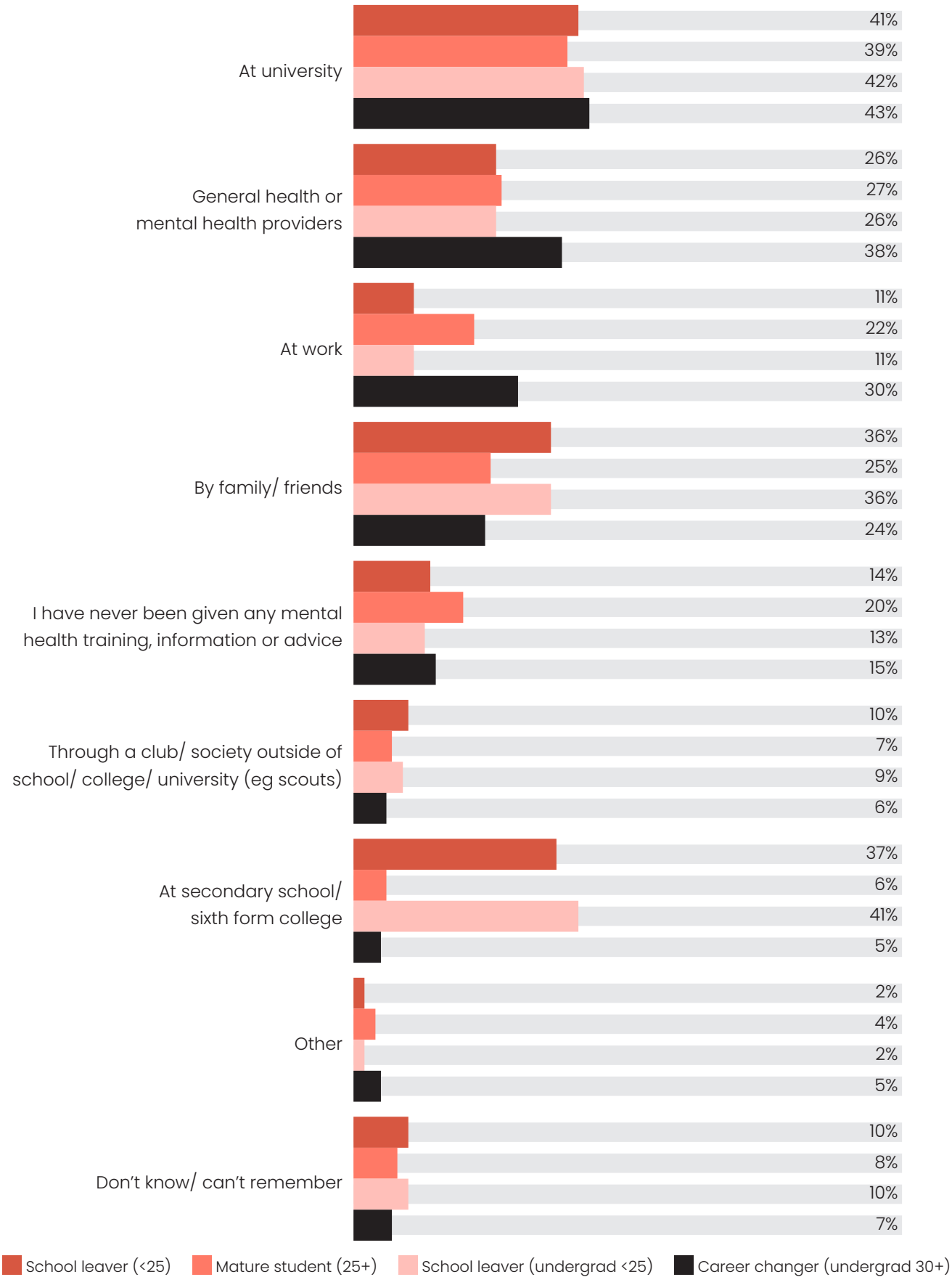
Some students will have more than one of these conditions.

Across all respondents 1 in 4 (26%) have received MH training, information and advice at secondary school or sixth form college, with far more school leavers than mature students likely to have this (37% vs 6%). These figures offer some insight into recent efforts to keep school pupils and sixth formers aware of MH issues, but also reveal how much more needs to be done.

Across all respondents, around 3 in 5 (62%) said they had felt somewhat or completely prepared for the realities of student life and this figure has hovered around the same mark year on year throughout Cibyl's student mental health research. However, those who felt they were either completely or somewhat unprepared had risen slightly to nearly 1 in 4 (23%), compared with last year when 1 in 5 (21%) felt this way.

Where have you been given mental health training, information or advice, if anywhere?

TRANSITION





Across the UK, who is going to university?

More than 41% of UK 18-year-olds (316,850) applied to go to university in 2024, up on 2023 and the second highest number of record, according to figures released by the Universities and Colleges Admissions Service ([UCAS](#)). This represents a slight drop from 2023's figures, but reflects an upward trend from the 38% of UK 18-year-olds who applied in 2019.

In another notable trend over the last decade, the number of 18-year-old students applying from disadvantaged backgrounds* has risen 30% to 37,220, up 2% on last year.

UCAS data indicates the percentage of these students applying to the most selective (highest tariff) universities has also increased from 21,020 in 2023 to 21,950 in 2024, a rise of 4.4%.

*Polar 4 Quintile 1 – see explanation page 153.

At the time of compiling the report, the number of overseas students applying for sponsored study visas had dropped year on year to 87,300, according to figures released by the [UK Government](#). Between January and June 2024 applications were down 17% from 2023 and comparing monthly applications, 28,200 were made in June 2024, while 38,900 were made in June 2023.

Traditionally applications peak through the summer, with another rise at the end of the calendar year. Rule changes related to international students bringing family members or dependents on a student visa are considered to be one of the reasons behind the change.

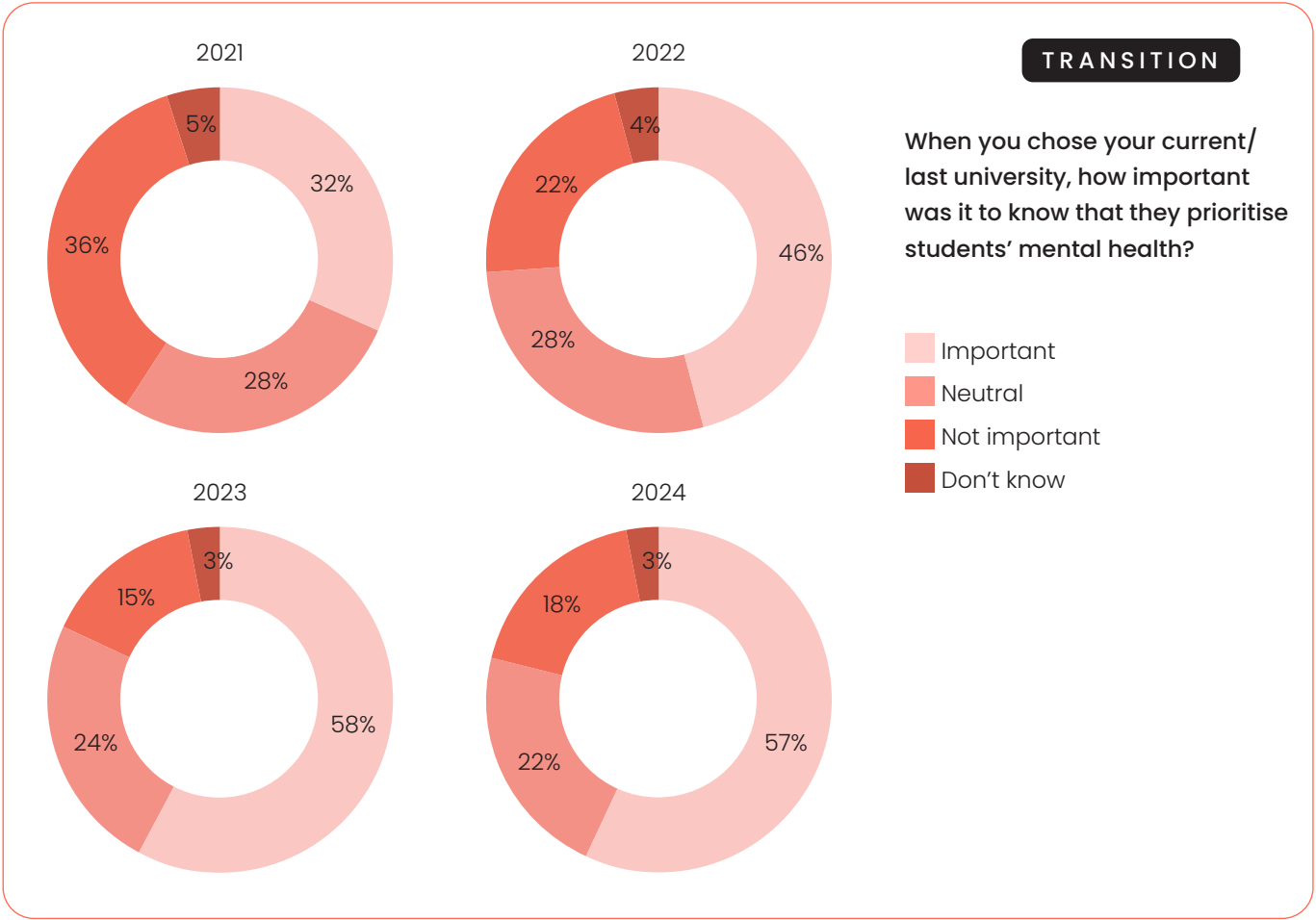
Living in a new situation

Finding solid new friendships and shouldering additional responsibilities, such as food shopping, cooking, laundry, managing finances and for many, part-time work, can lead to MH difficulties even before the new challenges of self-directed study are taken into account.

We asked how important prospective universities' good MH provision was to students, and whether that provision had influenced their choice of uni when they were in school or college.

In 2021 across the age ranges 32% (1 in 3) said robust university MH provision was important or very important to their choices, and this rose in 2022 to 46% and rose again to 58% in 2023 levelling down slightly in 2024 to 57%.

Reflecting that, the percentage of respondents placing little or no importance to good MH provision as part of their choice stood at 36% in 2021, 22% in 2022, 15% in 2023 and 18% in 2024.



However, looking solely at first year undergraduate responses, those choosing universities with good MH support has risen year on year, plateauing in 2024:

- 2021 – 2 in 5 (39%)
- 2022 – 1 in 2 (50%)
- 2023 – 3 in 5 (60%)
- 2024 – 3 in 5 (60%)

Despite the cost of accommodation only 15% of first year students continued to live in their childhood home, a figure that has remained stable since 2021 (a time when COVID-19 was still a factor) when 21% had such living arrangements.

There’s a small discrepancy between the 15% of first year respondents who continue live in their childhood home and the 17% of respondents across all ages who live with their parents and 1 in 5 (20%) school leavers (under 25s) live with their parents compared with 6% of mature students (over 25s).

These figures will include:

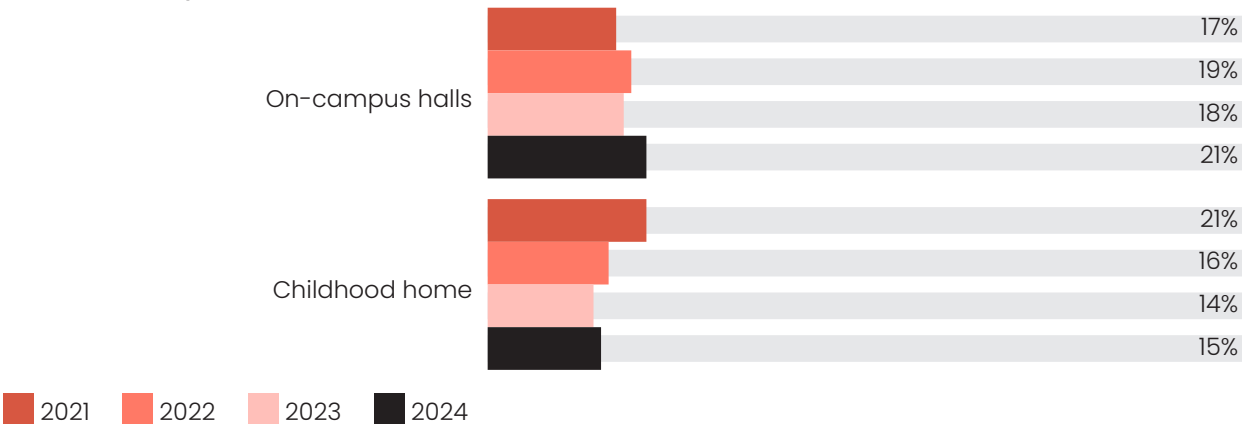
- students who continue living in their childhood home beyond their first year of study
- parents moving and setting up a new family home closer to the university
- students with caring responsibilities*
- career changers (only 3% of whom live with their parents).

Across all year groups, just 2% of respondents live with siblings outside the family home, and a further 2% live with other family members.

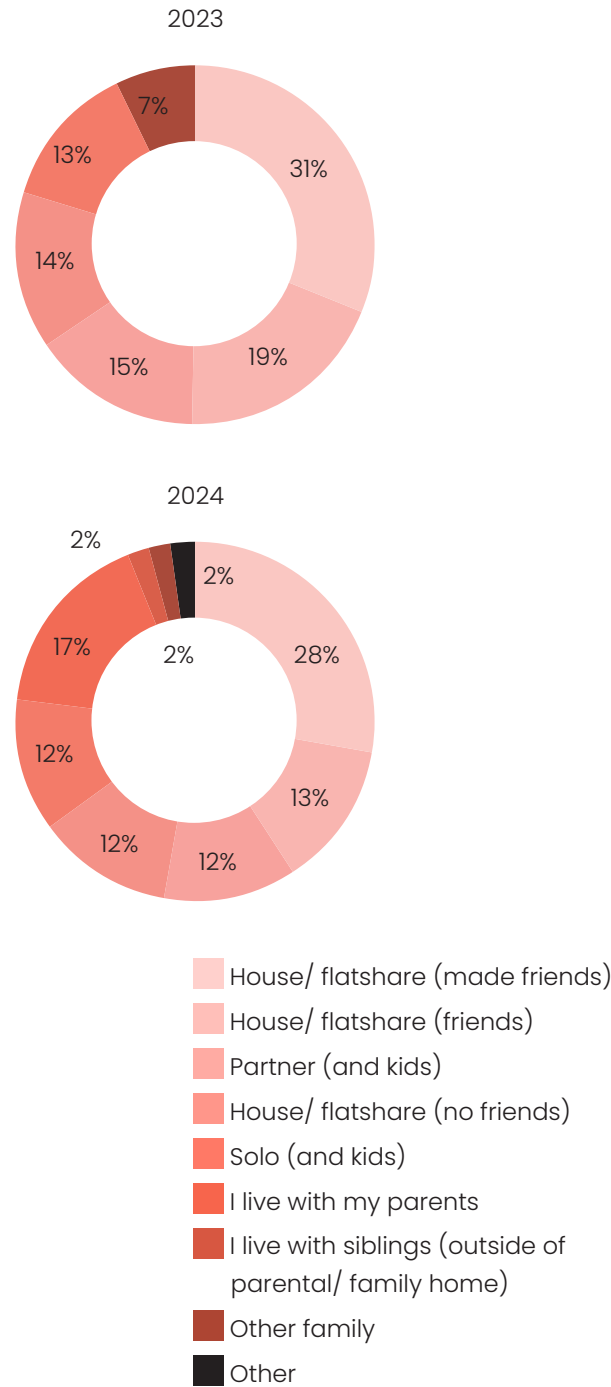
*England and Wales Census 2021: 215,380 young adult carers aged 18–25.

What type of accommodation are you living in during term-time this academic year?

TRANSITION



Which statement best describes who you live with?



2024

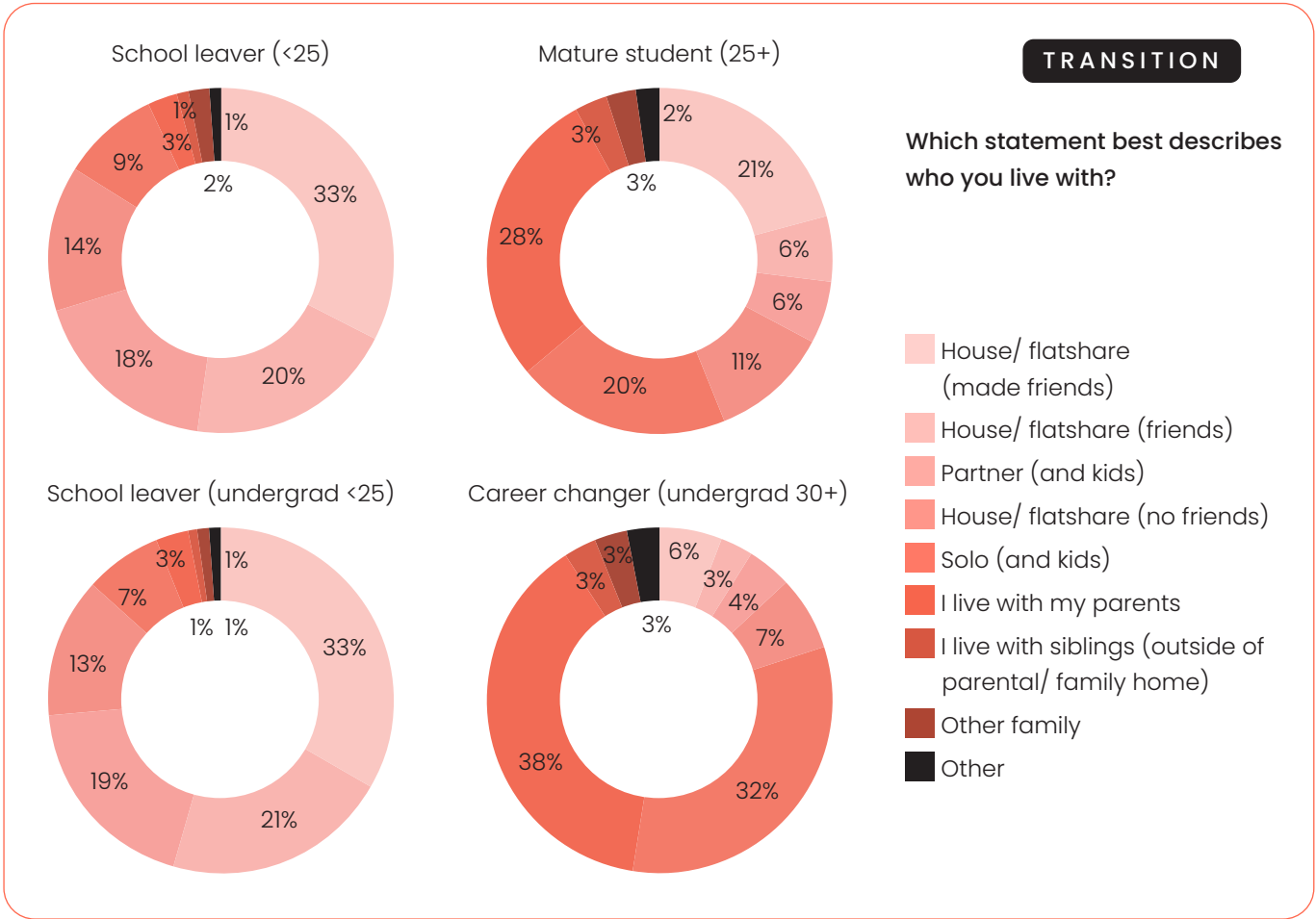
This year, 7 in 10 (69%) student respondents were school leavers (under 25 years old) with over 25s making up the remaining 3 in 10 (31%). It’s notable that in the first year of our mental health (MH) study (2021) 78% of respondents were school leavers and 22% were older students.

This year’s respondents were:

- studying full-time 85%
- part-time students 4%
- completing a placement year 1%
- completing a year abroad as part of their degree 1%
- completing an apprenticeship 1%
- graduates 7%

They were studying in:

- England 87%
- Scotland 7%
- Wales 5%
- Northern Ireland 1%



What eases the transition to university life?

Traditionally universities lay on many social events for students starting at uni, from freshers weeks to networking opportunities through societies to MH support, something we explore further in Belonging at university (pages 84 to 101).

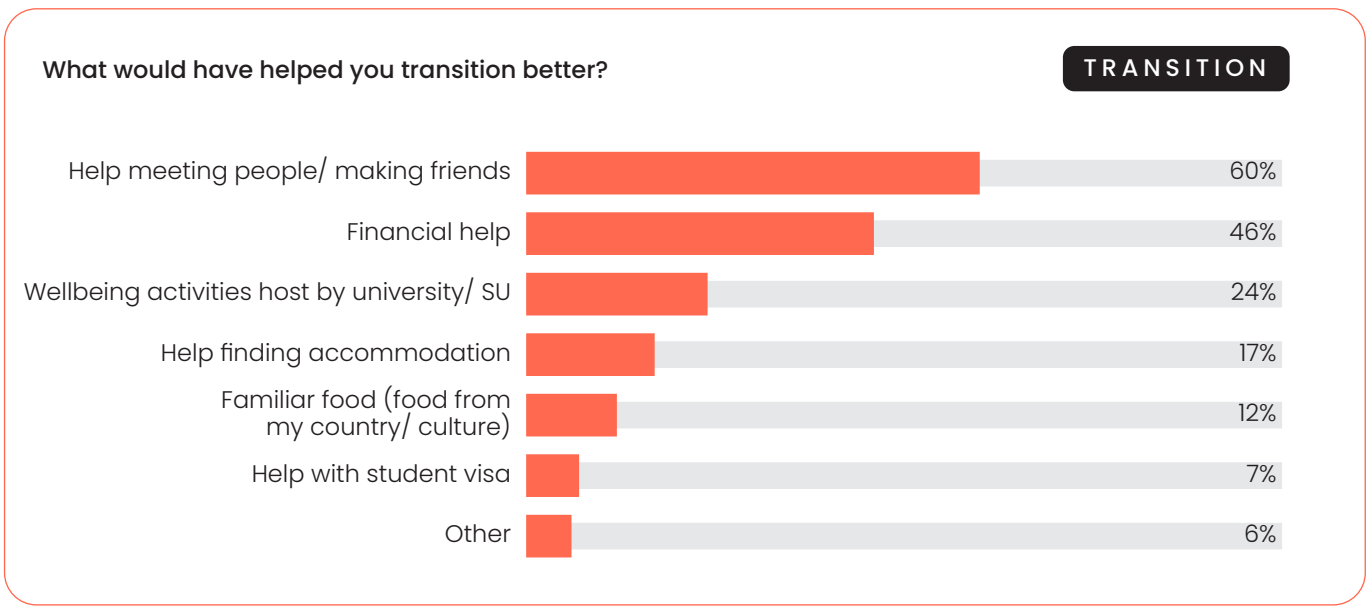
Despite all these opportunities, 3 in 5 students (60%) said greater help meeting people and making friends would have eased their transition to university. And this was felt more keenly among school leavers (2 in 3 or 67%) than among over 25s, (2 in 5 or 44%).

Nearly half our respondents (46%) would have liked more financial assistance and a larger percentage of students aged over 25 vs school leavers (50% vs 44%) pointed to this as potentially easing their transition to uni.

Specific to overseas students, more help with student visas would have been appreciated by 7% of respondents.

To put this in context, 1 in 4 (25%) of our respondents indicated they were Indian Asian (14%) or Black African (11%) and a further 1 in 4 (24%) respondents, including domestic students, were from other ethnic groups.

A significant number of respondents felt that familiar food from their country or culture would have eased the initial transition to university (12%). Relocating to an area with lower levels of diversity than the location they grew up in might also account for some of these responses.





What is low MH?

Students who met all three of Cibyl’s criteria were defined as having low MH, (based on WHO-5 scores, MH symptoms and their Office for National Statistics (ONS) wellbeing score – see page 152 for full explanation.

The highest incidence of low mental health scores came from students:

- with an existing MH disability (51%)
- who were non-binary (47%)
- who were LGBTQ+ (38%)
- who came from low SE backgrounds (38%).

In addition:

- more women than men had low MH scores (31% vs 22%)
- more white students had low MH scores than Asian or Black students (30% vs 24%/21%)

There was also an association between low MH scores and students who think their university is unsupportive.

Friendships, loneliness and money worries

Social anxiety and the cost of living are two factors students with low MH cite as barriers to coping strategies, so those already managing poor MH when they start uni can find themselves in something of a vicious circle. They don’t go out because of how they feel or because money is tight, and don’t meet new friends because they are not going out.

This is something we examine in more detail in our section Belonging at university.

When we asked all respondents how much they had worried about making friends across the year, 1 in 4 (27%) said they never worried, while for 1 in 3 (34%) this was a daily or weekly worry. Across the age divide mature students (over 25s) worried less about securing friendships than school leavers (under 25s). More than half (53%) of older respondents said they never worried, or worried only once or twice a year, compared with 2 in 5 (42%) school leavers.



REASONS FOR NOT ENGAGING WITH UNIVERSITY SOCIAL ACTIVITIES

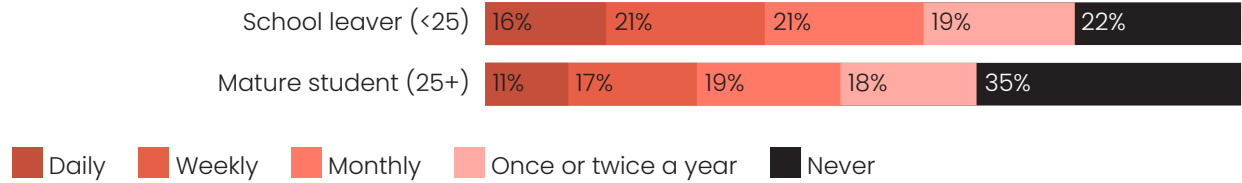
‘My **health** does not allow me the extra time and energy to participate.’

‘I didn’t sign up in the first year due to **COVID** and then it became difficult since.’

‘I’m **too old** at 27 – these are run by and for young undergraduates (19-21).’

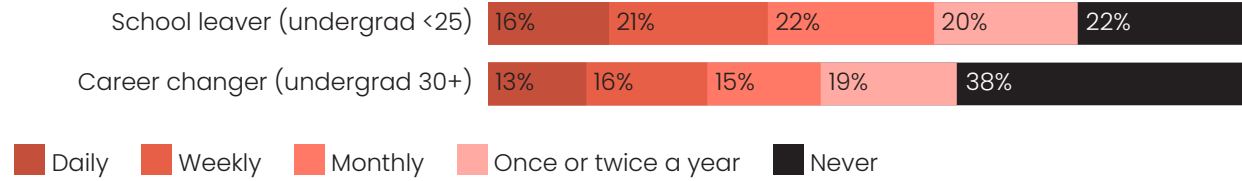
Thinking back over the last 12 months, how often have you experienced the following? Worrying about making friends

TRANSITION



Thinking back over the last 12 months, how often have you experienced the following? Worrying about making friends

TRANSITION





WHAT WOULD HAVE HELPED YOUR TRANSITION TO UNIVERSITY?

"A full year **travel pass** at lower prices for students not in accommodation close to uni.

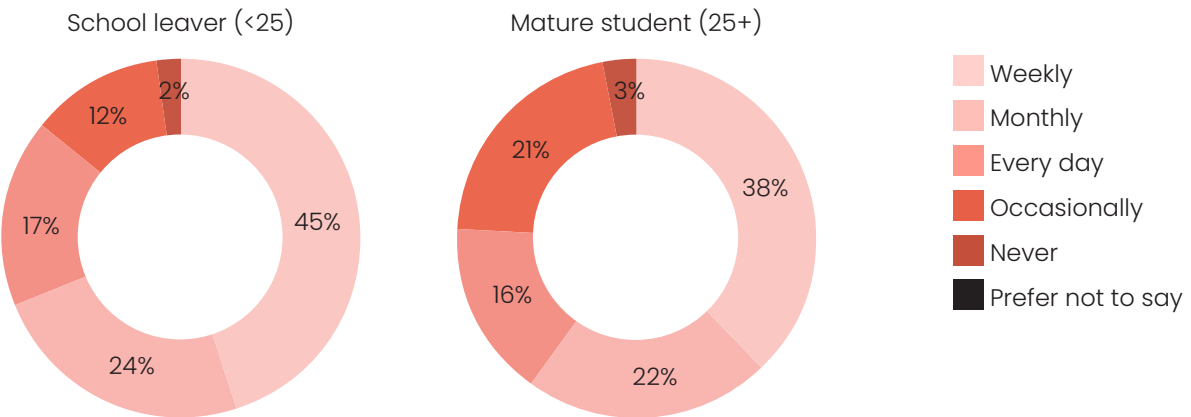
'**Learning** how to **cook**.'

'**Meeting** other mature students.'

'I could not afford to attend freshers week so I didn't make friends until third year. Help with transport costs would have assisted **better introductions**.'

How often do you eat unhealthy foods? By unhealthy foods we mean things like takeaway foods, sugary drinks and ultra-processed meals like microwave meals etc

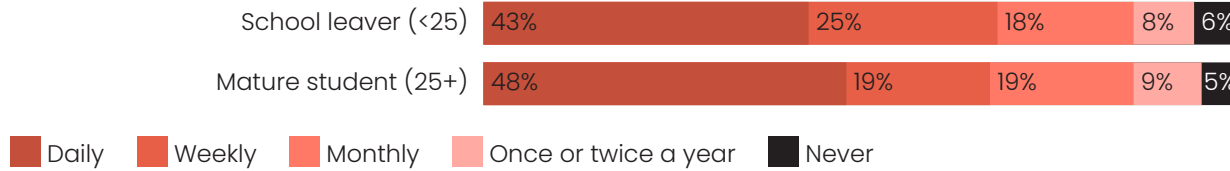
TRANSITION



Despite only half of respondents (46%) indicating they would have liked more financial assistance to ease the transition to uni, 2 in 3 (67%) respondents across all age groups revealed they had worried about money either daily or weekly in the last year. A cushioned few (6%) never worried about money. These figures were similar whether students were school leavers (under 25-year-olds) or mature students (over-25s).

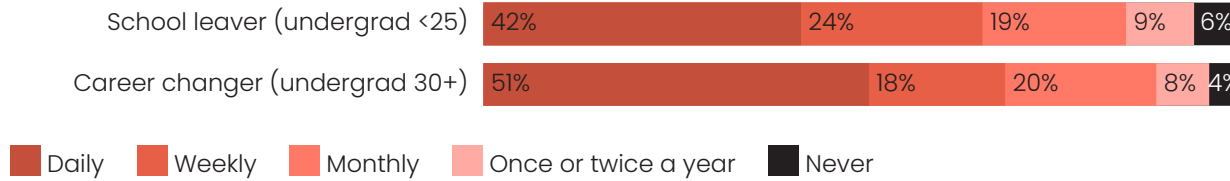
Thinking back over the last 12 months, how often have you experienced the following? Worrying about money

TRANSITION



Thinking back over the last 12 months, how often have you experienced the following? Worrying about money

TRANSITION



Of the 91% of respondents who continued with the survey's food-related questions, 2 in 5 students (39%) said they were eating less healthily and 1 in 4 (26%) said they ate more healthily since starting uni, and these percentages were similar whether a respondent was a school leaver or a mature student.

The survey also compared responses from school leavers and career changers (respondents who had gone to university in later life because they were changing career). All respondents in this data set were undergraduates (including integrated masters students) older than 29 years (career changers) or younger than 25 (school leavers).

THE IMPORTANCE OF FRIENDSHIPS

Belonging at university

Having friends at university, feeling part of a friendship group and living with friends, alongside the level of support a student receives at uni, all make a difference to young people's mental health (MH). Proportionately students who feel part of a community or who feel their university is supportive are less likely have low MH scores. In contrast, almost 2 in 3 students who feel unsupported have low MH outcomes.



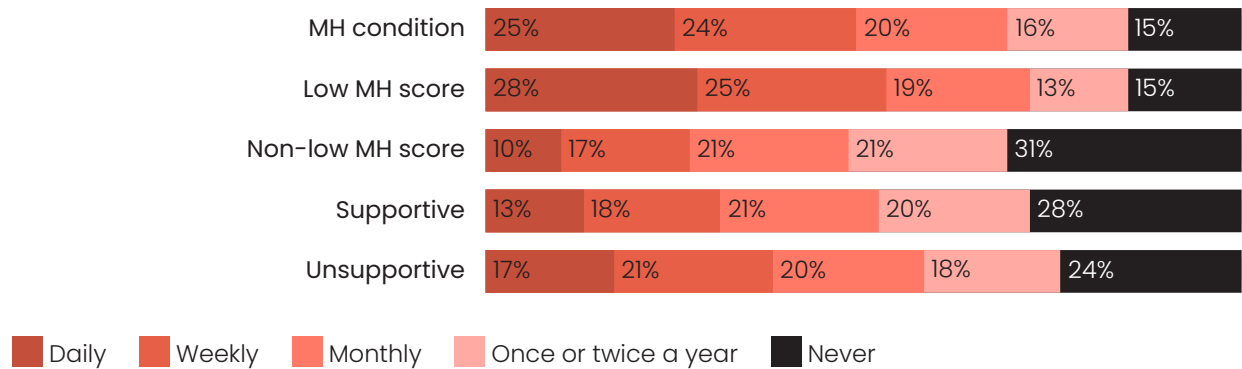
The Cibyl UK Student MH Study 2024 looks at support networks in more depth on page 93.

Among respondents with low MH scores and MH conditions, fewer than 1 in 3 (31% and 27% respectively) said they never worried, or worried only once or twice a year about making friends, while more than half of respondents without a low MH score (52%) said they never or rarely worried.

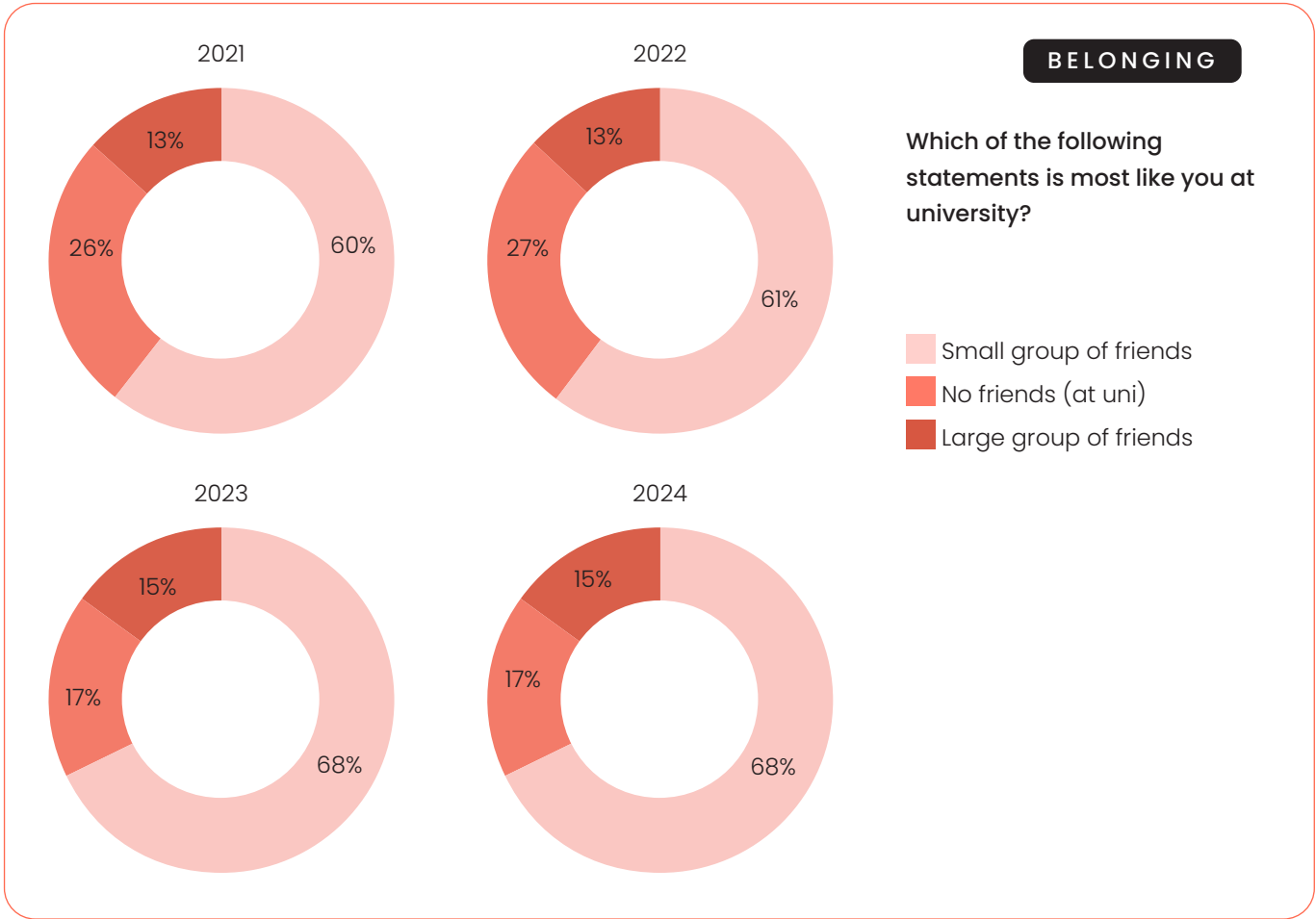
By the same token, worrying daily or weekly about making friends was far more likely to affect those with low MH scores (49%) and MH conditions (53%) than respondents without a low MH score (27%).

Thinking back over the last 12 months, how often have you experienced worrying about making friends?

BELONGING

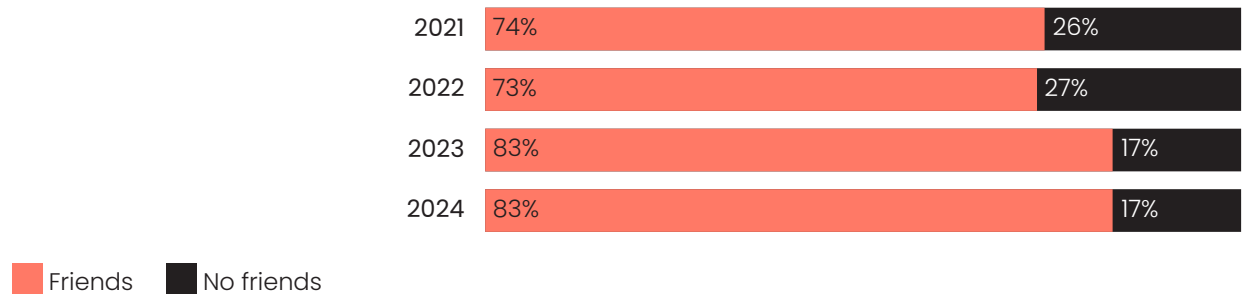


To put this in context 83% of respondents (more than 4 in 5) said they had made either a small group (68%) or large group (15%) of friends, leaving fewer than 1 in 5 (17%) respondents saying they had no friends at university. These are the same percentages as revealed during Cibyl’s 2023 survey, from a similar sized sample. The higher numbers of respondents reporting that they had no friends at uni in 2021 and 2022 (26% and 27% respectively) could be attributed to the restrictions on socialising, which significantly affected young people starting university.

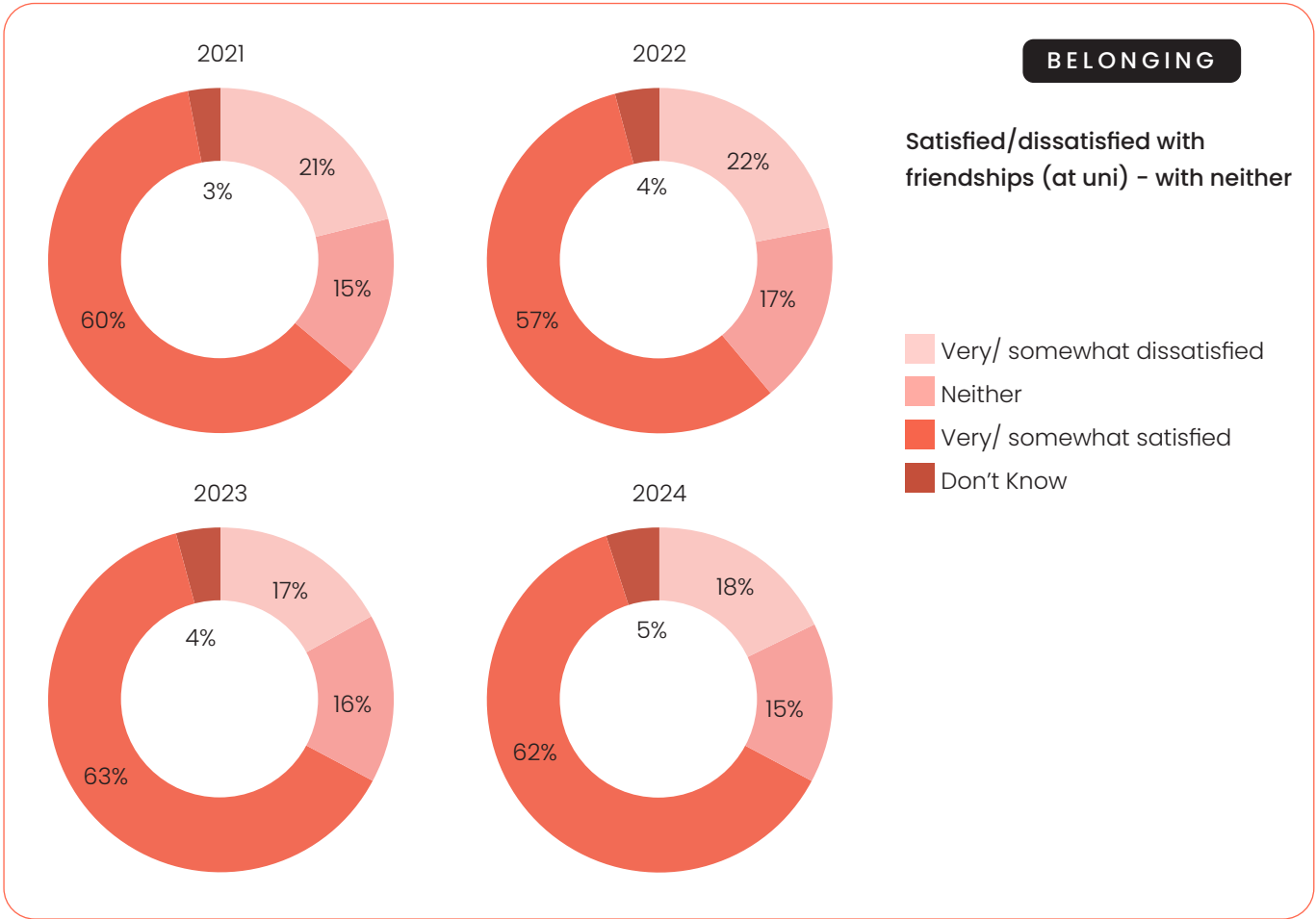


Which of the following statements is most like you at university?
Friends/ no friends at university by Research year / wave

BELONGING



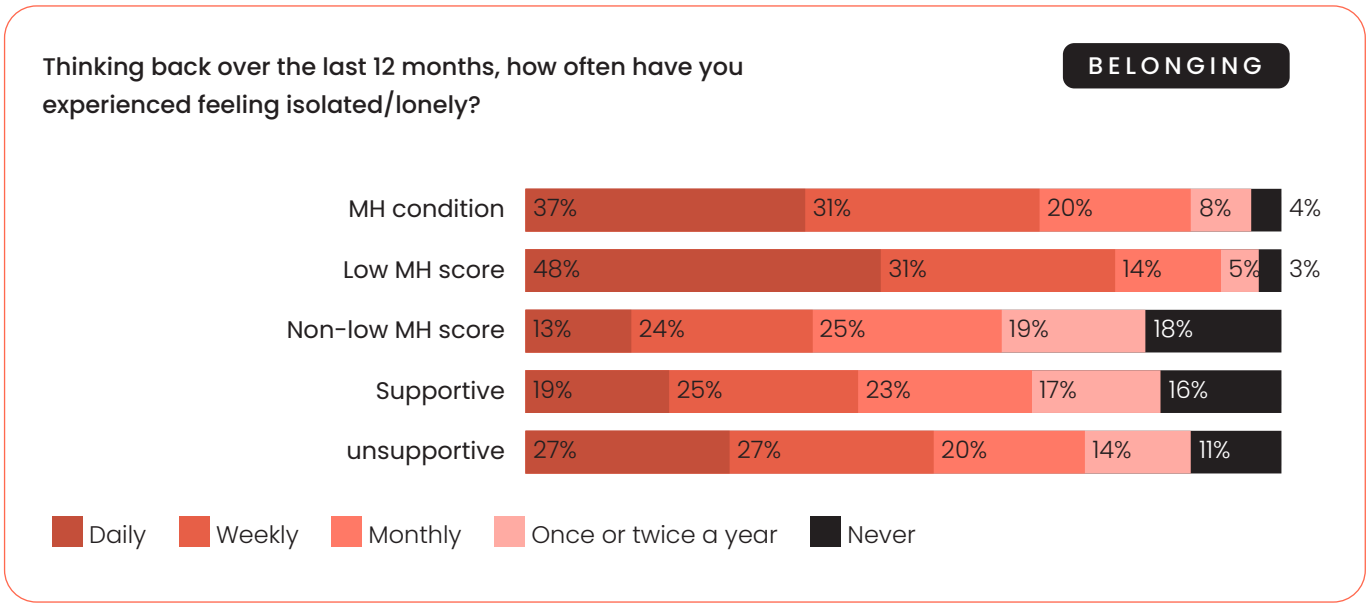
Examining the quality, rather than quantity, of student friendships, 3 in 5 (62%) respondents said they were satisfied with the friendships they had made (similar in number to those taking part in 2023’s survey, 63%), while 1 in 5 (18%) were dissatisfied (17% in 2023). The remaining 1 in 5 respondents either said they did not know how they felt about their friendships (5%) or were neither satisfied nor dissatisfied (15%).



It is possible to feel friendless or alone despite daily engagement with other people, so Cibyl asked how often respondents had felt isolated or lonely across the 12 months prior to the survey.

Among those with a low MH score or MH condition:

- 4 in 5 (79%) and 2 in 3 (68%) respectively said they had experienced loneliness/isolation either daily or weekly, compared with fewer than 2 in 5 (37%) respondents with a non-low MH score.
- 1 in 8 (12%) and 1 in 12 (8%) respectively said they had never experienced loneliness/isolation or had experienced it once or twice a year, compared with 2 in 5 (37%) respondents who had a non-low MH score.



Looking at these responses among school leavers:

- more than half (52%) felt isolated or lonely daily or weekly in the last year, compared with 2 in 5 (42%) mature students.
- 1 in 4 (26%) school leavers said they never or rarely felt isolated or lonely compared with nearly 2 in 5 (37%) of mature students.

Looking at the experience of school leavers (undergrads <25) compared to that of career changers (undergrads 30+):

- more than half (52%) felt isolated or lonely daily or weekly in the last year, compared with 2 in 5 (42%) career changers
- 1 in 4 (26%) school leavers said they never or rarely felt isolated or lonely compared with nearly 2 in 5 (38%) of career changers.

Living arrangements

Learning to live, study and work with people from different backgrounds can be a big deal whether a student is leaving a parental home for the first time, or leaving school and starting to shoulder more adult responsibilities within their family home.

Our research was conducted between October 2023 and February 2024, so typical housemates could be:

- first years (freshers) living in allocated student halls still establishing friendships
- course mates rather than close friends
- friends initiated through social activities
- friends forged through any combination of the above, especially for respondents in middle or final year of study.

A significant number of students (1 in 8 or 12%) reported that none of their housemates was a friend.

As might be expected, even more first years (16%) and those who were studying abroad as part of their course at the time of the survey (15%) reported not living with friends probably because respondents had not had time to forge true friendships. Fewer middle year students (10%) and graduates (5%), reported not having friends among housemates, however, 1 in 8 (12%) final year students also said they did not live with friends.

Why do some students have no friends? Besides the explanations above, many students move from university halls at the end of their first academic year and start living in privately rented shared houses for subsequent years of study. Landlords and agents may not advertise these until January, but word of mouth filters through university networks far earlier. Students in their final year living in the best located houses and rooms start being lobbied by would-be tenants in the autumn term almost a whole year before they graduate.

Last-minute decisions can leave students living in shared houses further out from the university or in undesirable locations.

Respondents, even those who make an early decision about where to live and with whom, could find themselves living with housemates who were friends, but those friendships have cooled. They may have started living with friends who have:

- moved out to study abroad for a year
- moved out after graduation.

In either case vacated rooms could be re-let to non-friends.

Older students and career changers (especially those with children) are more likely to have established a home of their own than younger respondents.

Nearly half of over-25s (48%) and 7 in 10 (70%) career changers indicated they either lived solo or with a partner. This is in contrast with the 1 in 8 (12%) under-25s in that position.

Friendships and conflicts at home

It might seem a rite of passage for a student to live with friends or a friendship group rather than with parents. To be able to come and go without explanation, eat whatever whenever, study, talk or socialise deep into the night, sleep in late or just hang out is all part of growing up. But it is worth remembering that 1 in 5 (20%) school leavers and 1 in 20 (6%) mature students continue to live with their parents while they are at uni, and a further 4% overall live with either siblings or other family members outside the parental home.

While most respondents seem to get along within their household, there's no guarantee of harmony, whoever students live with. Stories about people helping themselves to housemates' food and clothes, or never cleaning up after themselves in the kitchen or bathroom, are based in fact.

BELONGING

Living arrangements



Student Minds online help and resources

Cibyl's partner in this report, [Student Minds](#), offers a number of support options through its blog and advice site [Student Space](#).

Clinical Lead for Student Space Gareth Hughes offers short-read tips to help build a social network, make new friends and feel part of a community as well as managing stress points such as relationship breakdowns, conflicts and more.

But it’s also worth remembering arguments could be with family members or partners rather than friends or acquaintances in the same household.

Shared accommodation can lead to very different experiences:

- 1 in 3 (34%) said they never argued with housemates – 2 in 5 (40%) for mature students
- 1 in 5 (22%) school leavers argued just once or twice a year – 21% for mature students.
- 1 in 11 (9%) across all age groups said they argued with housemates daily
- 3 in 20 (15%) school leavers had arguments within their household weekly – dropping to 12% for mature students.

Support networks

Friendships are important no matter what age or stage of life, and when people suffer MH difficulties, and particularly when a student moves away from family, they can be vital.

More than 2 in 3 (69%) respondents with a MH condition, more than half of those with low MH scores (55%) and without a low MH score (57%) have talked to a friend, partner or colleague about their MH difficulties.

Almost 3 in 5 (57%) people with a MH condition and close to half (45%) of respondents with non-low MH scores have spoken to a family member about their MH difficulties, though among those with low MH scores, only 2 in 5 (40%) chooses a family member as their confidante.

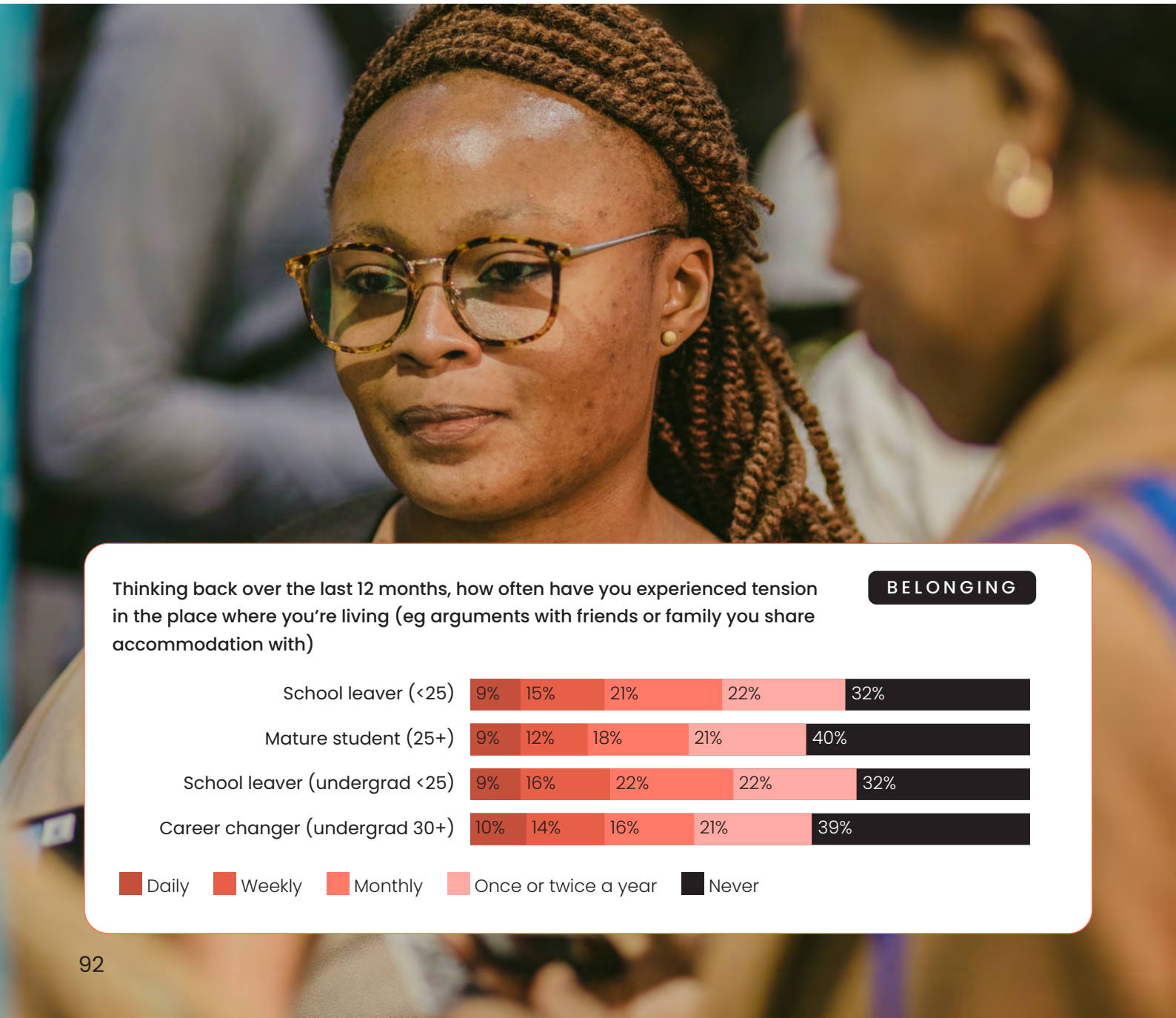
Homelife, while important, is not the only source of support available to undergraduate and postgraduate students. Among respondents with a MH condition:

- nearly half (47%) had spoken to someone from their university’s support team – eg medical, MH or wellbeing services
- almost 2 in 3 (64%) had spoken to an external health provider, such as a GP or therapist.

Across the board, respondents with low MH scores were less likely than those with a MH condition to have spoken to someone about the MH difficulties they were managing and nearly 1 in 5 (18%) said they had not sought advice from anyone about their MH.

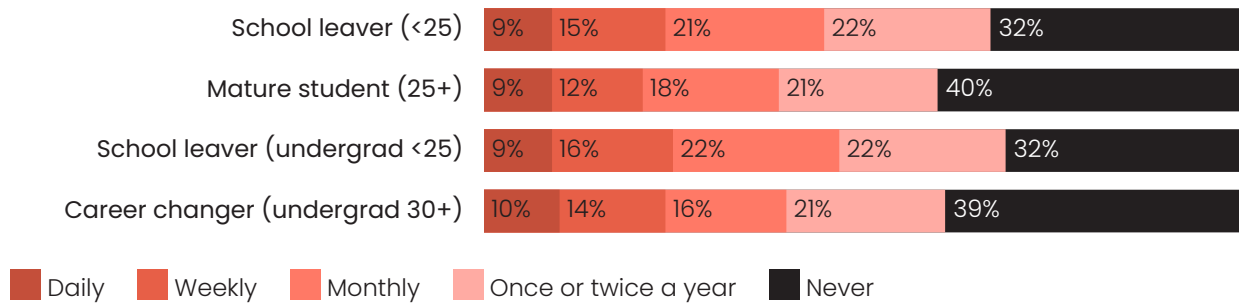
Over the four years of our study there has has been an uplift in the number of student respondents saying their university supports people’s MH very or fairly well – from 47% (1 in 2) in 2021 to 57% (3 in 5) in 2024. There’s been a corresponding decline in those saying their university does not support people well, from 21% (1 in 5) to 17% (1 in 6) in 2024.

The different kinds of support provided by universities, employers and external sources are detailed throughout the Cibyl Student Mental Health Study 2024.



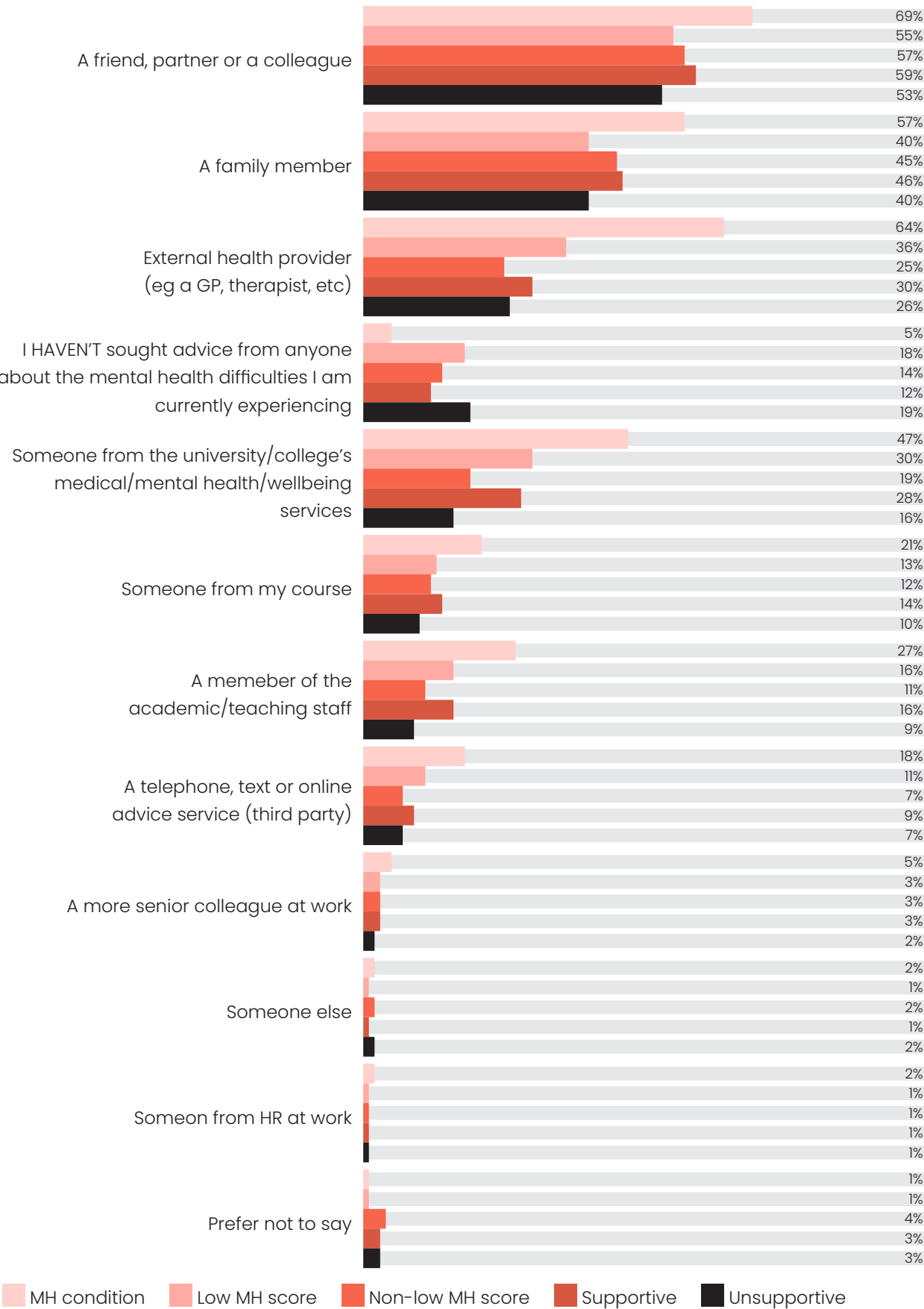
Thinking back over the last 12 months, how often have you experienced tension in the place where you’re living (eg arguments with friends or family you share accommodation with)

BELONGING



Who, if anyone, have you spoken to about your mental health difficulties

BELONGING



What do we mean by a supportive university?

Cibyl divides support at university into two categories and all criteria needed to be met for an environment to be categorised either supportive or unsupportive.

Most respondents were therefore in neither supportive nor unsupportive environments.

Direct support

The practical support a university provides – eg caring university environment and MH services on offer.

Criteria

- Generally supportive of students' MH
- +
- University is supportive of respondent's MH
- +
- Able to study in a way that maintains good MH
- +
- Know where to access MH support services (at uni).

The questions Cibyl asked:

- How well does/did your university support people who experience challenges with their MH in general?
- My university is doing everything possible to support my mental wellbeing at the moment.
- I feel empowered to study in a way that helps me maintain good MH.
- I know where to go to get help for myself or a friend who is experiencing MH difficulties.

Indirect support

The emotional support received through friends, family and student peer group (creating a sense of community/ belonging).

Criteria

- Feels connected to other students
- +
- Has friends at university
- +
- Involved in social activities
- +
- Lives with friends or family

The questions Cibyl asked:

- I feel connected with my fellow students.
- Which of the following statements is most like you at university?
- Do you normally take part in any of the following social activities at university?
- Which statement best describes who you live with?

Whose mental health is most affected at university and why?

Categorising support networks – or lack of them – and examining which students have low MH enables Cibyl to detail who may slip through university safety nets and how to address the gaps in support.

Year on year the report has seen a rise in the number of undergraduates reporting that their MH has declined since starting university, from 2 in 5 (40%) in 2021 to nearly 1 in 2 (46%) in 2024.

Among all respondents (including graduates) this figure sits at 44%, and in the context of:

- 3 in 10 (29%) who reported their MH was unchanged since starting uni
- 1 in 4 (23%) who said their MH had improved
- 1 in 20 (5%) respondents who preferred not to say how their MH had changed.

Looking across year groups, 1 in 2 (50%) of final year and 48% of middle years respondents reported a decline in their MH since starting university – this could be because they started university during the pandemic, with all its restrictions, or because of additional stresses in those years, such as exams, dissertation deadlines and finding a job after graduating. It's notable that 2 in 5 (39%) postgraduate respondents reported a decline, a similar figure to those in first year (41%).

The incidence of low MH* is spread more evenly across the years, at around 3 in 10 (29% in first and middle years, 31% in final year), but this falls to 2 in 10 (22%) among postgraduates.

Looking at the percentage of all students reporting low MH scores, just over 1 in 4 (27%) of respondents have such issues. However, this doesn't tell the full story and further analysis of the Cibyl UK Student MH Study 2024 shows why.

Only 1 in 10 (11%) students who feel supported by their universities or communities have low MH scores, while almost 2 in 3 (64%) unsupported students have low MH scores.

There's a huge discrepancy in who taps into the support and where that support comes from depending on background, such as gender, socio economic group and ethnicity.

Across all student respondents 1 in 5 (20%) have had direct support and 20% have had indirect support. However, while students from high social economic (SE) and low SE backgrounds



1 in 2

undergraduates
report their MH
has declined since
starting university

1 in 4

say their MH
has improved

equally report having direct university support (17% and 16% respectively) those from high SE backgrounds are three times more likely (35%) to have indirect (ie community) support than those from low SE backgrounds (11%) and these are respectively the highest and lowest levels of indirect support across any demographic.

This is a wider gap than last year (2023), when students from high SE backgrounds had indirect support levels at 32% and those from low socio-economic backgrounds had half that level (16%) – still the highest and the lowest levels of indirect support reported.

In 2024 students who were non-binary reported the lowest levels of direct support (11%), along with those who were LGBTQ+ (15%).

To compare these figures with respondents across all demographics (and including those seeking work) 1 in 4 (27%) on average had low MH*.

This varied widely. Unsurprisingly the greatest incidence of low MH was among those who had a MH disability (51%) but close behind respondents who were:

- non-binary 47%
- LGBTQ+ 38%
- from low SE backgrounds 38%
- seeking work 37%
- women 31%

Lowest levels were among respondents who were:

- Asian 24%
- from high SE backgrounds 23%
- men 22%
- Black 21%

Some respondents will fall into more than one of these categories.

Using support and strategies

Around 3 in 20 of all respondents don't talk to anyone about the MH difficulties they experience, and this figure has remained steady year on year, until 2024, when it declined slightly from 17% in years 2021, 2022 and 2023, to 15%.

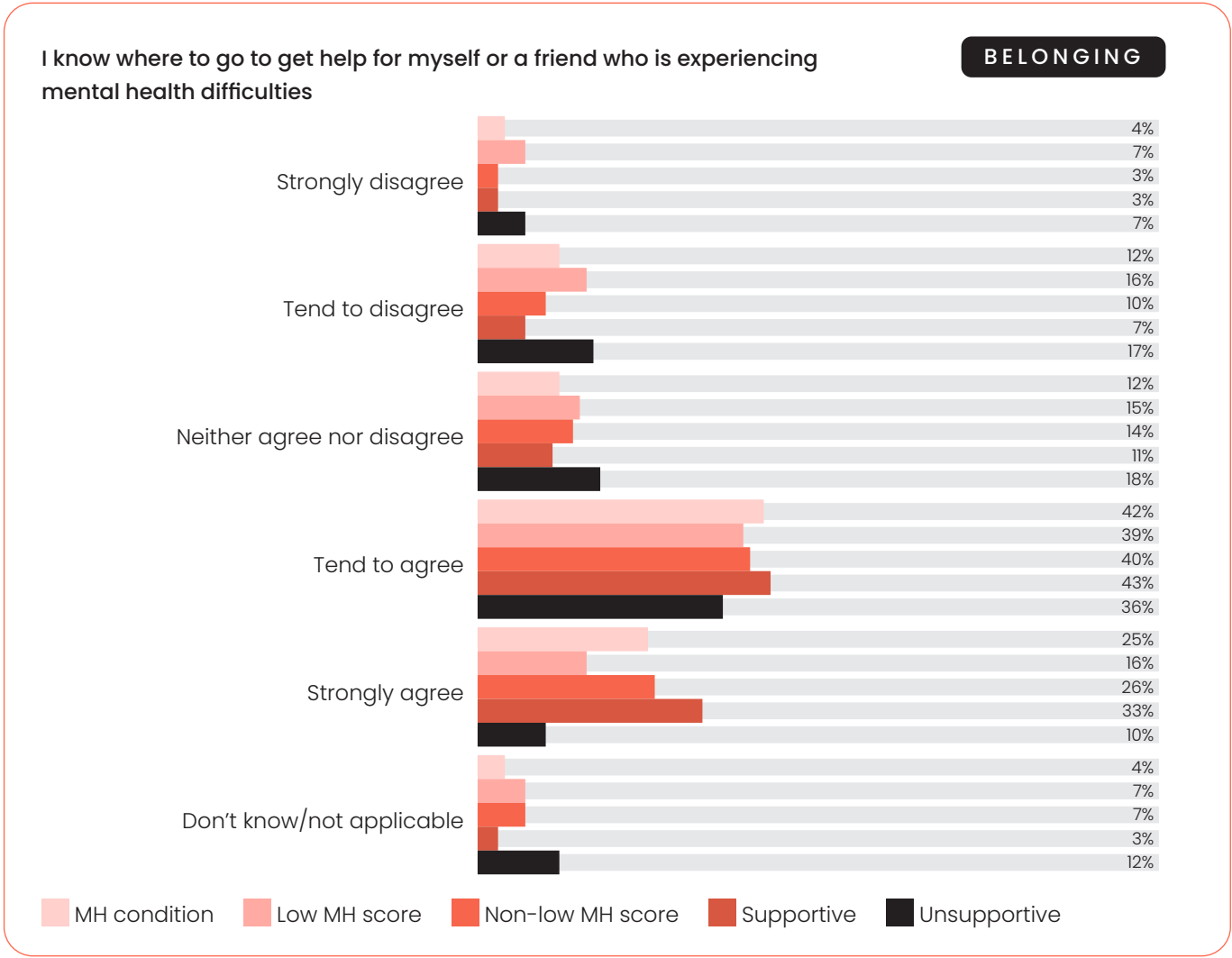
The Cibyl UK Student MH Study 2024 examines what's on offer to students in the section The inside story (p18-33), but it is notable that most respondents continue to employ strategies for staying mentally healthy in times of pressure.

Top strategies across the board include listening to music, self-care, getting enough sleep and exercise. But usage differs significantly with the largest discrepancies between low MH respondents vs those with other levels of MH were found in:

- thinking positively/using mindfulness (23% vs 38%) a 15% difference
- getting enough sleep (34% vs 48%) a 14% difference
- eating healthily (19% vs 32%) a 13% difference
- exercising (30% vs 43%) a 13% difference.

It's also notable that three times as many respondents with low MH (7%) vs those with other levels of MH (2%) didn't use any strategies for staying mentally healthy during times of pressure.

There is more exploration of wellbeing, MH strategies and support services in the section Working and mental health (p104-125).



Friendship and self-knowledge are important when a person suffers MH challenges, by virtue of either knowing where to get help oneself, or by knowing where to point a friend needing more help – 2 in 3 (63%) respondents agreed with this, while 3 in 20 (15%) did not.

However, a lot rides on respondents simply feeling connected to their fellow students.

While nearly half (46%) of all respondents agreed they felt connected with fellow students, 3 in 10 (29%) disagreed (22% felt neither, and 3% said they either didn't know or the question was not applicable). The discrepancy widens according to whether a respondent has a low MH score, or non-low MH score, and between those who feel supported and unsupported at uni (see the explanation on p71).

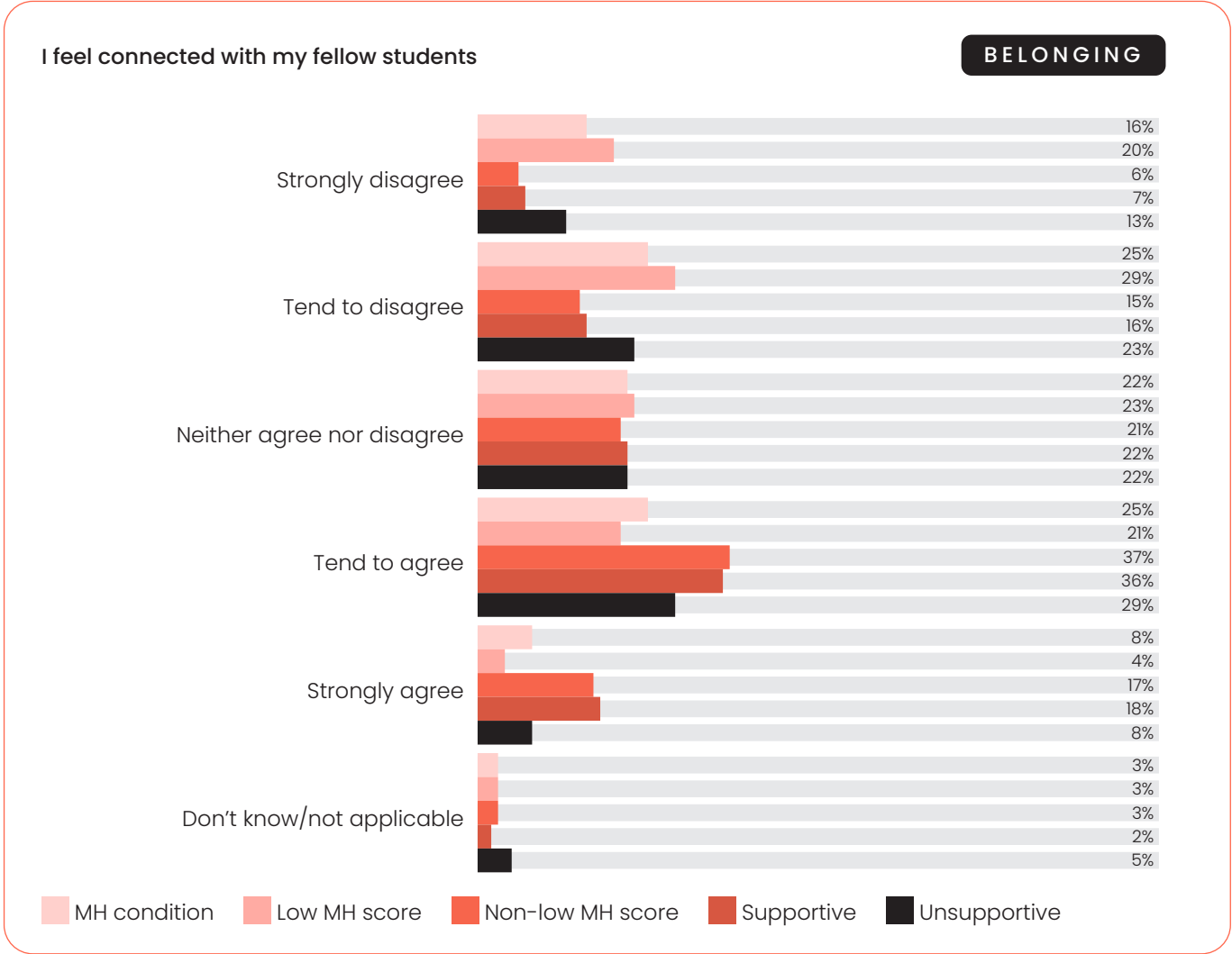


Feeling connected, low MH score vs non-low MH score

- Agree 25% vs 54%
- Disagree 49% vs 21%

Feeling connected, unsupportive vs supportive university

- Agree 37% vs 54%
- Disagree 36% vs 23%



*For definitions of low MH see page 152.

SHAPING THE FUTURE

Improving mental health for students and graduates

Cibyl entered its fourth year studying young adults' mental health (MH) in a world full of economic, climate and geopolitical turmoil. On-campus protests have been a visible manifestation of how seriously students take social issues beyond their immediate sphere. Closer to home, financial considerations are very much to the fore. Across all age groups 2 in 3 survey respondents worried about money either daily or weekly in the last year, while fewer than 1 in 20 never worried about money. Respondents even put cost-of-living worries ahead of concerns about MH and healthcare, (see page 13).



Like their predecessors, young adults attend university to learn, gain independence and forge new friendships while expanding work opportunities and career options. How they define success is different to previous generations' aspirations. How universities and employers help them achieve that success – however defined – has been changing too.

We can see throughout the survey that students at supportive universities and work, and those who feel part of a community, fare better than those who don't feel supported. The new opportunities and horizons opened up by attending university can be narrowed by poor MH. On the plus side, university MH support is reaching more students – 3 in 5 think their university supports people with MH difficulties – a 20% increase since 2021, and more than half employed graduates say their employer supports people with MH challenges well (see page 143).

Even with economic concerns ranking high on the list of worries, more graduates than ever now place importance on future employers' MH provision (see page 25). Among the employed graduate respondents fewer had taken time out for MH challenges, than those who had, but these respondents are at an early career stage, so future pressures may bring change and employers should not be complacent. On the plus side, half of respondents agree that they feel empowered to work in a way that helps them maintain good MH and more than half feel connected with colleagues (see pages 144 and 134).

Continuing the work started in the first Cibyl UK Student Mental Health Study in 2021, Cibyl's 2024 study offers more detailed and more in-depth views of students' and graduates' MH challenges. There is now a bank of information and insight into year-on-year changes.

Good moves have been made and the five principles of Cibyl's previous Student Mental Health Studies KNOW SUPPORT TEACH CONNECT CULTURE stand as pillars still, supporting brighter, happier, more hopeful MH for young people as they build their future.

1 Know

New questions this year centre around whether respondents with MH difficulties consider them a disability and the details behind respondents' lifestyle and eating habits. The challenge of job-hunting and navigating the recruitment process, plus the MH impact of managing the stress after securing a job, also come under scrutiny. Cibyl also questions how engaged respondents are at work.

Using skilled statisticians to interpret the results helps improve students' and employees' lives by enabling universities and employers to make better decisions in tune with current thinking and preferences.

It's not news that stress levels rise during the transitions into university and the work environment nor that students and graduates can experience MH difficulties as a result. But knowing which groups are likely to feel overwhelmed by certain challenges, who can manage what, and why – whether that's by demographic, inclination or lack of friendships – assists in the setting up and maintenance of effective support programmes and interventions.

How to offer support – online or in person, through friends and connections – improves access to the kind of support needed to thrive.

Economic constraints – for employers and universities as well as for employees and students – make knowing where to channel valuable resources critical. Well-intentioned help that few want to engage with is not money well spent.

Data and knowledge are forces for good used wisely, considerately and effectively. Students and graduates who are investing in their future know that financial rewards are not everything and good mental health is worth gold.

2 Support

Support is key to young adults who face MH challenges. University MH support has improved and so has students' perception and experience of it. Direct support services are just one part of helping a student manage MH challenges. Caring about students' MH and allowing them to study in ways that maintain their MH are all part of the support programme and part of the University Mental Health Charter (see page 151). A sense of community and belonging, whether at work or at uni, through course mates and colleagues, social life and home life, are another form of support. Though 3 in 10 respondents say their MH did not change after starting university, nearly 1 in 2 students see a decline in their MH at some point in their university career, particularly in middle and final years (see page 96).

In the past, report partner Universities UK (UUK) has expressed concern about limited NHS MH services, especially between term-time and 'home' support, and university and home provision. Cibyl has highlighted the lack of smooth transition from adolescent services into adulthood and sadly MH services remain under-resourced and under pressure. Separate Cibyl studies have highlighted the amount of support LGBTQ+ students and new graduate workers require also.

UUK's recent blueprint on MH highlights the importance of greater partnership between universities and the NHS to close gaps in services

and support. UUK has also published a think piece on what university leaders can do to create and maintain mentally healthy universities.

Charities such as StudentMinds, Samaritans, the LGBT+ charity Just Like Us and Jigsaw, Ireland's mental health service for young people, continue to provide invaluable support beyond NHS, employer and university provision. Closer to home, we have seen that family and friends are the first port of call for most at times when MH support is needed. Getting MH support for oneself or for a friend is also important, but the proportion of respondents saying they know where to turn has remained largely unchanged year on year. Publicising services is imperative. It is alarming to find that in 2024, 3 in 20 respondents with MH difficulties do not talk to anyone.

We know connections are key. We also know people with a low MH score do not feel connected with fellow students. Supportive universities can make a difference to that. At work, connections, and therefore support, are harder to establish, yet half of employed graduates say they do feel connected to colleagues, though 1 in 5 don't (see page 134).

Ensuring every newly graduated recruit or fresher has opportunities to foster friendships and make connections is a good starting point in the transition to work or uni. Wellbeing benefits and healthy working practices remain graduates' most-liked employer support options. Thinking of more formal assistance, students with MH difficulties are most likely to engage with university and Student Union (SU) MH support services. Their preferences within those offered are counselling services, and engagement with MH advisers, though 2 in every 3 respondents have not used any university or SU services for their MH at all (see page 27).

3 Teach

Teaching and educating young people how to support their own MH is not the sole responsibility of universities, tutors and HR departments. But helping oneself, and friends who are struggling, implies a need to learn how to do so in the first instance. Surprisingly around 1 in 6 respondents still say they have received no MH training at all, though 3 in 20 have received MH training and advice at work, 1 in 4 have had some at school or sixth form college, and 2 in 5 have been given MH training at university (see page 73).

Spotting undisclosed MH decline around peers, colleagues and friends is vital. YouTube, Instagram, TikTok and other media have been effective in teaching the wider public about hidden MH struggles. [Sport](#) has been at the forefront of some valuable lessons on this front too.

Many universities have self-help videos, podcasts and tips available to watch or download, such as the [KindMind](#) series. Others offer online and in-person wellbeing [workshops](#) led by experts to develop coping strategies, teach resilience and to boost confidence and wellbeing. In 2024's survey, 1 in 6 respondents uses these to help with their MH.

Universities UK advocates a whole-university approach to MH and wellbeing through its Stepchange report. Promoting good MH, the report's aim is to teach and enable staff and students to thrive and has been both a call to action and a framework for change.

4 Connect

Connections are a valuable element of maintaining student and graduate MH. Research shows that times of transition, when old connections can be lost and new are formed, can be critical to managing MH. Friends and colleagues make a difference to positive MH, and isolation and loneliness are predictors of MH difficulties. Around 1 in 2 employed graduate respondents feel connected with their colleagues and slightly fewer students feel connected to their uni peers. Notably only 1 in 4 students with low MH feel connected, rising to almost 2 in 5 among those who feel supported at university.

Universities already build additional interaction and inclusivity into freshers' activities. Expecting employers to do so at scale is unrealistic but making introductions for every new starter, and signposting MH support, can ease the stress associated with change and transitions and provide firm foundations for the future.

Respondents from low SE backgrounds, who have a disability, MH or other, or who are LGBTQ+, report a higher incidence of not finding it easy to make friends either at work or at uni. 1 in 3 Black or non-MH disability respondents reported no friends at work.

The University Mental Health Charter (see page 151) highlights schedules and academic staff as students' only guaranteed points of interaction at university. Social, sports and special interest groups offer further chances to connect, but participation is not compulsory. Even in a shared student apartment doors can be closed, and in the days of en-suite bathrooms, headphones, live streaming and food deliveries, a struggling student can bypass shared living spaces and a communal kitchen.

As seen on page 10, only 1 in 7 respondents never or rarely worry about money, and more than 2 in 5 say financial constraints have prevented them from doing things that help their MH.

Being able to connect in person with MH support provision, most respondents' preference, or with social groups and activities, does depend on accessibility, particularly for people who have a physical impairment or disability. Across the report including and enabling people is important to feeling connected and building friendships.

In January 2023, the Higher Education Statistics Agency (HESA) revealed that among professors who declared their ethnicity, fewer than 1 in 8 were from ethnic minority backgrounds and 9 in 10 were white. Among academic staff, 7 in 10 were of UK nationality, fewer than 1 in 6 were EU nationals and 1 in 3 were non-EU nationals. Only 1 in 16 staff declared a disability. We explore this further in the next pillar, culture.



5 Culture

Creating an inclusive, nurturing culture in university and at work requires connection, community and commitment. Cibyl's research shows respondents with low MH scores, or MH issues, can feel well supported in the right working and university environment.

Report partner Accenture highlights its strong employee networks and its commitment to diverse and inclusive (D&I) culture. Its careers website states an intention to foster a workplace in which all people feel a sense of belonging and all are respected and empowered to do their best work. A culture of equality, regardless of disability, faith, gender, race, ethnicity, LGBTQ+ and any other demographic, fosters a sense of belonging, the website goes on to say.

Strong, diverse and inclusive leadership determines good company and university culture. Universities are also workplaces, with collectively more than 85,000 full-time and nearly 18,000 part-time teaching and research staff, plus around 1,800 non-academic staff, according to [HESA staff data 2022/23](#).

In the Cibyl UK Student MH study 2024, half of all employed respondents agreed their current company's senior leadership were human, open and cared about students' emotional wellbeing, a small percentage fall from 2023's results with a corresponding rise in the number disagreeing with the statement.

Nearly half of all respondents agreed their university's senior leadership were human, open and cared about the students' emotional wellbeing, similar proportions to 2021, 2022 and 2023. When asked the same question about teachers, 3 in 5 respondents agreed.

A range of strategies, advice and wellbeing support to manage MH difficulties when they arise, enables everyone to thrive whether they are at university or work. Normalising MH difficulties and being more open about them helps break down barriers. But this year's study shows that only 1 in 14 respondents like to hear other employees' MH stories – even one step removed through video or blog posts – and only 1 in 11 like celebrating MH awareness days. Contributing to past Cibyl surveys, Accenture has observed that younger employees without an established professional reputation will not have confidence to talk about their MH. Though the percentage of this year's respondents saying they would like MH to be discussed at one-to-one and review meetings has risen slightly, fewer than 3 in 20 like that support option.

Asked what prevented them using their university MH services, 1 in 6 respondents with current or past MH concerns said they did not know where to go for help, 1 in 7 said they were worried they would be seen as weak and 1 in 3 said they did

not know what to say. It is concerning that any stigma remains attached to MH disclosure. The extensive and wide-ranging MH services that many universities manage, finance and maintain need widespread recognition.

Huge pressures on university finances make it increasingly difficult to deliver high levels of tailored support but MH funding should be ring-fenced. The University MH Charter, which was first produced in 2019, states that a whole university approach must not only foster an environment that reduces poor MH, it must also support good MH and encourage participation from students who have 'non-traditional' backgrounds. Consulting individual groups remains imperative but Student Minds acknowledges the extent of this challenge by pointing out that there are 2.8 million diverse student voices in the UK. Even food culture can be important (see page 79).

Disabled Students UK (DSUK) highlights the extensive knowledge based in its own membership and invites engagement. In 2023 DSUK launched a university comparison tool. Inclusion and non-discrimination policies are enshrined in law and UUK is pressing for commitments to be upheld.

Over the last few years environmental, social and governance (ESG) and corporate social responsibility (CSR) statements have been impacting talent acquisition from Gen Z candidates. Respondents worried about social issues ranked climate change concerns at 6.3 out of 10 (see page 13). Curiously 'greenhushing' – companies setting sustainability targets but only publicising what is mandatory – has become a practice based in caution. ESG and CSR still matter to stakeholders, potential investors, business partners and consumers as well as future and current employees. Not publicising climate ambition and science-based targets, beyond legal commitments, says something about a company's culture.

Social media platforms offer additional arenas in which to improve work and university culture, to spread good practice and increase knowledge.

Wherever students' and early career graduates' minds are engaged, that is the place to promote MH policies, programmes, campaigns and support.

As stated in the opening part of this section, this study marks Cibyl's fourth year of researching student mental health issues. There is a growing bank of information and broader opportunity to notice changes in MH trends and patterns, whether concerning or heartening. Cibyl's own culture revolves around improving students' futures. As Student Minds puts it: today's students are tomorrow's leaders.

*See page 152 for terminology.

TRANSITIONS

University to workplace

The transition from university to the workplace is one of the biggest young adults make. Many undergraduates undertake internships, work in part-time temporary roles or run a moneymaking side-hustle while studying and 1% of all 2024 respondents were completing a placement year at the time of the study. However, it's a step up from student life to seeking and working in a salaried position.



Job hunting and working

Job hunting takes time and brings expectation – from friends and family, and from students and graduates themselves and we can see the strain securing a post-uni role has on page 23.

In a job market where some candidates are highly sought after but 1 in 8 (12%) find themselves in non-graduate (entry-level) roles, the recruitment picture has been changing across the last 12 months.

Among first year students:

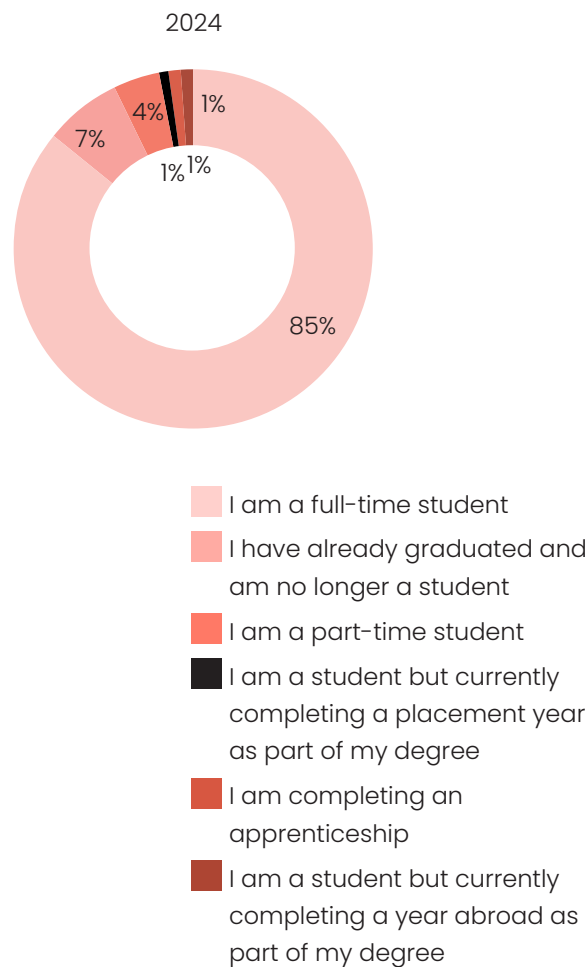
- more than 1 in 4 (27%) said they had already started researching professions or employers
- 1 in 8 (12%) were applying for internships
- 1 in 10 (10%) were already at the application or assessment stages.

Bearing in mind the period this survey was undertaken (November 2023 to February 2024) some first years are quick off the mark – and they need to be, because within professional roles (eg in law), the most sought-after internship places are secured very early on.

By contrast, half of all first years have not started looking at graduates jobs at all, though this turns around significantly in middle year and final year students, as one might expect.

TRANSITION

Which best describes your education status?



Cibyl UK graduate research 2024 shows that those yet to receive a job offer are hardly unemployable, however.

When graduates were asked about technical skills, work experience and behaviours:

- 1 in 12 (8%) put data analysis in their top 3 skills
- 2 in 5 (41%) said they could code
- 1 in 11 (9%) had confidence in their tech ability
- half (49%) could speak a foreign language
- half (53%) could drive.

Many said they had a range of other sought-after attributes. These included:

- 1 in 3 with communication (34%), teamwork (33%) and/or attention to detail (32%) behaviours
- 1 in 4 with creativity (26%), organisation (26%), leadership (24%), resilience (24%), and/or initiative/self-drive (24%)
- 2 in 5 (42%) problem-solving
- 1 in 3 (32%) have completed an internship.

Looking solely at work experience among graduates

- 3 in 10 (29%) have completed a placement year
- 1 in 5 (19%) final year law students have completed a vacation scheme
- 9 in 10 (90%) have work experience
- 1 in 10 have run their own business.

And some respondents will have completed a combination of these work-related activities.



New in 2024

This year, the Cibyl UK Student mental health survey teases out additional elements of work and determines the proportion of respondents who are:

- in full-time and part-time jobs
- working in graduate roles
- on graduate schemes or apprenticeships
- working in entry-level roles
- self-employed and/or working gig economy/temporary or freelance roles
- not seeking work due to disability

In past years the survey made distinctions only between respondents:

- seeking work
- employed full-time in a permanent role
- employed full-time in a temporary role
- self-employed/working gig economy or freelance
- not working and not seeking work.

New in 2024



For the first time since launching, the Cibyl UK Student mental health survey 2024 asked graduate respondents about the sector they were working in and their roles.

Top sectors included

- public sector – 3 in 20 (15%)
- scientific research and development – 3 in 23 (13%)
- IT and technology – 1 in 12 (8%)
- medicine dentistry or veterinary – 1 in 14 (7%)
- retail 1 in 16 (6%)
- hospitality, leisure and tourism – 1 in 16 (6%)

Top roles included:

- research – 1 in 8 (12%)
- healthcare/social care – 1 in 10 (10%)
- technology (including data scientist/analyst/software developer/machine learning) – 1 in 11 (9%)
- engineering – 1 in 16 (6%)
- teaching and education – 1 in 20 (5%).

Around 1 in 14 (7%) of this year's respondents were graduates, and of those:

- Half (48%) were seeking work
- 3 in 20 (15%) were employed in a graduate role
- 1 in 20 (5%) were self-employed
- 1 in 8 (12%) were in entry-level jobs (for which they did not need a degree)
- 1 in 50 (2%) were not working and not seeking work (eg they were travelling or taking a year out)
- 1 in 20 (5%) were on a graduate scheme
- 1 in 100 (1%) were on an apprenticeship
- 1 in 100 (1%) were suffering long-term sickness or not seeking work due to disability.

In 2021, half of all respondents were seeking work (49%) and half were employed (48%), while in 2022 more than 2 in 3 respondents were employed (67%) and almost 1 in 3 (30%) were seeking work.

In 2023, 3 in 5 (57%) were employed and 2 in 5 (41%) were seeking work.

In addition:

- 8 in 10 (77%) undergraduates in their final year were already applying for jobs
- 1 in 20 (6%) had already received an offer.

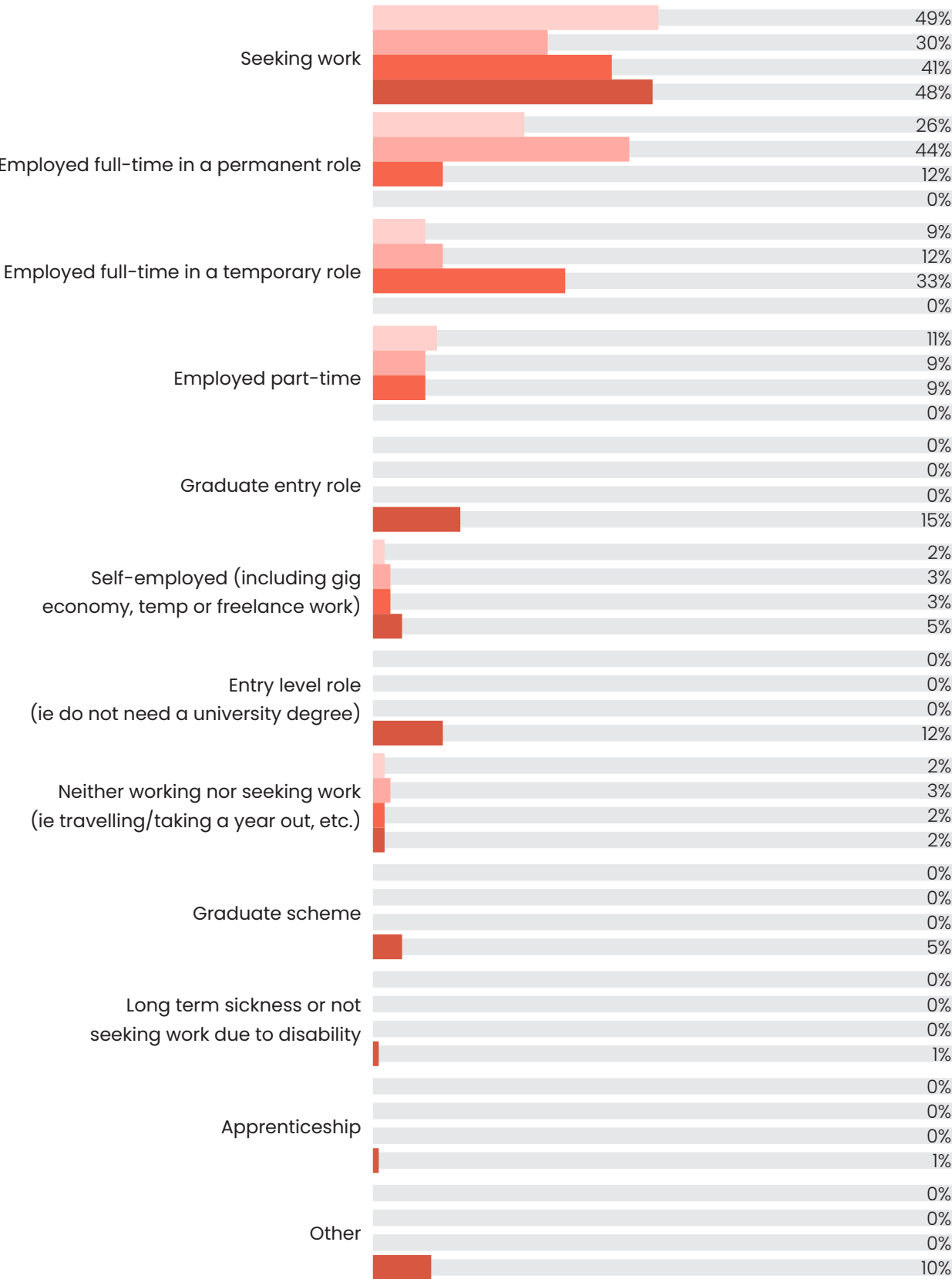
HOW MUCH DO GRADUATES EARN?



More than **3 in 4** respondents (77%) earned between **£20,000–£30,000** with **1 in 20** (5%) earning **£40,000 or above**.

What is your employment status?

TRANSITION



2021 2022 2023 2024

The stress of job hunting and choosing an employer

Graduate respondents overwhelmingly point to the importance of robust MH provision when they are choosing or chose their employer. This expectation of employers is a trend that has risen significantly across the survey year on year until 2023-24, when it reached a plateau.

Numbers of respondents placing importance on employers' MH provision

- 1 in 3 (32%) in 2021
- 1 in 2 (51%) in 2022
- 4 in 5 (81%) in 2023*
- 4 in 5 (83%) in 2024.

*sample of all respondents rather than graduates only.

In 2024, 1 in 9 (11%) respondents said they were neutral about employers prioritising employees' MH, and 1 in 20 placed no importance on MH provision from their employers.

Among graduates seeking work, 2 in 5 (37%) respondents had low MH. Across all respondents we have seen how this can have a knock-on effect on rates of happiness and life satisfaction.

Graduates want a range of MH support options from their employer current or future, and needs were similar whether a respondent was seeking work, or employed (see graphic overleaf).

Respondents were able to prioritise more than one these options.

Most liked:

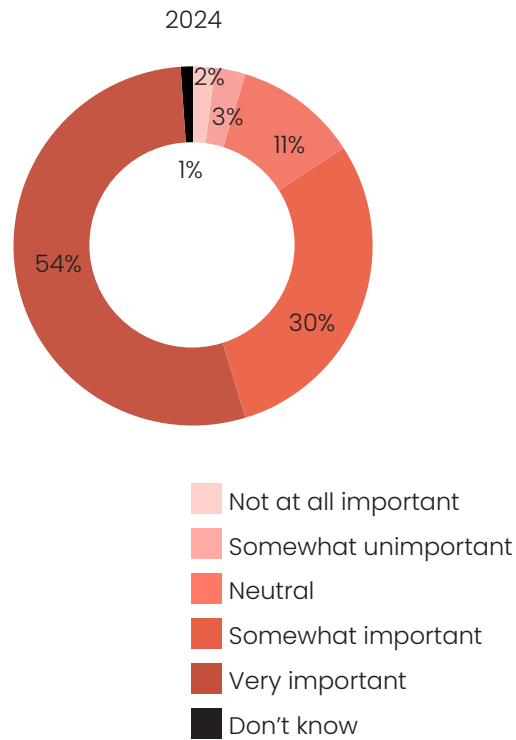
- employers providing general wellbeing benefits
- healthy working practices

Less well liked:

- employees sharing their MH stories
- celebrating MH awareness days.

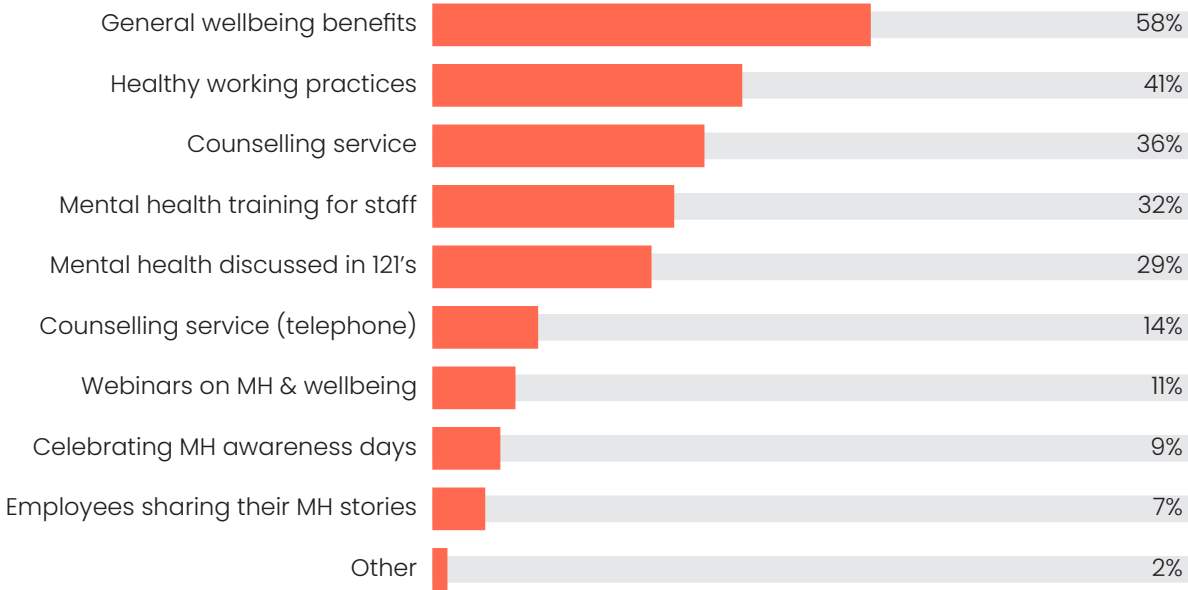
TRANSITION

When you chose your employer, how important was it to know that they have a robust mental health provision?



What mental health support would you like your future/current employer to provide? (Total employed)

TRANSITION



We can see the importance of such support, not just to graduates at work, but to employers in work days lost on page 147.



New information in this year's survey

Once in work, the memory of a decline in MH either becomes more distant, or else those actually in work had a less stressful time than those seeking work at the time of the survey, so there are differences in the overall impression of MH during job hunting.

Among graduate respondents seeking work

- nearly 2 in 5 (37%) have low MH
- nearly 7 in 10 (68%) said their MH had declined while job hunting
- 1 in 25 (4%) said their MH had improved
- 1 in 4 (23%) said it remained unchanged.
- more than half worry about their MH (55%)
- nearly half (49%) feel isolated or lonely
- more than 7 in 10 (71%) worry about not being good enough
- 2 in 3 (67%) worry about money.

Graduates with low MH are more likely than average to worry about:

- not being good enough
- finances
- their MH daily or weekly
- feeling isolated or lonely.

Among all graduate respondents (including those in work)

- 1 in 2 (54%) said their MH had declined while job hunting
- 1 in 20 (5%) said it had improved
- 1 in 3 (34%) said it remained unchanged.

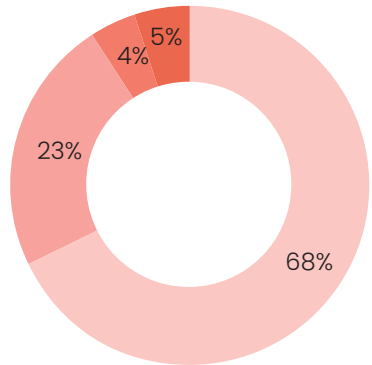
By delving into these figures more deeply it's possible to see that among all respondents with a low MH score (see definition on page 152) those seeking work were the most affected.

Respondents either looking for or in work ranked the stress level of the job-seeking process on average at 7.1 on a scale of 1-10.

TRANSITION

You previously mentioned you are seeking work, how has looking for jobs impacted your mental health?

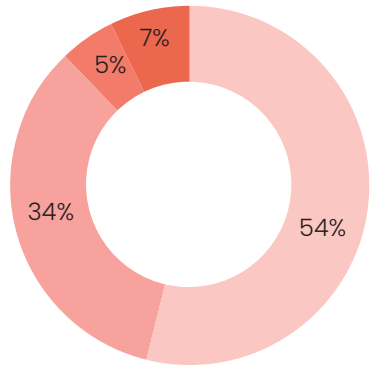
2024 job seeking graduates



- My mental health has declined
- My mental health has not changed
- My mental health has improved
- Prefer not to say

How did your mental health change while looking for graduate jobs?

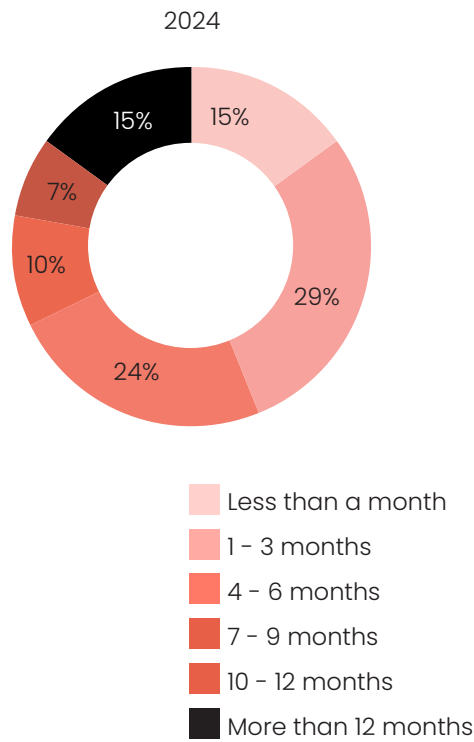
2024 All graduates, working and job-hunting



- My mental health has declined
- My mental health has not changed
- My mental health has improved
- Prefer not to say

TRANSITION

How long did it take you to find your graduate job (from when you first started researching jobs to receiving your job offer)?



How long, how many, how much?

From the start of a job search to securing a role, the mode average length of time was 1-3 months (29%) closely followed by 4-6 months (24%). Only 3 in 20 (15%) respondents found a job within 3 months of starting the process, while for 1 in 6 (17%) it took 6-12 months, and for 3 in 20 (15%) securing a role, from start of search to receiving a job offer, took more than a year.

Respondents were also asked how many jobs they applied for.

Employed graduates revealed they had applied to an average 37 graduate jobs or schemes and on average received 3 offers. Across the board, graduates made 18 applications for every offer they received.

To look at it from other side of the lens, graduate employers* reported receiving 86 applications per vacancy in 2022/23 – a 23% increase.

More widely publicised, this reality check could be useful to job-seeking graduates feeling stressed or despondent about their progress entering the world of work. In broad terms, more than half their peers take up to six months to get through the process of securing a job and another 1 in 3 take up to a year.

Graduate respondents seeking work consistently score less well than employed graduates when asked about their happiness (5.2 vs 5.8 respectively) and how satisfied they are with their life nowadays (4.5 vs 5.5 respectively). However, respondents in work felt more anxious than those seeking work (5.3 vs 5.6 respectively).

The comparison is not exact since this question was framed differently, but in 2023 more than 2 in 3 (68%) unemployed graduates felt anxious compared with 3 in 5 (61%) of those in work.

*ISE student recruitment survey 2023

TRANSITION

Those seeking work

- 4.5 Overall, how satisfied are you with your life nowadays?
- 5.2 Overall, to what extent do you feel that the things you do in your life are worthwhile?
- 5.2 Overall, how happy did you feel yesterday?
- 5.3 Overall, how anxious did you feel yesterday?



IN SEPARATE RESEARCH PROJECTS FOR LGBT+ CHARITY JUST LIKE US, AND THE SUSTAINABLE RECRUITMENT ALLIANCE, CIBYL ASCERTAINED THAT:

- LGBT+ respondents who had previously come out often go back into the closet when they start work.
- Environment and sustainability is important to more than 9 in 10 students, while 1 in 5 students think about environmental sustainability in graduate career engagement.

Why is it important to be prepared for work?

As seen on page 121, half of all graduate respondents say their MH declined while job-hunting.

In similar results to previous years nearly 3 in 5 (59%) graduate respondents already employed said they had felt prepared for the realities of working life (across all graduates respondents this was 62% in 2023, 59% in 2022, 58% in 2021).

However 1 in 4 (26%) were unprepared and those were split between the 1 in 12 (8%) who were completely unprepared and nearly 1 in 4 (18%) who felt somewhat unprepared. The remaining 13% said they were neither prepared nor unprepared, which is in line with previous studies.

Looking at these figures in more detail, graduates with low MH were less likely to feel prepared (vs others) and those unprepared were more likely to experience a decline in their MH than those who were prepared.

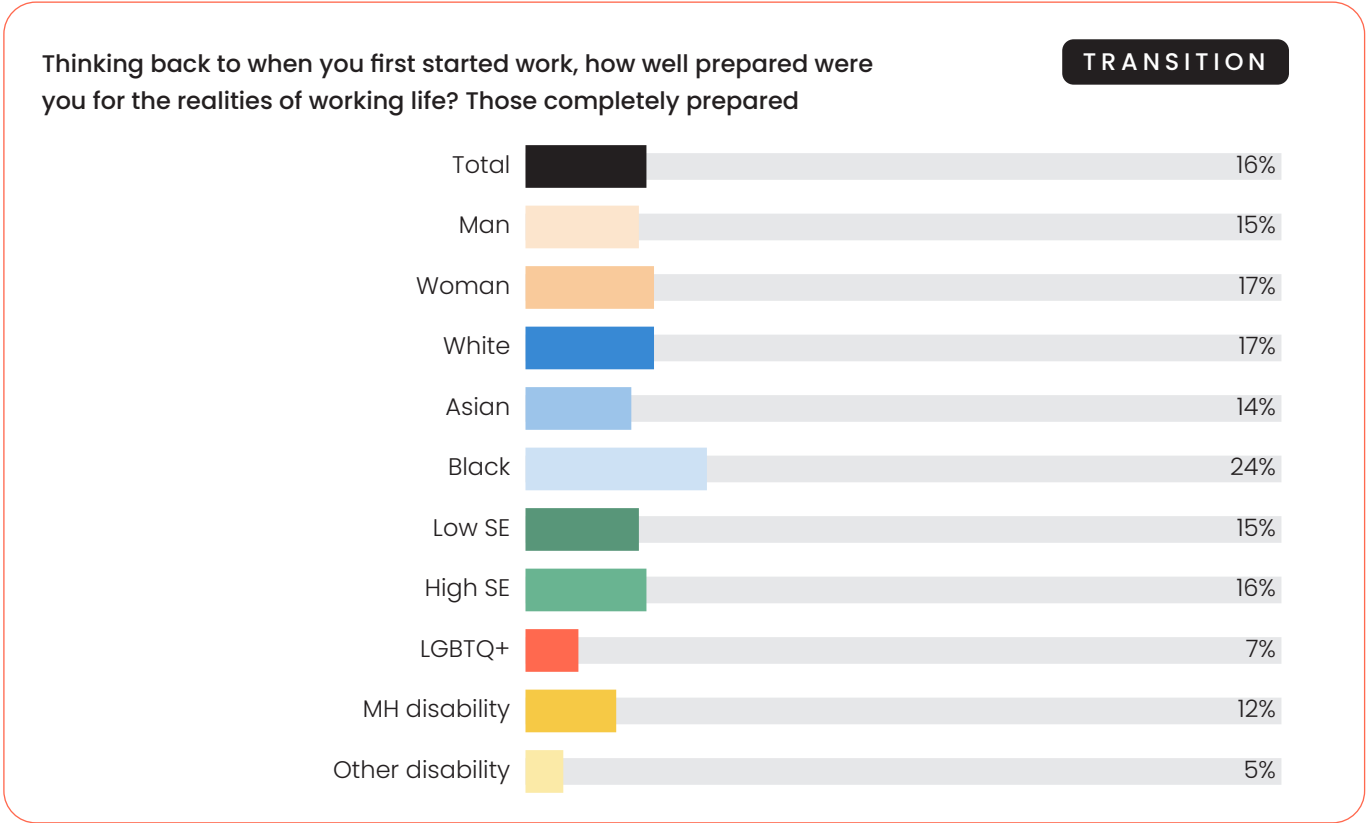
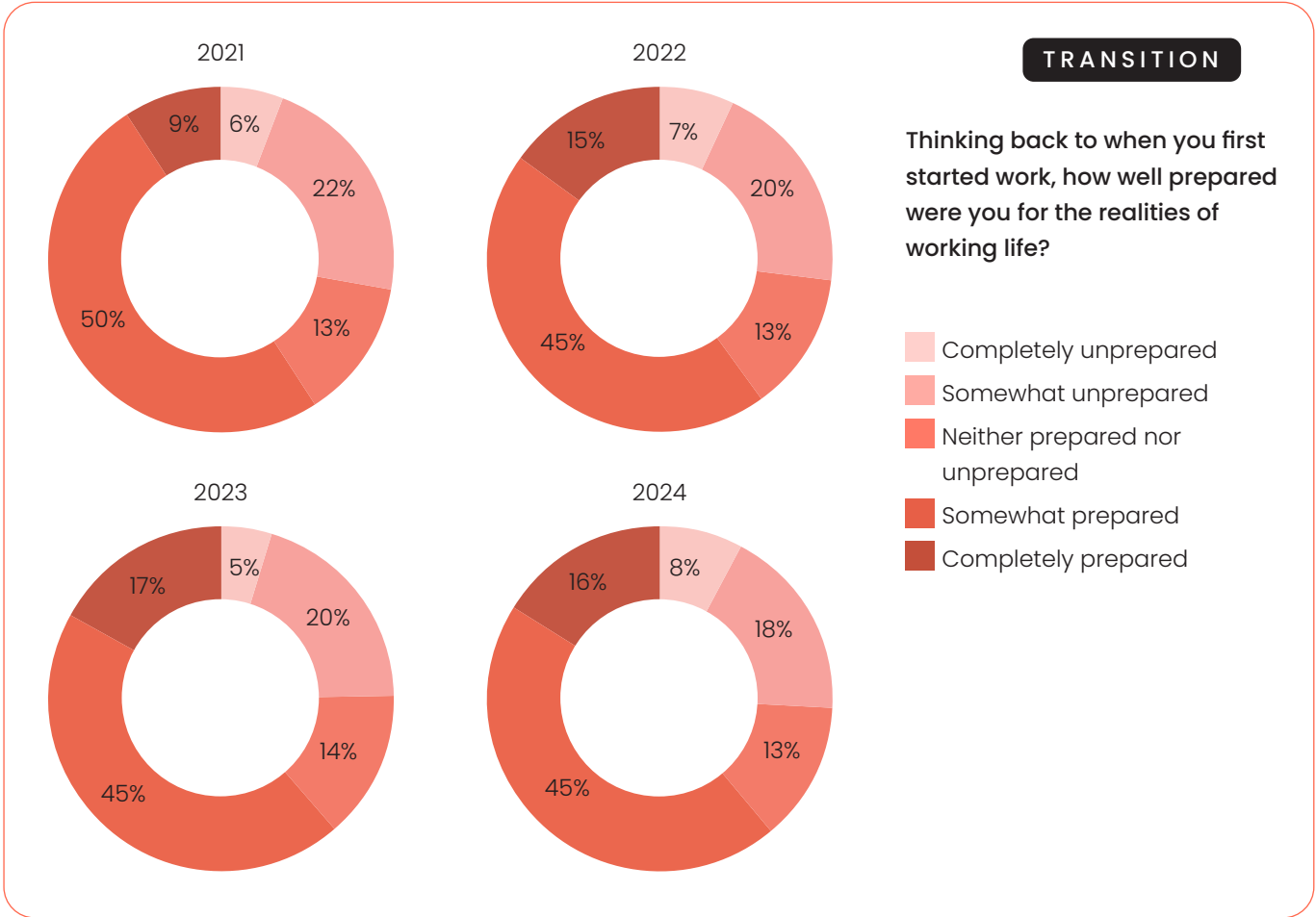
There’s a knock-on effect to this, since being unprepared for work affects not being engaged at work. When we asked how engaged

working graduates felt on a scale of 1-5, with 1= completely engaged and 5 = not at all engaged, those who were least prepared rated themselves least engaged (2.9 out of 5) while those who were prepared rated themselves at 2.4 out of 5 (ie better engaged).

Half of Black (51%) respondents and those from low socio-economic (SE) backgrounds (50%) along with LGBTQ+ respondents (48%), and those with a MH disability (47%) felt prepared for work, this compared with more than 3 in 5 (62%) Asian (64%) respondents and those with other disabilities. Among the most confident were respondents from high SE backgrounds, 7 in 10 of whom felt prepared for working life. See pages 32–56 for detailed information by SE background, ethnicity, gender, sexuality and disability.

Feeling unprepared for working life:

- 2 in every 5 non-binary respondents (43%)
- 2 in 5 from low SE backgrounds (40%)
- 2 in 5 with MH disabilities (41%)
- 1 in 4 white respondents (27%)
- 1 in 4 from a high SE (23%) background
- 1 in 5 Asian (22%) respondents.



How have rising living costs affected graduates' career aspirations and outlook?

Cibyl's graduate research UK 2024 established that salary expectations have plateaued after last year's jump, and more than 2 in 3 (67%) undergraduates want to enter employment after university, a drop from the 7 in 10 (71%) who wanted to do so in 2023.

Only 3 in 20 (15%) respondents from a sample of more than 26,500 graduates said they had not changed their career aspirations as a result of the cost of living crisis.

In contrast:

- 3 in 10 (31%) were more focused on a role's starting salary
- 3 in 10 (31%) had broadened their career interests
- 1 in 5 (18%) were focusing on different roles within organisations
- 1 in 10 (10%) were focusing on a different sector altogether.

We know that graduates will move in order secure better pay, or to work with preferred organisations.

- 1 in 5 (19%) were considering moving to secure a higher paid job
- 1 in 5 (21%) were considering moving abroad.

However,

- 1 in 6 (16%) would get a job near their parents or guardians to save money.

We also know that graduates are rethinking their next step as a result of the cost of living crisis.

- 1 in 6 (16%) were thinking of getting a job instead of doing a postgraduate degree
- 1 in 11 (9%) were thinking of doing a postgraduate degree instead of getting a job
- 1 in 20 (5%) were considering switching to a different subject.

Graduates with a MH disability (who represented 13% of respondents in this survey) were more likely than those without to say they were reconsidering their career aspirations. This was particularly notable when it came to focusing on salary.

- 2 in 5 (39%) were more focused on the starting salary in a role
- 3 in 10 (32%) had broadened their career interests
- 1 in 5 (20%) were focusing on different roles within organisations
- 1 in 11 (9%)* were focusing on a different sector altogether.

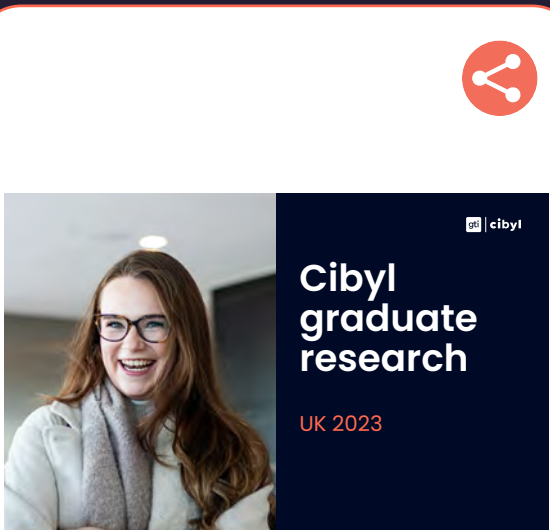
Graduates with a MH disability are also more likely to move in order secure better pay, or to work in a location or with preferred organisations.

- 1 in 5 (21%) were considering moving to secure a higher paid job
- 1 in 4 (25%) were considering moving abroad
- 1 in 5 (20%) would get a job near their parents or guardians to save money.

And here is how graduates with an MH disability are rethinking their next step as a result of the cost of living crisis.

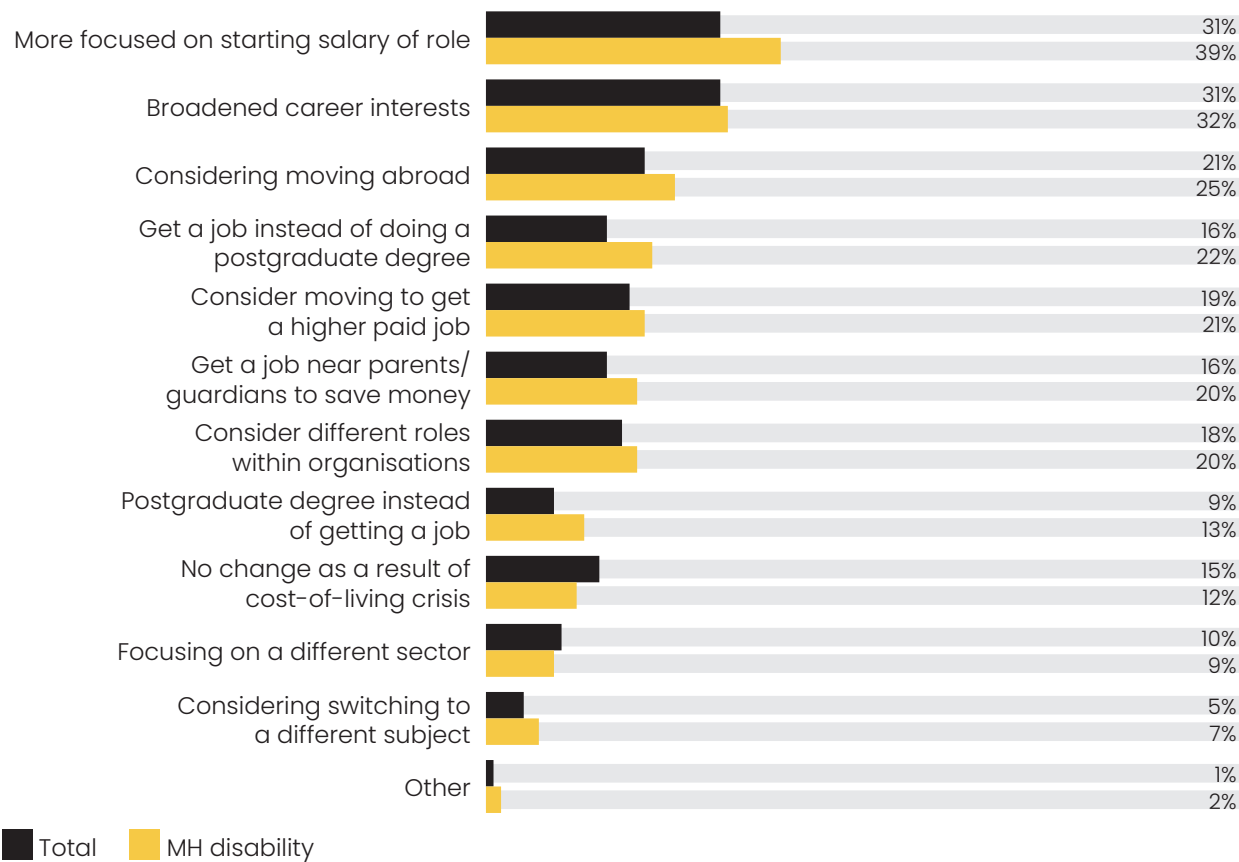
- 1 in 5 (22%) were thinking of getting a job instead of doing a postgraduate degree
- 1 in 8 (13%) were thinking a postgraduate degree instead of getting a job
- 1 in 15 (7%) were considering switching to a different subject.

*This was the only option fewer respondents with a MH disability would or had considered than the sample as a whole.



How has cost-of-living changed career aspirations

TRANSITION



AT WORK

Working and mental health

Once a graduate starts work, pressures on their mental health (MH) change. Work can be challenging in itself without all the peripheral stress, such as moving home, new routines and meeting new people, but employment can also signal the fulfilment of years of study and the chance to put plans into practice.

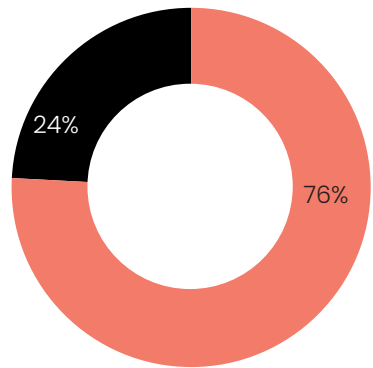


AT WORK

The survey took place between November 2023 and February 2024, and was open to graduates less than two years after they had finished university (as well as undergraduate and postgraduate students).

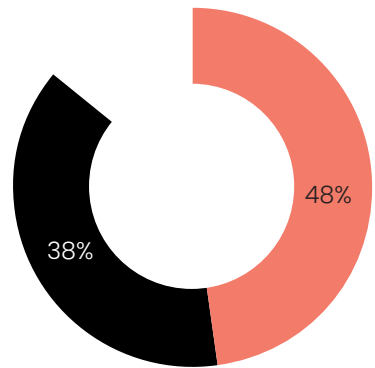
- 3 in 4 (75%) respondents said they had graduated this year
- 1 in 4 (24%) graduated a year ago.

When did you graduate?



■ This year
■ 1 year ago

What is your employment status?



■ Seeking work
■ Employed

Despite the opportunities working graduates add to their lives, pressure, anxiety and depression increase, though perhaps unsurprisingly unemployed graduates feel the burden of these even more than employed graduates. This group are also more likely to feel cost-of-living pressures.

So which factors are the most difficult to manage for graduates starting their careers? For the most part employed graduates were split evenly between feeling their MH had:

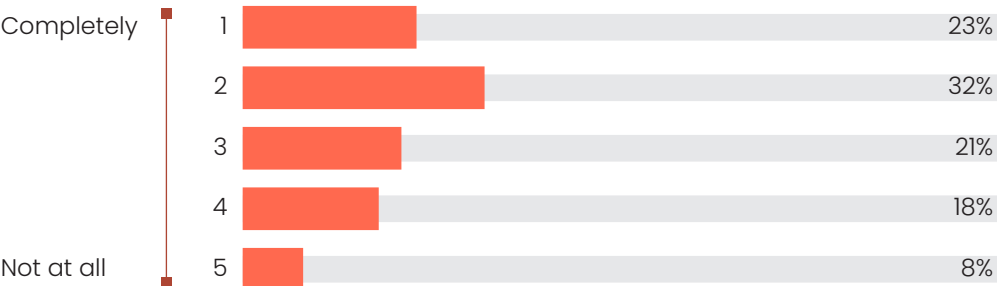
- declined since starting work (29%)
- improved since starting work (30%)
- not changed since starting work (33%).

Asked how engaged they were at work from 1 completely – 5 not at all engaged:

- 1 in 4 (23%) employed graduate respondents were completely engaged
- 1 in 12 (8%) employed graduate respondents were not at all engaged.

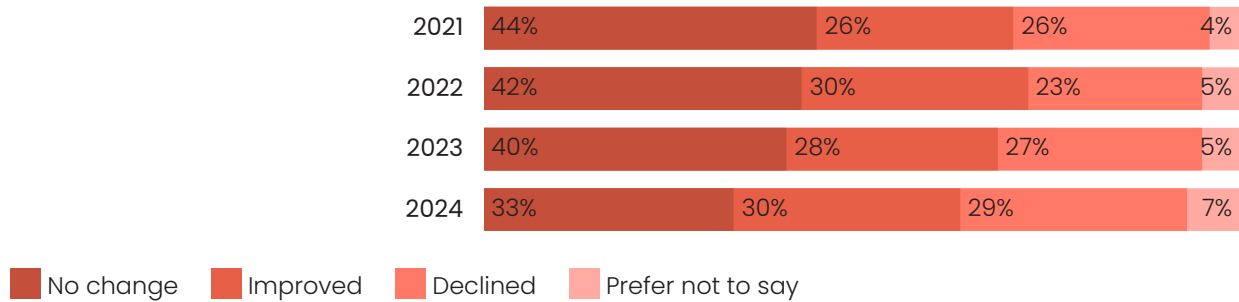
How engaged are you at work?

AT WORK



How has your mental health changed since starting work?

AT WORK



Friends, friendships and feeling connected to colleagues

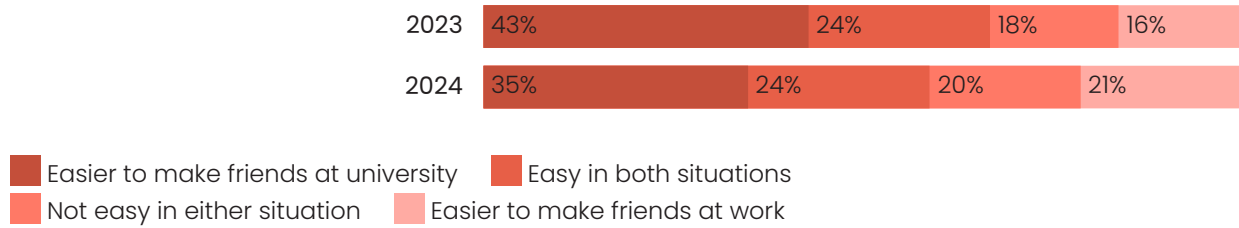
Working graduates were asked how making friends in a work environment compared to making friends at university.

- 1 in 3 (35%) said it had been easier to make friends at university
- 1 in 5 (21%) said it was easier to make friends at work
- 1 in 4 (24%) felt it had been easy in both situations
- 1 in 5 (20%) had not found either situation easy.

More 2024 graduates than those in 2023 said it was easier to make friends at work than at uni (21% vs 16%) and fewer said it was easier to make friends at uni (35% vs 43%).

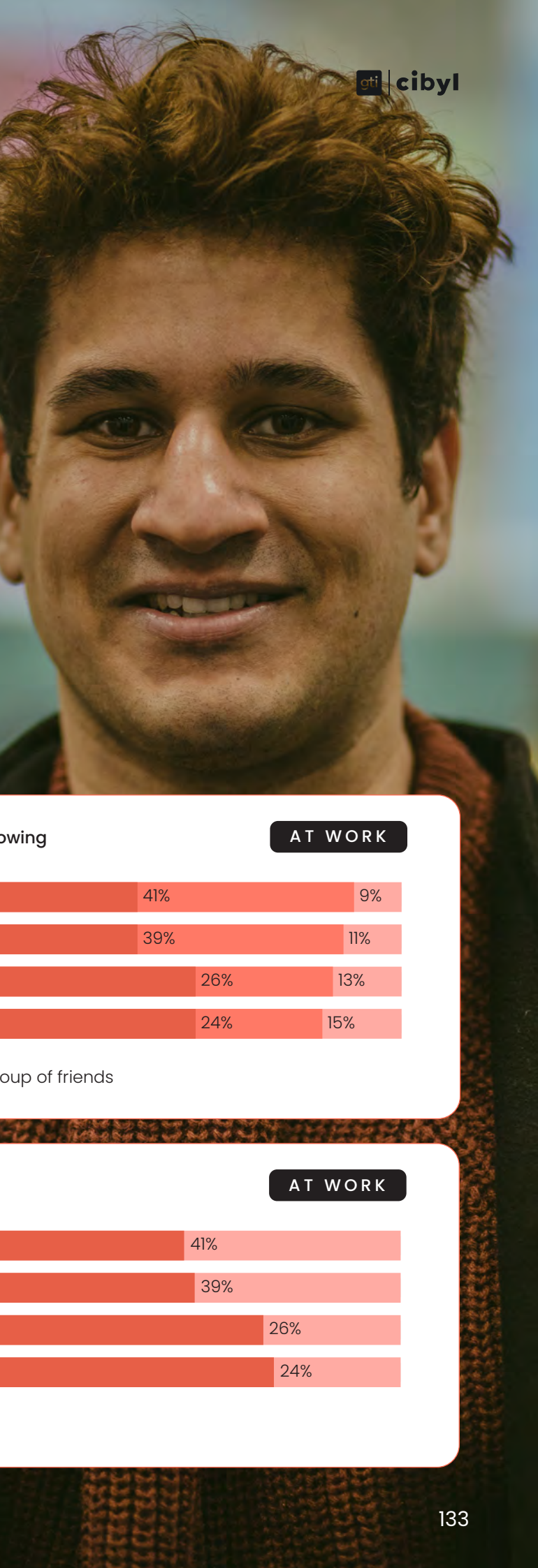
How does making friends at work compare to when you were at university?

AT WORK



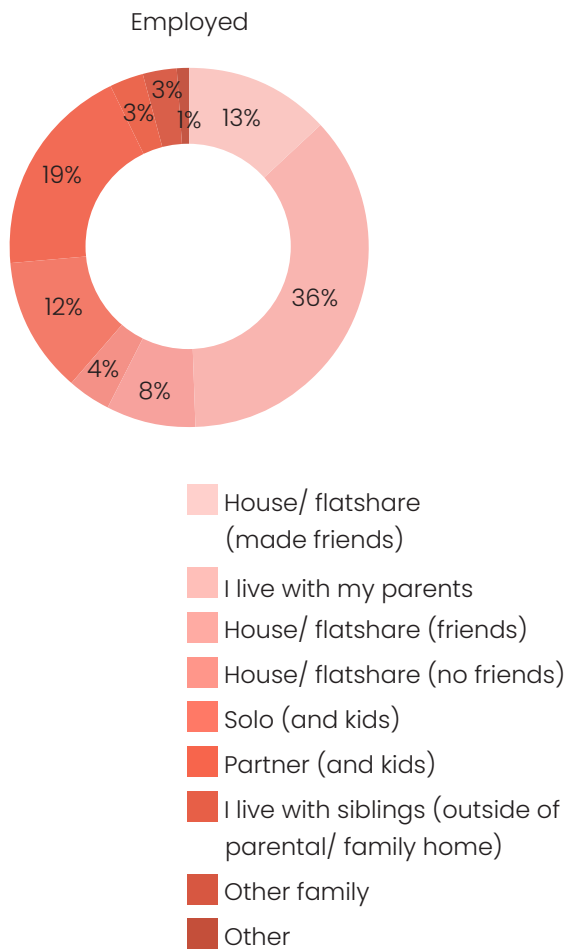
University typically kicks off with freshers' days and opens with opportunities to meet new people such as flatmates and course mates. New friends can also be made throughout university by joining any number of groups and societies or participating in sports activities.

Work is a weekday-only hub in which to make friends. Newly employed graduates may undertake long commutes, have moved to a new city or town, or moved back in with their parents in the first few months of employment.



AT WORK

Which statement best describes who you live with?



Employed graduates' living arrangements can vary:

- 1 in 25 (4%) lives in a house/flatshare with no friends
- 1 in 5 (21%) lives with friends
- 1 in 5 (19%) lives with their partner (and children)
- 1 in 8 (12%) lives alone (or with their children)
- nearly 2 in 5 (36%) live with parents.

Friendships and support matter. Looking at the results in more detail, the Cibyl mental health survey 2024 shows that graduates with low MH, without friends or without support in the workplace, are more likely to need time off, so it's helpful to understand living arrangements to identify who may potentially fall into the category of not having day to day support at home if they are not making friends or settling at work.

Overall, 3 in 4 (76%) graduate respondents have at least some friends at work split between:

- 3 in 5 (61%) have a small group of friends
- 3 in 20 (15%) have a large group of friends.

However, 1 in 4 (24%) respondents have no friends at work.

These figures are similar to 2023's survey but things looked very different in 2022 and 2021 when more graduates started their working life online. With virtual inductions and little if any contact in the workplace – all the result of pandemic restrictions and precautions – there were huge barriers to making friends at work.

Looking at the quality, rather than quantity of friendships graduates made at work in 2024:

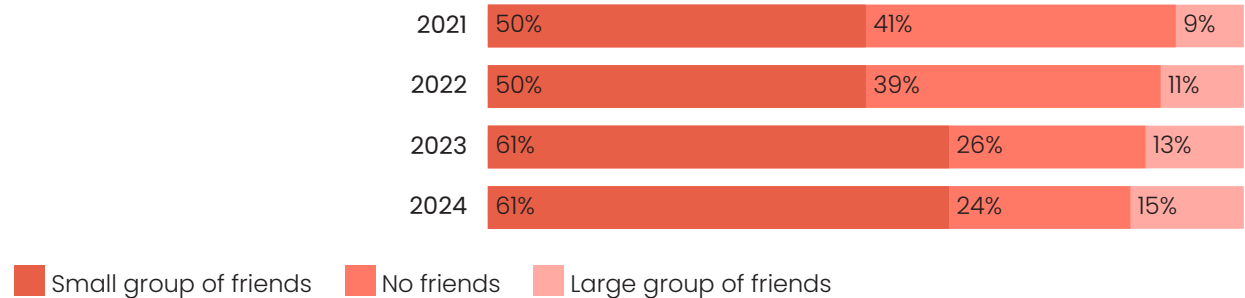
- 3 in 5 (58%) respondents were satisfied
- 1 in 6 (17%) were dissatisfied
- 1 in 4 (19%) felt neutral
- 1 in 20 (5%) said they didn't know.

Examining those answers in depth, a different picture emerges. Among respondents with low MH* (1 in 4 (25%) graduate respondents in work) only 2 in 5 (36%) were satisfied with their friendships and that dip skews the overall figure (see graphic overleaf).

Though representing only 3 in 20 (15%) working graduate respondents overall, 7 in 10 (71%) respondents who had direct employer support were satisfied with their friendships and 2 in 3 (65%) graduates with other MH difficulties were satisfied with the friendships they had made at work.

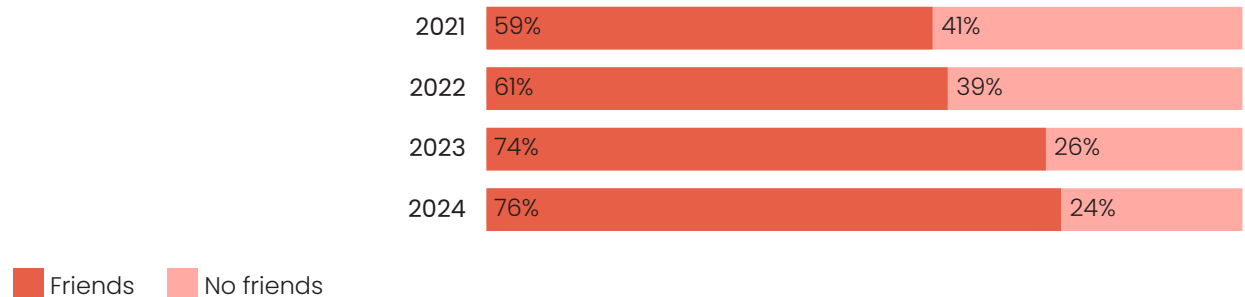
When thinking about groups of friends which of the following statements is most like you at work?

AT WORK



When thinking about friends which of the following statements is most like you at work?

AT WORK



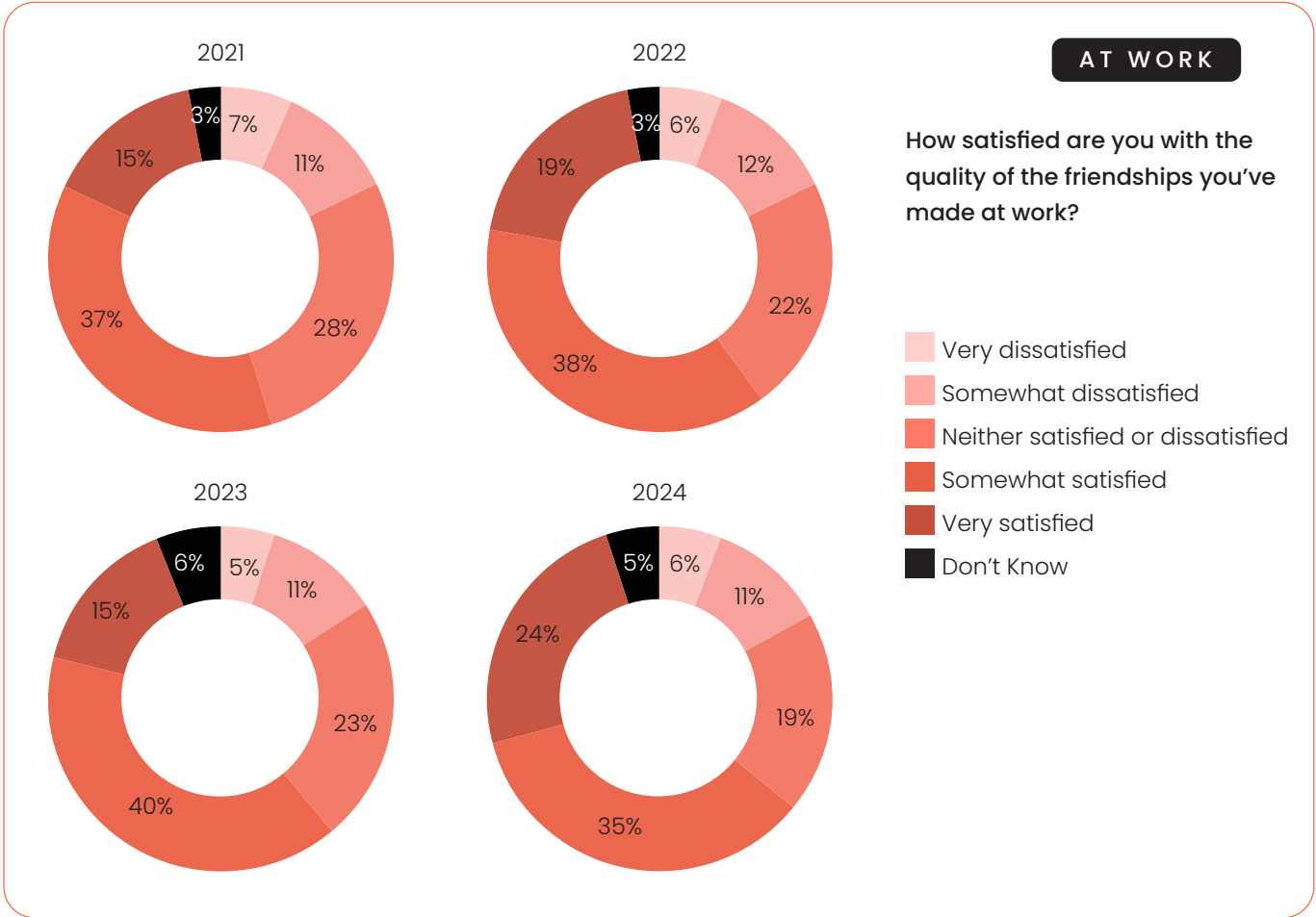
Report partner Accenture recognises the importance of building in-person relationships among its graduate populations. It does this by offering a variety of opportunities for graduate joiners to make friends before their first day, for example with a calendar of in-person pre-joiner events. Graduates joining on the same programme in the same location get to meet and make connections. They also meet other recent graduates who have joined the firm. The aim is to help new joiners familiarise themselves with the office environment ahead of day one and alleviate first-day nerves by creating a community from the outset.

Good friendships are not established overnight and at the time of the survey many respondents would have been relatively recent starters in their workplace. Even in a big business, where graduate cohorts attend induction and training events together, working in different areas can mean limited opportunities to meet up with new friends, possibly only at meal breaks and after work activities.

Some respondents may make a distinction between feeling connected with their colleagues and feeling colleagues are friends.

- Half (54%) of all employed graduate respondents agreed they felt connected with their colleagues
- 1 in 5 (20%) disagreed
- 1 in 5 (21%) said they neither agreed nor disagreed
- 1 in 20 (5%) said they did not know.

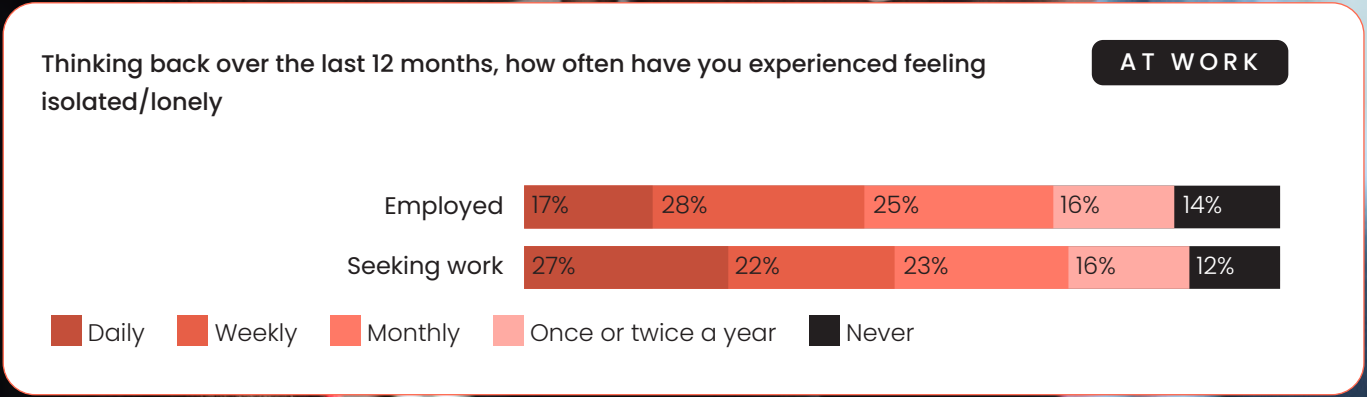
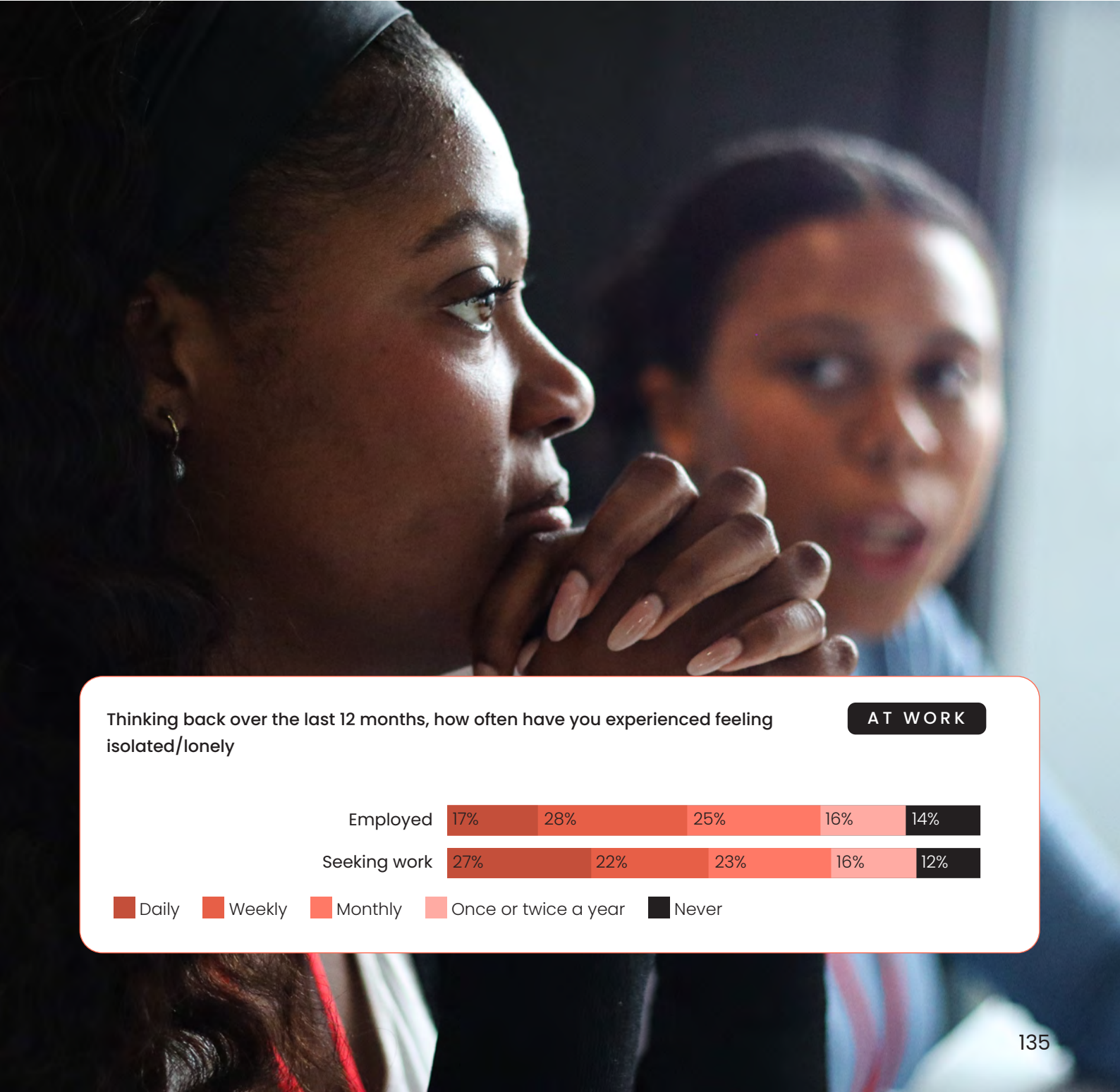
Graduates who were working in research were the most likely to say they felt connected with their work colleagues, while around half of those in engineering, teaching/education and healthcare/ social care (54%, 53% and 54% respectively) felt the same. Fewer than 2 in 5 (36%) technology employees agreed they felt connected with their colleagues.



A key difference can be seen in those receiving indirect or community support*.

It is possible to be in an office or other workplace daily and still feel isolated and lonely. Nearly half of all graduates in work said they felt this daily or weekly, only marginally lower than those still seeking work (45% vs 49%). Similar percentages of employed and job-hunting graduates said they never or rarely felt lonely or isolated (30% vs 28%).

* See page 152 for definitions of low MH and direct/indirect support.



Work culture

Another element that can cause anxiety is job insecurity (real or perceived) and worries about returning to work after a break. The responses to these questions are largely unchanged year on year.

In 2024:

- nearly 2 in 5 (36%) respondents said they never felt insecure at work
- 1 in 4 (25%) felt insecure daily or weekly.
- nearly 3 in 10 (28%) never felt worried about returning to work after a break
- 27% felt worried daily or weekly.

Thinking back over the last 12 months, how often have you experienced feeling insecure at work, like you could lose your job at any moment

AT WORK



Daily Weekly Monthly Once or twice a year Never

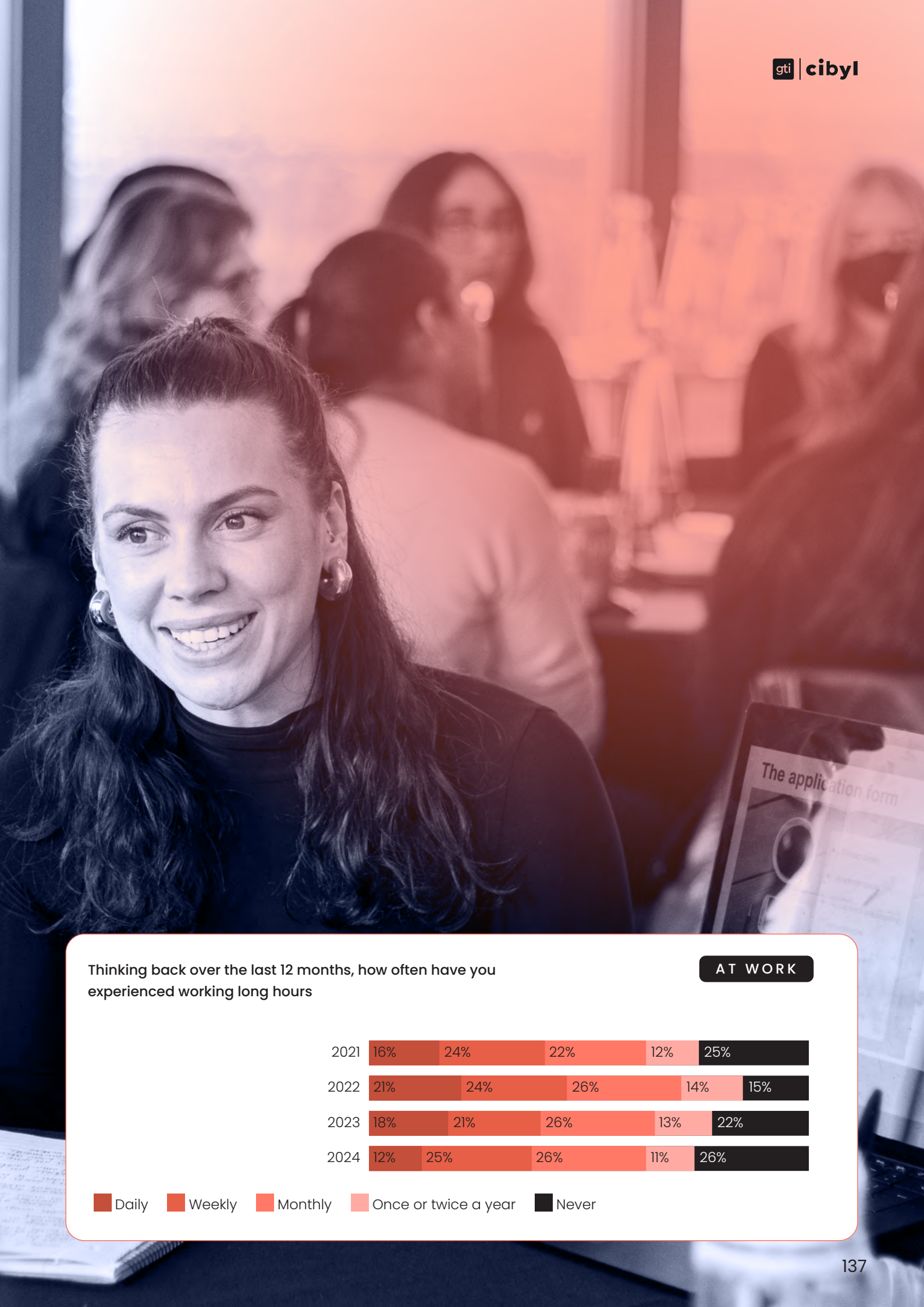
Thinking back over the last 12 months, how often have you experienced worrying about returning to work after a time off (eg a holiday or weekend)

AT WORK



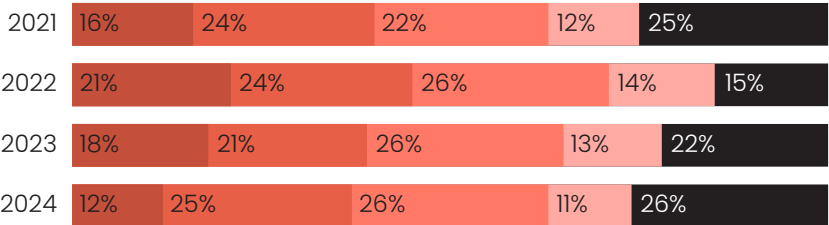
Daily Weekly Monthly Once or twice a year Never

It says something about working culture that more respondents this year than last said they never or rarely experienced long working hours (37% vs 35%) and fewer said they experienced long hours daily (12% vs 18%). However, 1 in 2 (51%) graduates experienced long hours weekly or monthly, up from 47% in 2023, 50% in 2022 and 46% in 2021.



Thinking back over the last 12 months, how often have you experienced working long hours

AT WORK



Daily Weekly Monthly Once or twice a year Never

Activities through work

Through the Cibyl graduate research UK 2024 we know that more than 1 in 3 (35%) students want MH support from their employer. Having established that having work friends can impact the way graduates feel at work, it's helpful to look at possible sources for establishing those friendships.

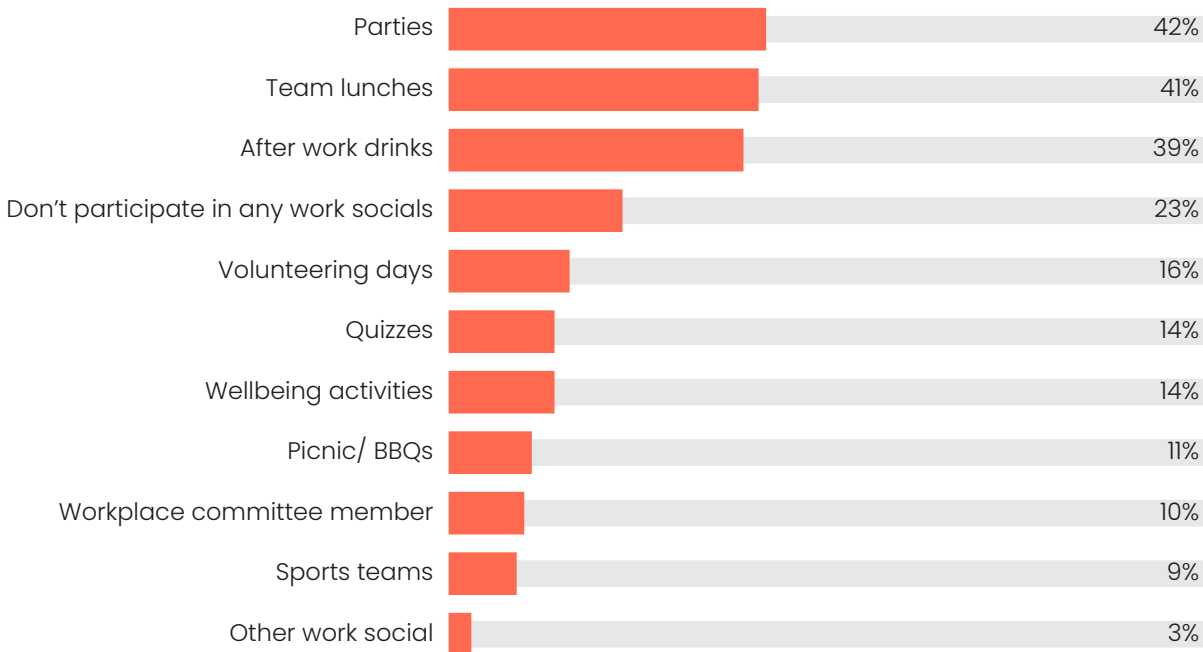
Many employers organise in-work events, including networking groups and lunchtime talks to enable employees to meet people outside their own department. But even the most popular events, such as (summer or Christmas) parties, team lunches and after-work drinks were not universally attended, with only 2 in 5 (42%, 41% and 39% respectively) graduates taking part in these.

Volunteering days, which some of the biggest companies offer a set number of days off for, were participated in by fewer than 1 in 6 (16%) graduates. Large employers also support special interest societies and groups such as diversity, sustainability and LGBTQ+ but only 1 in 10 (10%) graduates were involved in these.

Employees at report partner [Accenture](#), for example, can choose to join a ski racing team, theatre club, wine tasting society and UK music society for example, but only 1 in 8 (12%) of Cibyl's graduate respondents said they were involved in sports or social teams.

Do you take part in any community or social events at work?

TO WORK



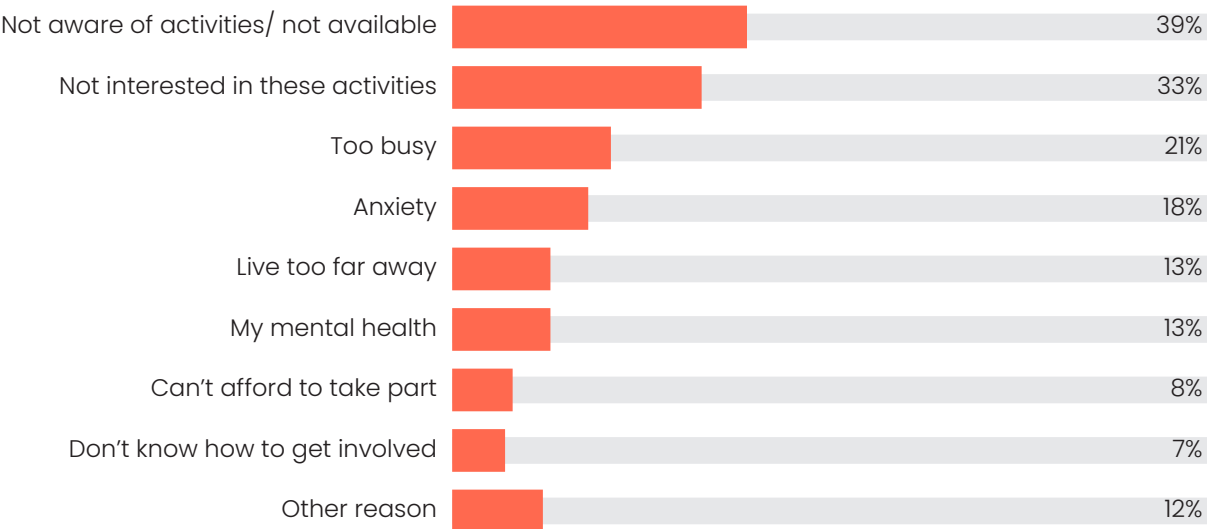
A significant number of employed graduates across all sectors are lukewarm about what's on offer through work, with 1 in 3 (33%) saying they were not interested in these activities. Other barriers cited included:

- not being aware of activities or not available – 2 in 5 (39%)
- being too busy – 1 in 5 (21%)
- not knowing how to take part – 1 in 14 (7%)
- living too far away – 1 in 8 (13%)
- being unable to afford to take part – 1 in 12 (8%).

Some of these barriers are especially pertinent to graduates who start work in regional cities, rather than London.

What has prevented you from taking part in community or social events at work?

TO WORK

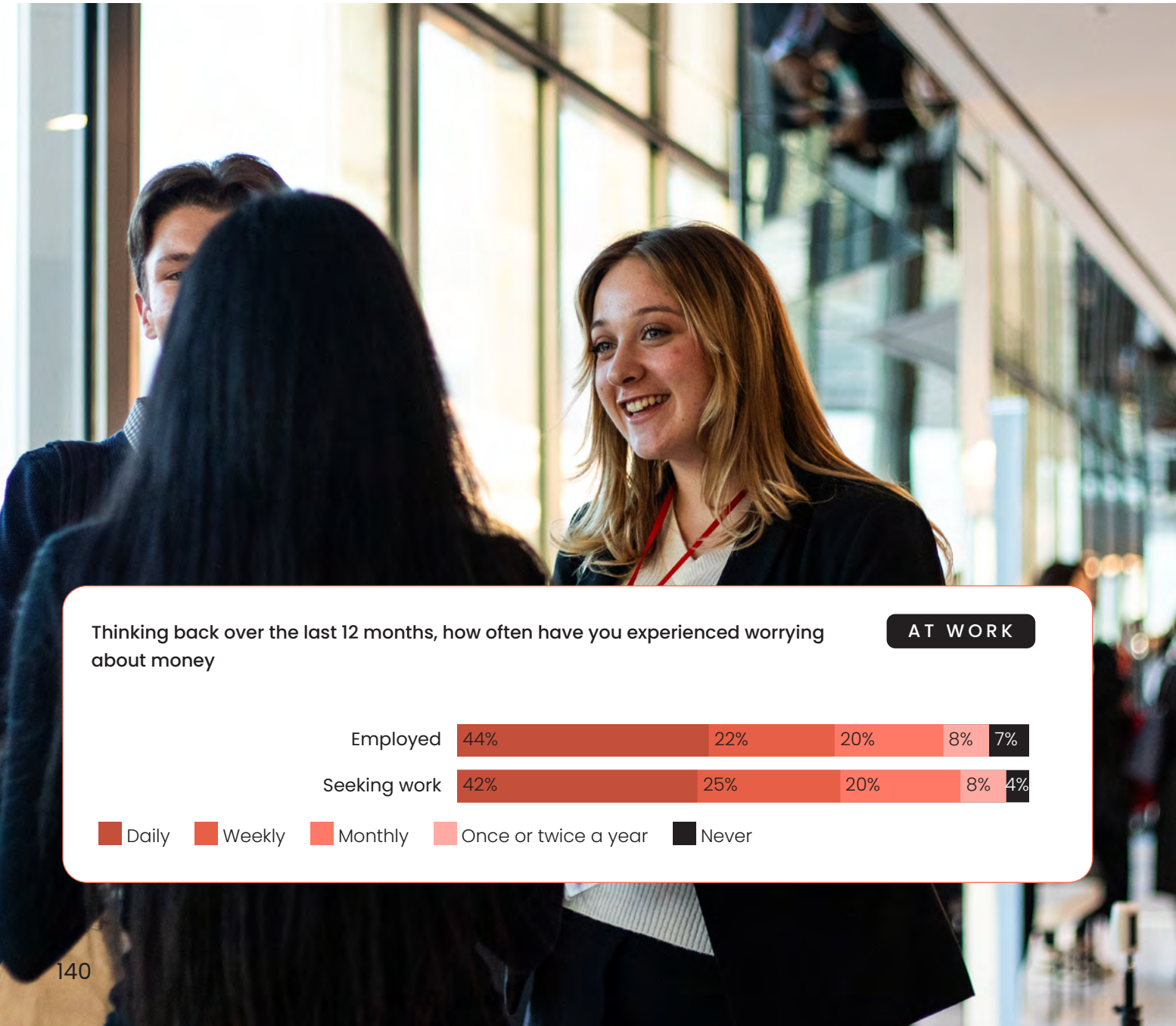


Looking at those with low MH and other MH difficulties in particular, lack of interest and not being aware of events or not being available were the biggest cited barriers to attending, though 1 in 5 graduates with MH difficulties and low MH said they were too busy to get involved.

Anxiety and mental health difficulties are key barriers, and as seen in the section on university life, feeling anxious can affect people's inclination to participate in social events. This is also true at work, affecting the quality of MH; 1 in 5 (18%) working graduates don't take part in social activities at work because of anxiety along with 1 in 8 (13%) of those with MH difficulties.

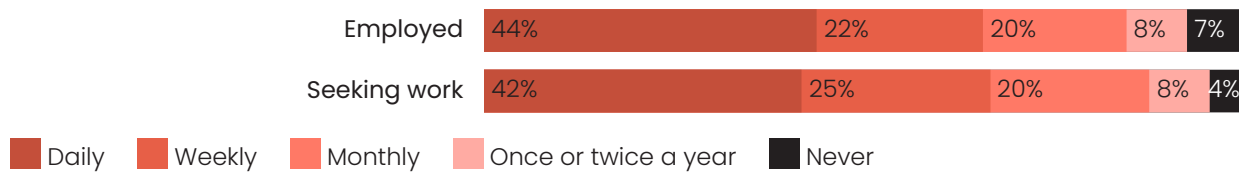
In addition, 2 in 3 (64%) respondents with low MH say anxiety stops them from utilising strategies to stay mentally healthy. This compares with 1 in 3 (35%) who have other MH difficulties and 1 in 2 working graduates overall who say social anxiety stops them using such strategies.

Not being able to afford to take part is a barrier and money worries affect working graduates almost as much as those still seeking work. This might be because once employed, they are expected to pay their way whether they have returned to living with parents or are living independently. In fact, marginally more employed graduates than those seeking work said they worried about money daily (44% vs 42%) though the percentage of employed graduates saying they never worried about money was higher than their work-seeking counterparts (7% vs 4%).



Thinking back over the last 12 months, how often have you experienced worrying about money

AT WORK



Self-help

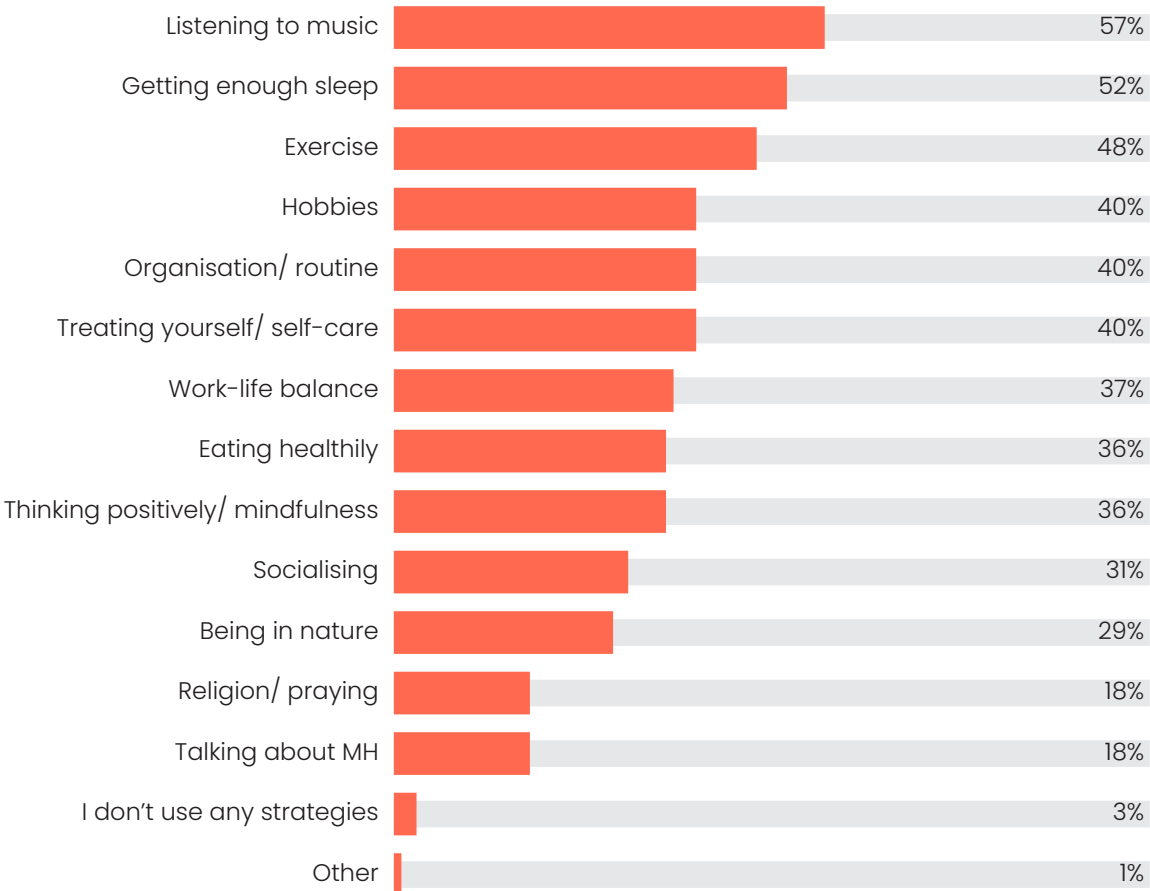
Employed graduates have their own strategies for managing their mental wellbeing and some of these may have been learned while they were at university. Even if they are not engaged with their work activities:

- 3 in 5 (57%) listen to music
- half (52%) ensure they get enough sleep
- half (48%) use exercise.

In addition, more than 1 in 3 said they use other strategies such as treating themselves/self-care, engaging in hobbies, eating healthily, maintaining a work-life balance and socialising as ways of managing their mental wellbeing, though 1 in 33 (3%) said they don't use any strategies at all.

When working under pressure or in a fast-paced environment, do you use any strategies to help stay mentally healthy?

TO WORK



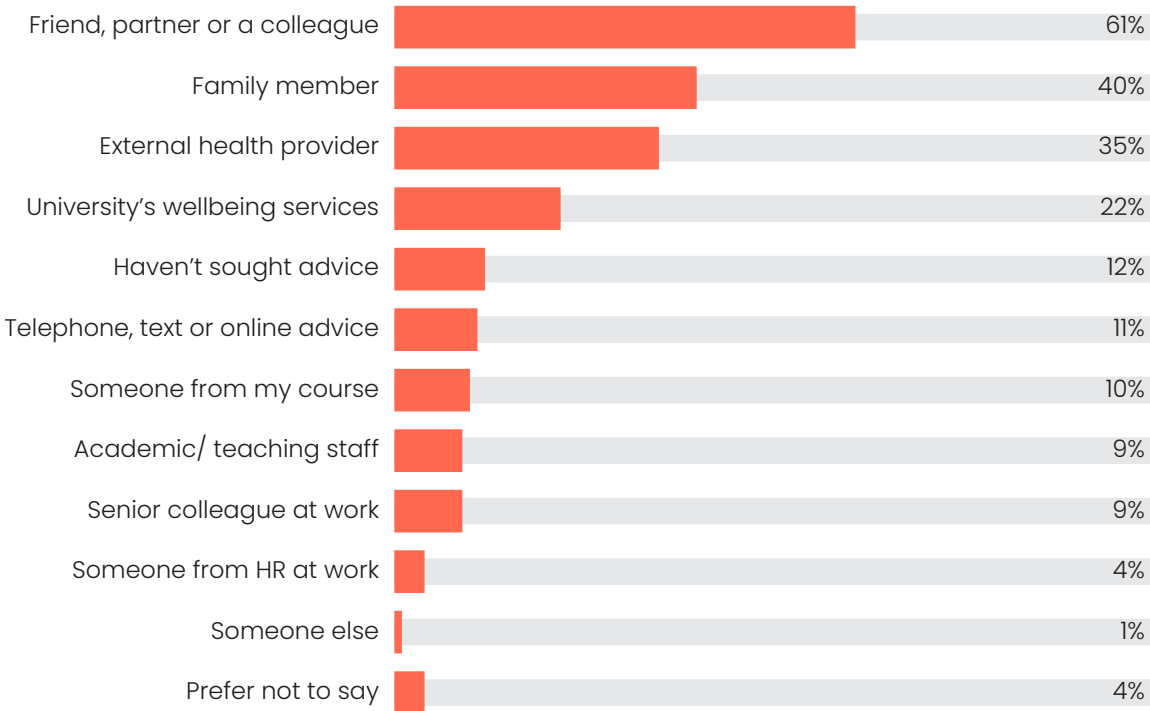
Where to get help and what help to get

Establishing an open line to MH support starts with letting graduates know where to get help, for themselves or for a colleague. Yet only half (49%) of those questioned agreed they knew where to get help for someone experiencing MH difficulties, and this percentage was significantly lower among respondents with low MH. On the other hand, 1 in 4 (25%) disagreed with the statement.

The type of MH support graduates want from their employer varies, but general wellbeing benefits, such as free or discounted gym memberships and providing and encouraging good work-life balance are all appreciated. Graduates are not keen on employees sharing their MH stories and celebrating MH awareness days.

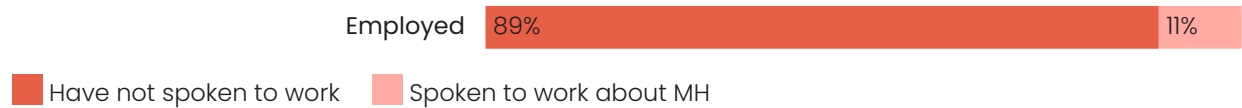
When working under pressure or in a fast-paced environment, do you use any strategies to help stay mentally healthy?

TO WORK



Who, if anyone, have you spoken to about your mental health difficulties?
Spoken to work about MH/ Have not spoken to employer

AT WORK



Even with the best set-up a graduate may not feel inclined to reveal that they are struggling with their MH to their new employer. Only 1 in 9 (11%) have spoken to someone at work about MH, while 8 in 9 (89%) have not spoken to anyone at work.

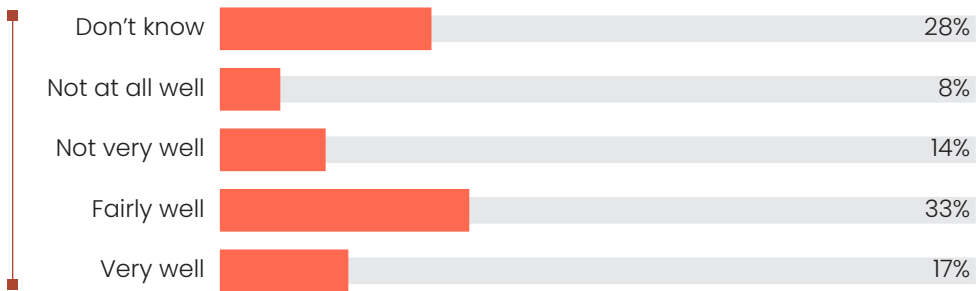
- 1 in 25 (4%) employed graduates experiencing MH difficulties speak to someone from HR at work
- 1 in 11 (9%) have spoken to a senior colleague
- 3 in 5 (61%) have spoken to a friend, partner or colleague.

And some respondents will have spoken to more than one of these options, eg a senior colleague and someone from HR. This is despite half (50%) of graduate respondents saying their employers supported people with MH challenges very or fairly well compared with 1 in 5 (22%) saying their employer supported people with MH challenges not at all well or not very well.

However, 2 in 5 (40%) respondents agreed that their current employer was doing everything possible to support their mental wellbeing at the moment, though 1 in 4 (24%) disagreed with this statement and 1 in 5 neither agreed nor disagreed.

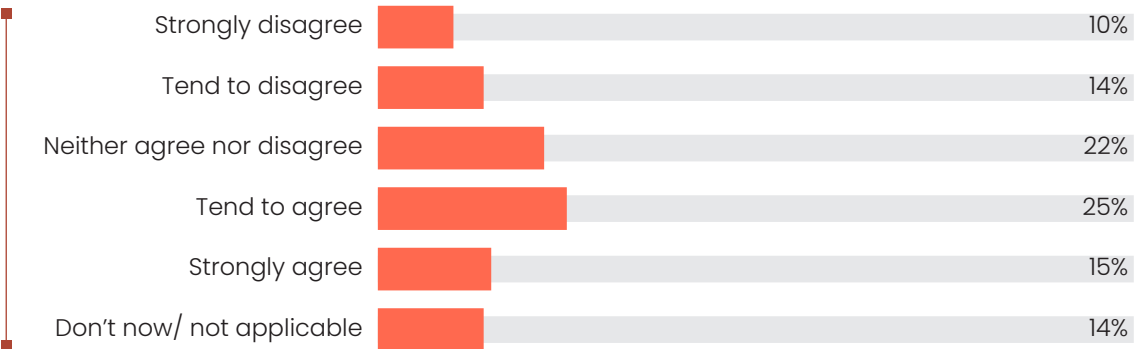
In your opinion, how well does/did your employer support people who experience challenges with their mental health in general?

AT WORK



My current employer is doing everything possible to support my mental wellbeing at the moment

AT WORK



Notably, employed graduates with a MH disability or from low SE backgrounds are most likely to think their employer is unsupportive of people’s MH.

Nearly half (46%) of respondents also felt empowered to work in a way that helped them maintain good MH, compared with 1 in 5 (22%) who disagreed with that statement.

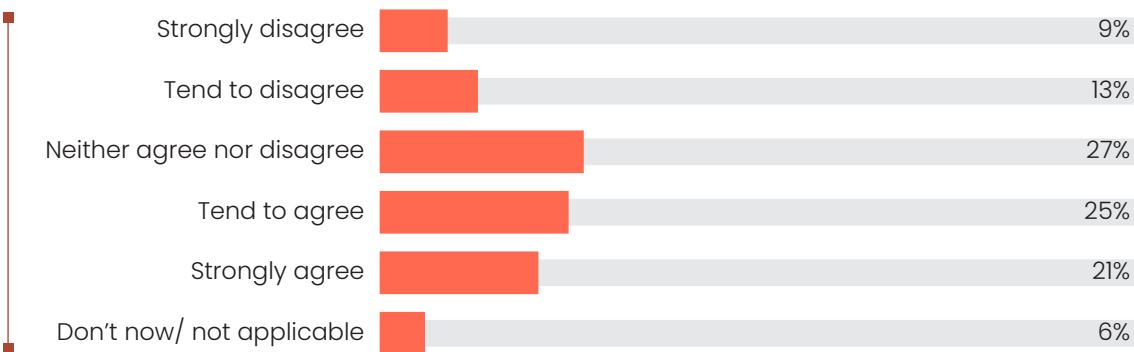
Other important work-related statistics include leadership and MH.

Asked if senior leaders in their company were human, open and caring about employees’ MH and wellbeing:

- 1 in 4 (24%) respondents disagreed
- 1 in 2 (46%) agreed
- 1 in 5 (18%) neither agreed nor disagreed.

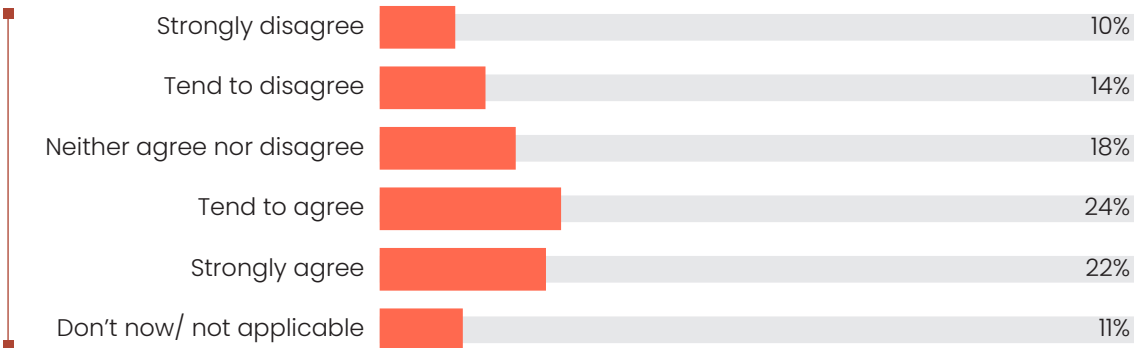
I feel empowered to work in a way that helps me maintain good mental health

AT WORK



The senior leaders in my current company are human, open and care about my mental health/emotional well-being

AT WORK



Where else might employees seek MH support?

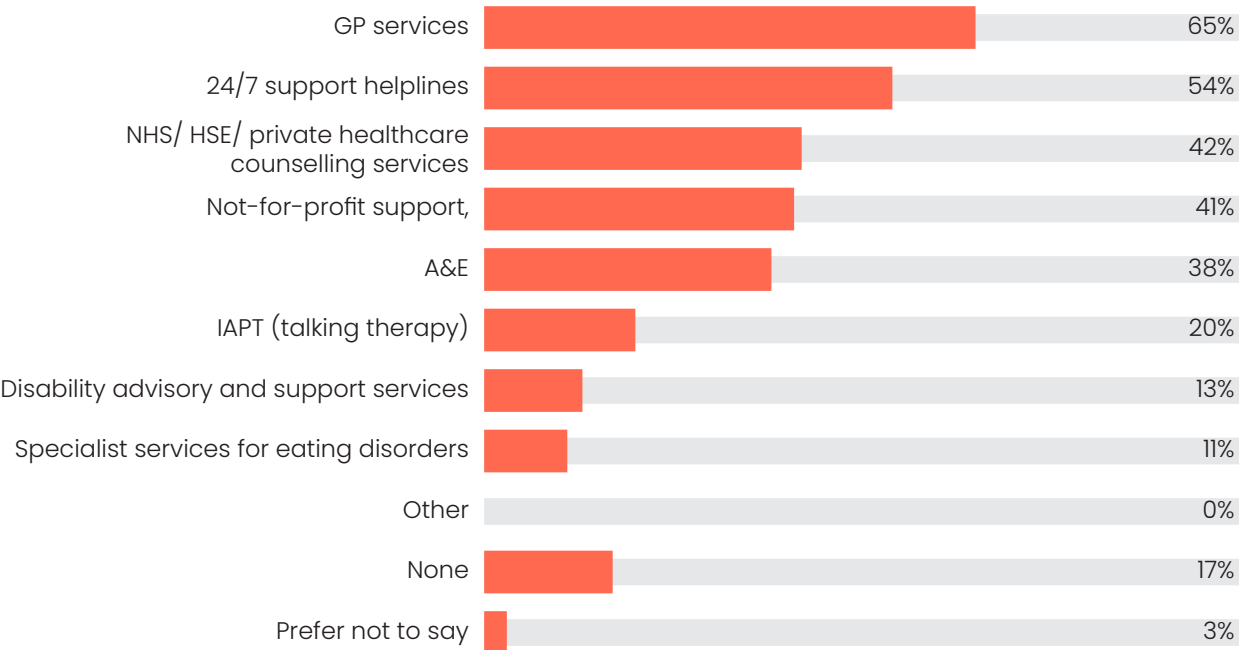
We have seen throughout this section that significant numbers of graduates don’t engage with employer support services or their colleagues when they are managing their MH or struggling with MH difficulties and instead turn to friends and family. So what formal services do they know of, and to the point, what services do they use when in need?

Nearly 2 in 3 (64%) graduates are aware of GP services and nearly half (46%) of those aware have used them. There is a marked preference for these services to be in person (69%) rather than online (10%), but that is not a reflection of actual engagement. GPs refer on to NHS counselling services and NHS Talking Therapies for Anxiety and Depression (previously known as the Improving Access to Psychological Therapies or IAPT) and only 68 (of a total of 752) graduates had used these.

Though the percentage of respondents who said they would prefer to use in-person accident and emergency (A&E) services is high (82%) the actual number who have used A&E services for MH support is small, just 44 in total and just over 1 in 3 (36%) graduates who had used such services felt they were effective.

Which of the following NHS/ HSE/ 3rd sector mental health support services are you AWARE of?

TO WORK

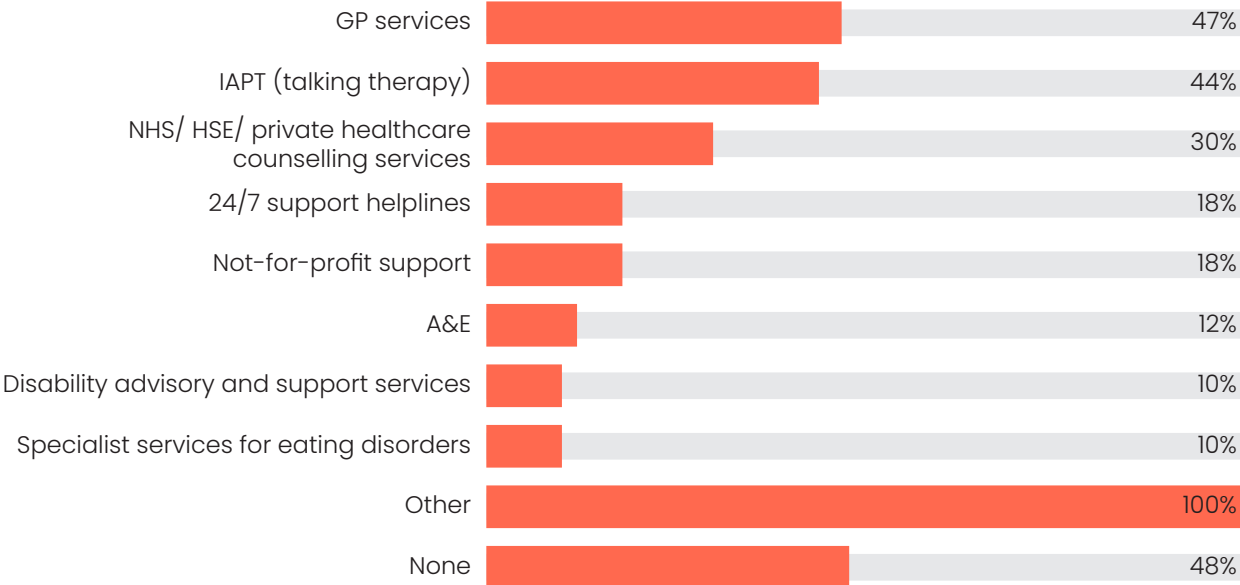


Counselling services, both those offered by the NHS and privately, were considered effective by 62% respondents who had used them, the same percentage as those who had used not for profit (NFP) support (eg Samaritans, Student Minds, Jigsaw). Looking across the graphic, there is a preference for in-person support services, except in obvious situations such as helplines.



Which, if any, of these services provided by NHS/ HSE/ 3rd sector have you USED?

TO WORK



When employees lose, employers lose

Stress, depression or anxiety accounted for 17.1 million days lost in 2022/23, 19.6 days per person on average. This was more than the next most common causes of days off:

- muscular-skeletal pain – 13.9 days per person
- general ill health – 17.8 days.

Source: [Health and Safety Executive](#)

Even at the start of their careers 2 in 5 graduates with MH challenges have had to take time off. For 1 in 4 (25%) that meant a few days off, while for 1 in 25 (4%) that meant quitting altogether.

Though 3 in 5 graduates have not had to take time off work for MH challenges, 3 in 4 (72%) have worried about their MH either monthly, weekly, or daily, in equal measure, with only 6% saying they have never worried about their MH and 14% worrying once or twice a year.

Notably, employed graduates also worry about their physical health in similar percentages and do this more often than graduates seeking work, possibly because unemployed graduates have more time to invest in their physical health.

However, the percentage of graduates in work who said they never worried about their MH, or worried once or twice a year, was higher than job-hunting graduates (28% vs 20%).



A 2024 study by [AXA UK](#) shows that poor mind health in the workplace cost the UK economy £102 billion in 2023.

In June 2023 the Chartered Institute of Personnel and Development ([CIPD](#)) stated that MH issues affect one in four people at some point in their lives and have a significant impact on employee wellbeing.

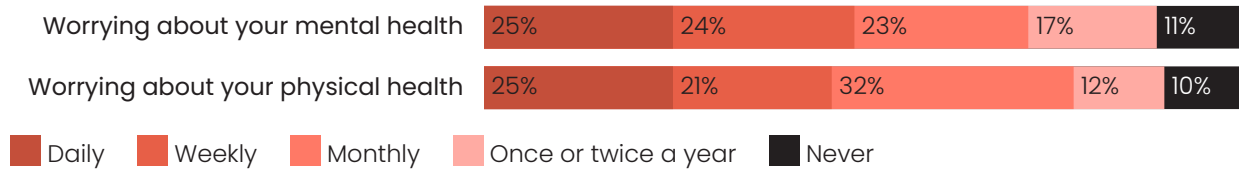
Have difficulties with your mental health ever led to the interruption of work (ie having to take time off as a direct result of your mental health)?

AT WORK



Thinking back over the last 12 months, how often have you experienced the following?

AT WORK



It is clear that the best employers ensure that they offer adequate, affordable and suitable opportunities for newly employed graduates to either manage or maintain their MH. Respecting that some graduates will always prefer to turn to friends and family first at times of MH difficulty is no barrier to being a supportive employer.

The most diligent HR teams should be watching out for signs that a graduate is not making friends or feeling connected at work, not engaging in activities and not talking about workload or other stress-inducing issues. As already noted, graduates who have supportive employers and communities at work have better MH outcomes. And that is a win-win for everyone concerned.



What do we mean by a supportive employer?

Cibyl divides employer support into two categories and all criteria needed to be met for an environment to be categorised as either supportive or unsupportive.

Most respondents were therefore in neither supportive nor unsupportive environments.

Direct support

The practical support an employer provides (eg do they feel their employer cares and offers MH services).

Indirect support

The emotional support received through friends, family and student peer group (creating a sense of community/belonging).

Criteria

- Generally supportive of employees' MH
- +
- Employer is supportive of respondent's MH
- +
- Able to study in a way that maintains good MH
- +
- Know where to access MH support services (at work).

Criteria

- Feels connected to other colleagues
- +
- Has friends at work
- +
- Involved in social activities
- +
- Lives with friends or family

The questions Cibyl asked:

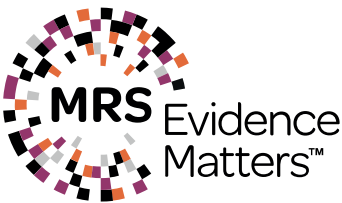
- How well does your employer support people who experience challenges with their MH in general?
- My current employer is doing everything possible to support my mental wellbeing at the moment.
- I feel empowered to work in a way that helps me maintain good MH.
- I know where to go to get help for myself or a friend/colleague who is experiencing MH difficulties.

The questions Cibyl asked:

- I feel connected with my colleagues.
- Which of the following statements is most like you at work?
- Do you take part in any community or social events at work?
- Which statement best describes who you live with?

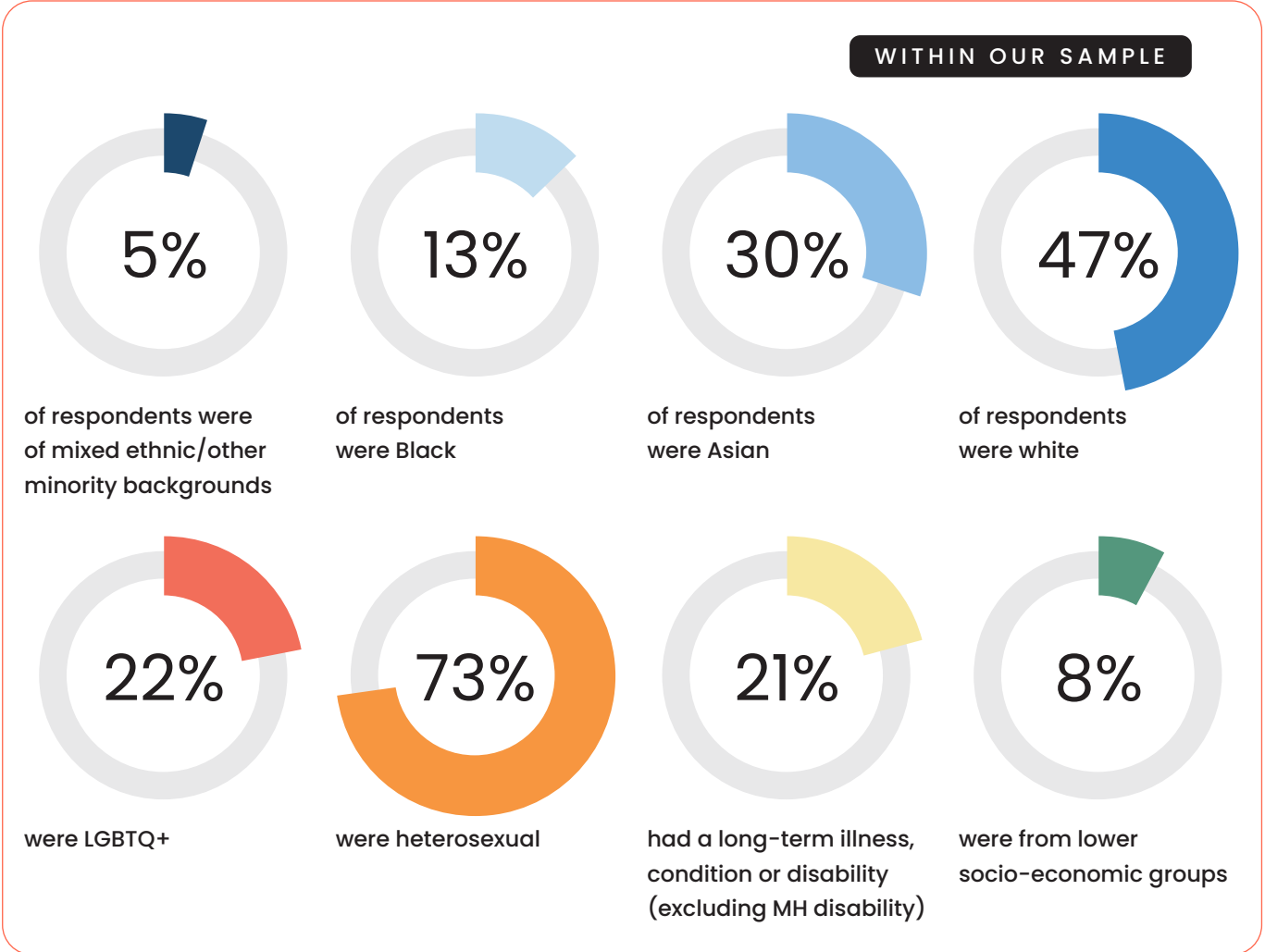
Methodology

For this year's survey Cibyl contacted students and recent graduates from 145+ universities across the UK, using Cibyl's database, university partnerships, and access to more than 1.5 million students.



The survey was conducted online by Cibyl between October 2023 and February 2024 and was completed by 12,644 respondents (92%* current university students and 7% graduates within the last two years). 38% of our respondents were international students.

Data was weighted by gender and university to ensure the results were representative of the national student body.



*Percentages are rounded to the nearest percentage point.

University Mental Health Charter

Developed with common goals, the annual Cibyl UK Student Mental Health study and the University Mental Health Charter promote dialogue between students, university staff and MH supporters and practitioners. Over the years, they have advocated maintaining student MH, promoting wellbeing, improving services and banishing stigma.

The [University Mental Health Charter](#) was undertaken by [Student Minds](#) and a number of higher education organisations, supported by the Office for Students and a grant from the University Partnerships Programme (UPP) Foundation.

The charter stemmed from an aim to address the gap in care for students with MH challenges, focusing on suicide prevention in particular. It was initiated with the input of 360 students and staff at 181 universities across the UK, and an online survey of 2,274 staff and students.

[Student Minds](#) promotes a student-led improvement tool based on the charter's principles of good practice.

The tool allows students to:

- Reflect on how their university supports mental health
- Look at what their university does well and what needs more work
- Make recommendations for improvement
- The tool aims to ensure that students' voice remain central to the on-going whole-university approach.

There are four core themes within the charter:

Learn

- Understanding students' needs as they transition into university, particularly in their first year.
- Maintaining a holistic approach to students' development throughout their time at the university, including periods of absence, placements and beyond into career or further studies.
- Ensuring the learning environment is supportive of good MH.

Support

- Establishing services are well resourced, safe, effective and accessible to all students, regardless of background, culture or disability.
- Assessing support services' effectiveness and responsive to immediate, long term and future needs.
- Enabling access and reducing risk through collaboration between the university, students, families, NHS and other support services to prevent serious harm and suicide while maximising choice and student autonomy.

Work

Addressing the MH needs of university employees by enabling staff to adopt and maintain healthy lifestyles and workplace behaviours.

Live

- Building a university culture and environment promoting the positive MH of all members of the community.
- Making it safe for students and staff to raise concerns and offering access to a range of helpful resources and interventions.
- Prioritising MH as important, breaking down barriers and improving messaging and role modelling from leadership, making it easier to disclose poor MH.

Terminology

Mental health definitions

The report makes distinctions between mental health (MH) difficulties, disability and a low MH score.

Mental health difficulties

Respondents who have experienced one or more of the following:

- Three or more negative feelings or behaviours from a list in the last 12 months
- MH difficulties either currently, or in the past
- Experienced suicidal feelings.

Mental health disability

Respondents who:

- Self-identified as having a MH disability as defined under the Equality Act 2010
- Had depression, schizophrenia and/or anxiety disorder.

Low mental health score

- Low WHO-5 score of less than 50*
- Three or more negative feelings or behaviours in the last 12 months
- Low ONS wellbeing score of less than 20**.

*The WHO-5 consists of five statements, which respondents rate 0-5.

The total raw score, ranging from 0 to 25, is multiplied by 4 to give the final score, with 0 representing the worst imaginable well-being and 100 representing the best imaginable well-being.

Low score: <50 | Very low score: <28

**The ONS Wellbeing score consists of four statements, which respondents rate 0-10.

The total raw score ranges from 0 to 40.

Low score: < 20 | Very low score: < 12.

Supportive environments

Universities

What is meant by a supportive university?

See explanation on page 95.

Employers

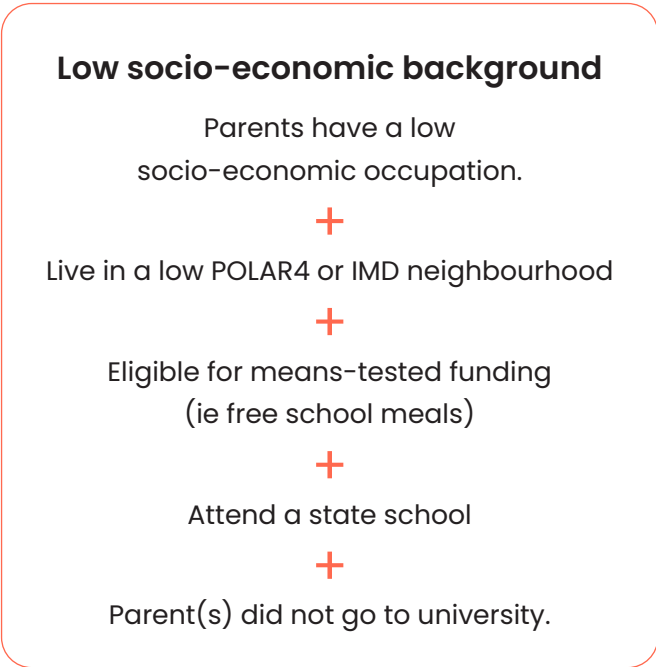
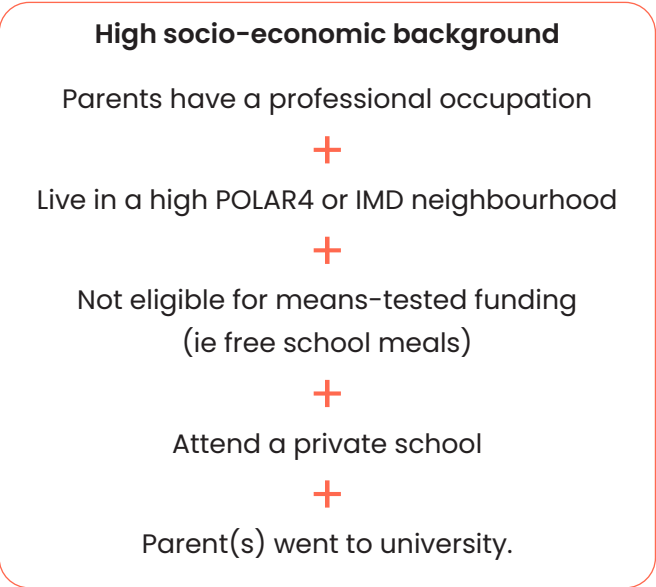
What is meant by a supportive employer?

See explanation on page 149.

Background, participation and deprivation

Background

Respondents need to make at least four metrics to be considered as coming from a high or low socio-economic (SE) background. Most respondents are therefore neither high nor low.



POLAR4

Participation of local areas (POLAR) measures how likely young people are to participate in higher education across the UK and how this varies by area.

It classifies local areas into five groups (1= lowest, 5 = highest) based on the proportion of young people who enter higher education aged 18 or 19 years old.

For a more detailed explanation visit the [Office for Students](#) (OfS).

Measuring deprivation

Indices of Deprivation (IoD) measure relative deprivation at a small local area level across England/Scotland/Wales/Northern Ireland. Each country publishes its own IMD in different years, and the number of areas differ depending on how many Lower layer Super Output Areas (LSOA) a country has.

Indices of Multiple Deprivation (IMD) combine information from seven domains of deprivation with different weights:

- income (22.5%)
- employment (22.5%)
- education (13.5%)
- health (13.5%)
- crime (9.3%)
- barriers to housing & services (9.3%)
- living environment (9.3%).

The areas are split into deciles. The 1st decile shows the most deprived areas. The 10th decile shows the least deprived areas.

	England	Wales	Scotland	Northern Ireland
Published in	2019	2019	2020	2017
Number of LSOA areas	32,844	1,909	6,976	890

For more detailed analysis visit:

- [The House of Commons Library](#)
- [The Welsh government](#)
- [The Scottish government](#)
- [Northern Ireland Statistics and Research Agency \(NISRA\)](#)

Sexual orientation and gender identity

LGBTQ+ describes:

- Gender – eg non-binary or respondents may prefer their own terminology
- Gender identity – eg transgender
- Sexuality – eg asexual, bisexual, gay/lesbian, pansexual, queer or questioning.

About Cibyl

Cibyl is an independent market research agency specialising in student research projects across the UK and Ireland. Cibyl has been providing research and insights to hundreds of employers and educators for over ten years.

Here at Cibyl, we are experts in supporting our research partners with their early careers attraction and hiring strategies, as well as improving access to careers support and employability. Our research analysts are MRS qualified and the team has decades of experience in the early talent sector.

Working with a pool of 1.5 million schools, university students and graduates from all year groups and regions, Cibyl provides some of the largest and most representative samples in the UK and Ireland.

Cibyl's research enables brand development, value proposition, hiring attraction strategy, diversity, equity and inclusion performance, virtual engagement, wellbeing, L&D, talent management and career service planning. It offers unparalleled insight for employers, professional bodies, universities and researchers.

See what diverse groups of school, college and university students really think. Visit us at www.cibyl.com



Cibyl is part of Group GTI

Cibyl is a form of Sybil, derived from the Greek sybilla or sibilla, meaning 'prophetess' – seeing the future.

Acknowledgements

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About our partners



Accenture

Accenture is a leading global professional services company that helps the world's leading businesses, governments and other organisations build their digital core, optimise their operations, accelerate revenue growth and enhance citizen services – creating tangible value at speed and scale. We are a talent- and innovation-led company with approximately 750,000 people serving clients in more than 120 countries. Technology is at the core of change today, and we are one of the world's leaders in helping drive that change, with strong ecosystem relationships. We combine our strength in technology and leadership in cloud, data and AI with unmatched industry experience, functional expertise and global delivery capability. We are uniquely able to deliver tangible outcomes because of our broad range of services, solutions and assets across Strategy & Consulting, Technology, Operations, Industry X and Accenture Song. These capabilities, together with our culture of shared success and commitment to creating 360° value, enable us to help our clients reinvent and build trusted, lasting relationships. We measure our success by the 360° value we create for our clients, each other, our shareholders, partners and communities.

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Universities UK is the collective voice of 141 universities across the UK.

Our mission is to harness the power of the UK's universities and create the conditions for them to thrive. We bring them together to pursue a common cause: thriving universities, serving society.

We work with the government and higher education sector to champion UK higher education.

We do this by:

- influencing policy and opinion
- bringing our universities together to take collective action
- providing insight into our universities.

Our work focuses on:

- creating opportunity
- growing the economy
- making groundbreaking discoveries
- securing sustainable funding
- building pride in our universities through our campaigns.

Universities Wales and Universities Scotland work autonomously as part of Universities UK, representing the interests of universities in Wales and Scotland.

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