

FEARLESS FEMME®



Fear of the Future?

A report on the mental health of young female and non-binary students in the UK

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ABOUT FEARLESS FEMME®

Fearless Femme is a mental health project, magazine and creative community that empowers young female and non-binary people to overcome mental health problems. Young women are now the highest-risk group for mental illness in the UK, and those in higher education face additional pressures, caused by transitioning away from home, academic pressures and financial difficulties. Young female and non-binary students also face broader societal pressures such as sexual discrimination and misogyny.

Fearless Femme has sought to address these pressures, and the negative impact that they are having on the mental wellbeing of young female and non-binary people, through multiple activities. First, we produce an online magazine that encourages young female and non-binary people to share their mental health stories – through artwork, poetry and prose – as a form of therapeutic self-care. Publishing with Fearless Femme helps our young female and non-binary volunteers work through their anxieties and build their resilience. Second, our online magazine is freely accessible, so anyone dealing with mental ill-health can read through our honest and uplifting online content and feel they are not alone, as well as accessing our mental health resources. Third, Fearless Femme has created a research programme to identify the main mental health challenges and structural inequalities that young female and non-binary people in the UK face, and to develop policy recommendations for governments and educational institutions based on the data collected.

Our aim is to give young adults dealing with mental ill-health an opportunity to shape mental health policies and, fundamentally, to tackle the causes of ill-health.



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Investing in a Smart, Sustainable and Inclusive Future

This research report is part of the project 'The Mental Health Challenges of Young Women' undertaken by Fearless Femme CIC which is funded by the Scottish Government and European Social Fund.

EXECUTIVE SUMMARY

Fearless Femme CIC is a UK-based social enterprise that produces a magazine, research programme and campaigns focussed on improving the mental health of young female and non-binary people.

In this report, we present the findings of our research on the mental health of young female and non-binary students across the UK, who are considered to be among the highest-risk groups for mental ill-health (Macaskill, 2013; McManus et al., 2016).

Our main research questions are: What are the main causes of mental ill-health for young female and non-binary students? And what can be done to prevent mental ill-health and improve the wellbeing of young adults?

We divided our research into five themes, which we asked UK-based respondents about:

- 1 Mental Health and Starting University
- 2 Mental Health in Education
- 3 Mental Health after Graduation
- 4 Changing Mental Health Policy
- 5 Fearless Femme's Impact on Mental Health (of readers and volunteers)

We conducted this research between April and November 2018, which was based on qualitative and quantitative methods including surveys, polls and case studies totalling 946 responses from young female and non-binary people from across the UK.

OUR MAIN FINDINGS ARE:

- Students have become fearful of the future owing to exam-related stress.
- Students are often unaware of, or find it difficult to access, support for their mental health while at university/college and often feel they need more support than that which is offered.

- Students feel that counselling services at university and college are insufficient to meet their needs, and would prefer to access free long-term talking therapies.
- Students feel that more focus should be placed on preventative wellbeing strategies that support people before they reach crisis point.
- Students feel stressed by the pressures placed on them to achieve top marks and the fearful rhetoric around their life chances if they fail academically.
- Students feel that the period immediately after leaving university and college is particularly stressful, and many suffer from 'post-graduation depression'.

OUR MAIN RECOMMENDATIONS FOR UNIVERSITIES + COLLEGES ARE TO:

- increase the visibility of student mental health services;
- make it easier for students to disclose, and receive support, for mental health conditions prior to their arrival;
- increase student counselling capacity;
- focus on preventative strategies as well as acute responses to student distress;
- set a more honest narrative about failure and expectations;
- be more sensitive to high levels of student anxiety at exam time and introduce flexibilities around assessment;
- continue supporting students for the first 6-12 months after graduation;
- work more closely with NHS services in supporting student mental health;
- give clearer guidance on mental health support and workload adjustments;
- run campus-wide campaigns to de-stigmatise mental health.

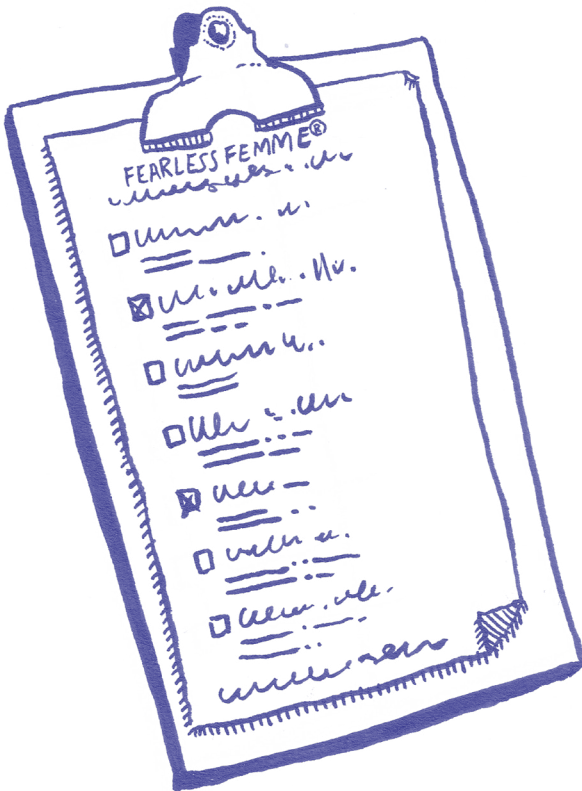
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RESEARCH DESIGN

Fearless Femme has conducted an exploratory research programme into the main causes of mental ill-health among young female and non-binary people aged 18-25 across the UK, with a particular focus on the student experience. This is a grossly under-researched area that we seek to shine a light on, by exploring the intersection between gender, mental health and student life.

The rationale behind focusing on these target groups is because young women, non-binary people and students are considered at greater risk of mental illness than the general population (Neves & Hillman, 2017). For instance, research by Girlguiding (2015) has found that 46% of young women aged 17-21 are affected by mental ill-health; the Scottish Trans Alliance has found that 65% of non-binary people have poor mental health due to exclusion and discrimination (Valentine, 2015); and a survey by the National Union of Students (2015) revealed that 78% of students have experienced mental health issues at some point in their studies. Psychologists have also conducted research on the benefits of creative expression as a form of therapeutic self-care in supporting people's mental wellbeing (Malchiodi, 2005), and we seek to test this for ourselves by exploring the impact of Fearless Femme's creative activities and campaigns on the mental wellbeing of our readers, writers and artists.



AIMS

- 1 To find out more about the state of young female and non-binary people's mental health and the main challenges they are facing at university/college.
- 2 To encourage young female and non-binary people to identify any gaps in mental health services and support, and to propose changes to policy based on these gaps.
- 3 To discover the extent to which Fearless Femme has helped young female and non-binary people deal with their mental health challenges through reading, writing and participating in our creative community, research and campaigns.

RESEARCH QUESTIONS

What are the main causes of mental ill-health for young female and non-binary students?

What can be done to prevent mental ill-health and improve the wellbeing of young adults?



RESEARCH METHODS

Our research on the mental health of young female and non-binary students at universities and colleges across the UK was conducted online between April and November 2018.

We based our research around five themes, which we believe add value to existing research and give young female and non-binary respondents an opportunity to share their voices and concerns around gender, mental health and student life.

1. **STARTING UNIVERSITY**
2. **SURVIVING EDUCATION**
3. **LIFE AFTER GRADUATION**
4. **MENTAL HEALTH POLICY**
5. **IMPACT OF FEARLESS FEMME**

Our applied research was based on qualitative and quantitative methods, including analysis of academic literature on the mental health of young adults, 7 surveys with a mix of closed and open-ended questions, 13 twitter polls, 9 Instagram polls and 4 in-depth case studies with UK-based contributors.

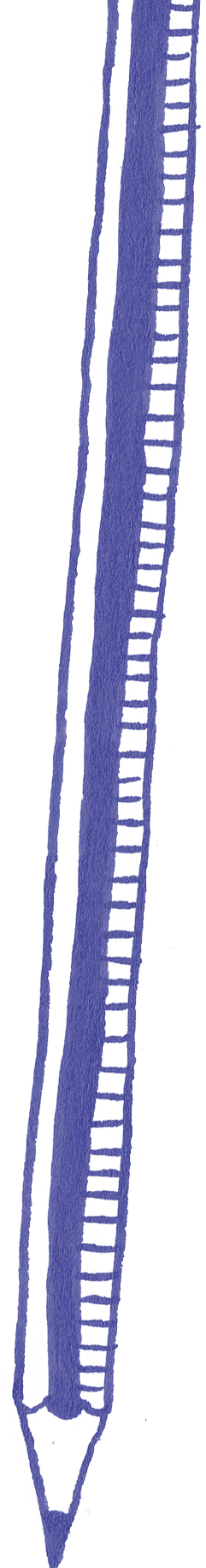
We disseminated our data collection tools by creating pop-ups on the Fearless Femme website and emailing contributors with invitations to fill out the surveys which were hosted on SurveyMonkey; advertising our surveys and polls on our social media channels and encouraging people to repost them; and encouraging our weekly Newsletter readers to respond.

PARTICIPANTS

We received 946 responses from our magazine readers, contributors and social media followers who are students or graduates of universities and colleges across the UK. Of these we know that 95% of survey respondents were female or non-binary, and approximately 80% of our Twitter and 92% of our Instagram followers are female. There is a strong element of voluntarism in our research programme, whereby young women and non-binary people saw our open calls and made a choice to respond.

We acknowledge that this is not a fully representative sample of all young female and non-binary people in the UK, due to the self-selection by respondents, however we believe this research adds value by shining a light on an under-researched area, and allowing the voices of young adults to come through.

All survey responses were anonymous. We have randomly assigned names to participants from lists of the most popular names in the UK over the last 30 years.



SOCIAL MEDIA KEY

 = Instagram respondents

 = Twitter respondents

 = SurveyMonkey respondents

STARTING UNIVERSITY

RATIONALE

Many students arrive at university or college with pre-existing mental health conditions. For instance, one academic report in 2010 estimated that 51% of students who suffer mental illness have developed the illness before they started university (Storrie, Ahern & Tuckett, 2010). More recently, the World Health Organization's World Mental Health International College Student Initiative revealed that one-third of first-year college and university students around the world report symptoms consistent with a diagnosable mental health disorder (Auerbach et al., 2018).

AIMS

- To probe the extent to which young female and non-binary people struggle with their mental health prior to starting university or college.
- To examine the support they received in making the transition to higher and further education.
- To evaluate how their experiences could have been improved through additional support or services before or upon arrival at university or college.

METHODS

We conducted one survey, four Twitter polls and two Instagram polls asking a range of questions about the mental health experiences of students when

starting university. We received 178 responses to this research sub-theme (21 through surveys, 118 through Twitter and 39 through Instagram).

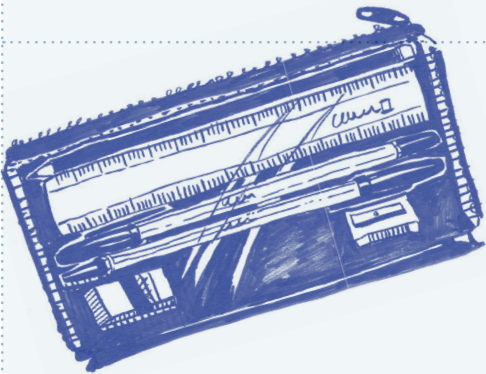
KEY FINDINGS

Our findings revealed that 65% of respondents had a mental health condition when they began university. The following conditions were most prevalent: depression (69%), anxiety (38%), eating disorders (31%), self-harm (31%), post-traumatic stress disorder (15%) and suicidal thoughts (15%). However, only 6% of respondents said they informed the university of their mental health condition prior to starting university.

In terms of support, over 80% of respondents felt that they did not receive information from their university about mental health support prior to, or upon, their immediate arrival at university.

When starting university, the top causes of stress were "making friends" (67%), "financial concerns" (48%) and "adjusting to the workload" (38%). In order to support their mental health when making the transition to university, respondents suggested that the university should offer "free student counselling" (69%), "planning and resilience tips" (15%) and "enable coursework flexibilities" for students dealing with mental health issues (10%).

65% FELT THEY HAD A MENTAL HEALTH CONDITION WHEN STARTING UNIVERSITY



WERE YOU GIVEN INFORMATION ABOUT MENTAL HEALTH SUPPORT AVAILABLE...

BEFORE YOU ARRIVED

NO = 81%

21

WHEN YOU JUST ARRIVED

NO = 83%

30

"I struggled to make friends due to low confidence and low-self esteem. I hated myself, so why would anyone else like me or want to be near me? I also felt a horrible feeling of not belonging ... it was a feeling of wanting to feel at home, wanting to feel like I belonged. I hadn't found that at home, nor did I find it in the university halls of residence, surrounded by people - KIMBERLEY

TOP 3 CAUSES OF STRESS WHEN STARTING UNI

67% Making friends

48% Financial concerns

38% Adjusting to workload

21

"I would make sure that whatever services were on offer within the university were well advertised, so that people knew about them. I would also make sure that outside services were well signposted" - ANNABEL

"I would explain in a set out policy that's distributed to staff and students at the beginning of the year about what is to be done when mental health issues occur, and what both parties are expected to give and expect from such a situation so it's not left up to individual discretion about how to deal with it" - CARLA

"Give everyone a mental health pack during Welcome Week that has information on a variety of mental health issues, advice on how to help yourself and where you can go to get professional help" - FATIMA

"Create a system to follow-up on how new students face their first months" - JANE

"I would like the services to be more visible and accessible" - HELEN

DID YOU RECEIVE ADEQUATE MENTAL HEALTH AND WELLBEING SUPPORT FROM YOUR UNIVERSITY BEFORE AND AFTER YOUR ARRIVAL?

NO	SOMEWHAT	YES
52%	29%	19%

👤 = 21

I would like to see more awareness and openness around mental health, reducing the stigma and the fear of seeking help – so, more universal services around promoting positive mental health and wellbeing for all students. Promoting social activities for students that don't revolve around alcohol and late nights. More openness and a more comprehensive list of what services are of offer to students and what the criteria is to access them – KIMBERLEY

WHAT KIND OF MENTAL HEALTH SUPPORT/SERVICES FOR STUDENTS WOULD YOU LIKE TO SEE MORE OF?

“Student counselling services that you don't have to be on a 6+ month waiting list for. A service that makes more of an effort to reach out to students, as many of us will just not seek help for a variety of different reasons” – FATIMA

“More availability, as I have friends who were put on long waiting lists for counselling. Also, more visibility and student-led services as it is easier to access them, and you are more likely to do so sooner” – JENNA

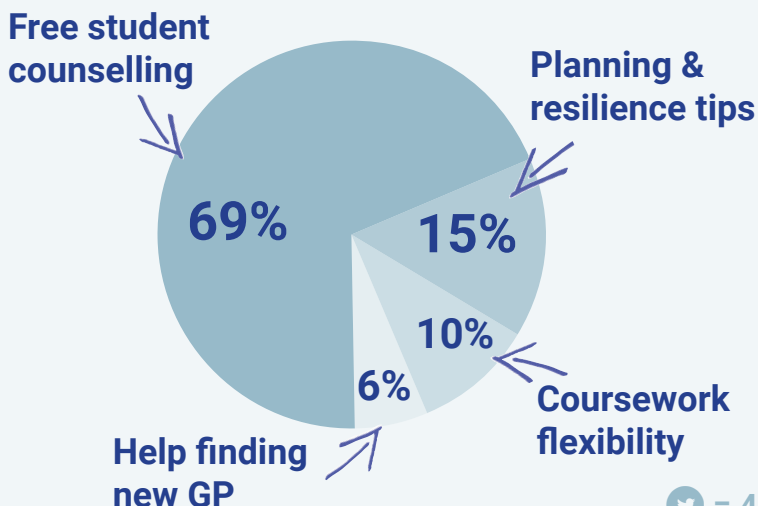
“I'd like to see more training for staff – when my mental health issues kicked in lecturers/tutors had a lack of understanding around it” – HOLLIE

75%

SAID THEIR UNI DID NOT OFFER FREE LONG TERM STUDENT COUNSELLING



WHAT TYPE OF MENTAL HEALTH SERVICES WOULD BEST HELP STUDENTS WHEN MAKING THE TRANSITION TO UNI?



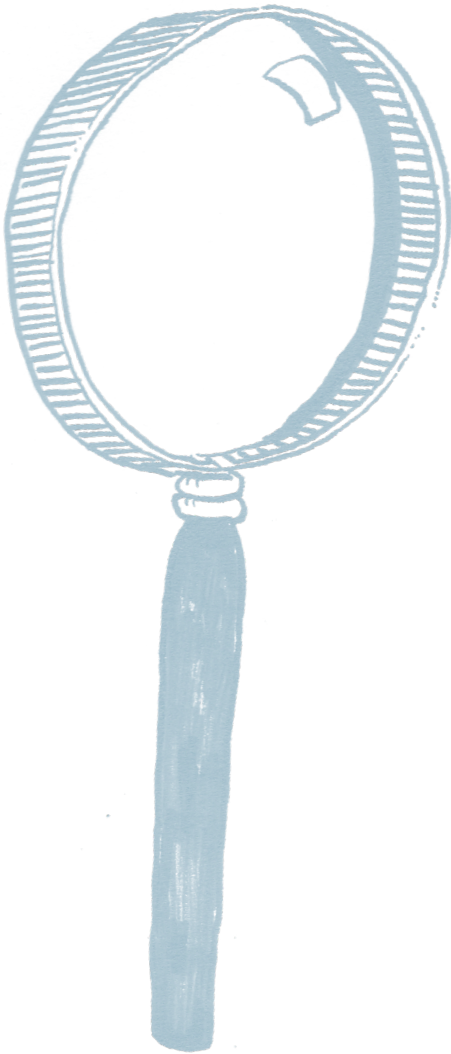
👤 = 49

WHAT WOULD YOU DO TO BETTER SUPPORT THE MENTAL HEALTH & WELLBEING OF STUDENTS STARTING UNIVERSITY?

“Part of the application for university would have space to talk about any mental health or wellbeing support an individual may need with no way for this to be something that affects application acceptance” – KATIE

“Provide a range of services, and support for students with mental health issues and ensure that there was an up to date list of all the relevant support available and how to access it/criteria for accessing it” – KIMBERLEY

“Increase the capacity of counselling services the university has to offer to ensure those who would benefit from these services can actually see a qualified practitioner” – PAMELA



OUR RECOMMENDATIONS

1. PRE-ARRIVAL

Make it easy and comfortable for students to disclose pre-existing mental health issues to university or college staff and provide clear information on university and college websites stating what support is available to encourage pre-study reporting.

2. UPON ARRIVAL

Give students clear information on where to find mental health services, and how to access them, alongside more training for staff and a campus-wide wellbeing campaign that raises the visibility of mental health services.

3. COUNSELLING

Increase student counselling capacity and offer long-term support for those who need it, and provide wellbeing resources for students with less acute conditions.

SURVIVING EDUCATION

RATIONALE

Previous research has shown that mental health issues have become widespread amongst students, with HEFCE reporting “increasing numbers disclosing pre-arrival; increasing needs emerging while students are at university; and increasing complexity of problems” (Williams et al., 2015, p.3). A survey by the National Union of Students (2015) found that 87% of students experience stress, 77% have anxiety, and 48% of students have experienced panic.

AIMS

- To explore the extent to which female and non-binary students struggle with their mental health during education.
- To identify the main causes of distress for students in education.
- To evaluate student experiences of university and college mental health services across the UK.

METHODS

We conducted one survey, two Twitter polls and two Instagram polls asking a range of questions on this topic. We received 182 responses to this research sub-theme (42 through surveys, 81 through Twitter and 59 through Instagram).

KEY FINDINGS

Our findings reinforced previous research that there is a mental health crisis amongst

students in the UK. The vast majority of our young female and non-binary students (98%) said they had suffered from mental health issues whilst at school, college or university (with 67% stating that they “regularly” struggled with their mental health while 29% “sometimes” struggled).

Some of the main stress factors that were highlighted included “course work deadlines” (45%), “fearful rhetoric about failure” (40%) and “exams” (36%).

However, 74% of respondents felt the educational institutions they attended did not give them the support and resources they needed to manage their mental health

Exam time came to light as a particular stressor for young female and non-binary students, with 81% feeling that the exam rhetoric in education had a negative effect on their mental health. When asked what the main source of pressure around exams is, 38% said “fear of the future”, 32% said “teachers and tutors” and 19% said “peers and social media”.

When asked what would be most helpful to manage pressures at exam time, almost half of respondents said that “less fearful rhetoric” would be most helpful.

98% EXPERIENCED MENTAL HEALTH STRUGGLES DURING EDUCATION

🗣️ = 42

"I felt there were few resources available, and that these were not adequately communicated to students - DANIELLE"

"All services being offered seemed to be for people who are suffering seriously, e.g. counselling appointments. My mental health issues weren't serious enough for that, I felt, but I would have appreciated information and advice on wellbeing and prevention - ELLIE"

"I think our own expectations for ourselves can create an internal bad rhetoric, i.e. if I don't get four As I won't get into university, and if I don't get at least a 2.1, I won't get employed. This fear of the future comes from the whole be-all-and-end-all that exams presents." - ELIZABETH

"Seeking assistance was confusing and non-specific. The university experience was much more transactional than nurturing and empowering" - ABBY

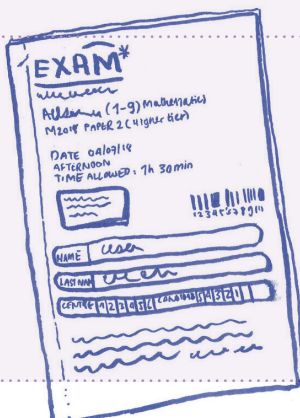
WERE YOU GIVEN THE SUPPORT YOU NEEDED TO MANAGE YOUR MENTAL HEALTH AT SCHOOL/UNI?

🗣️ = 46



81% SAID THE EXAM RHETORIC AT SCHOOL/UNI HAD A NEGATIVE EFFECT ON THEIR MENTAL HEALTH

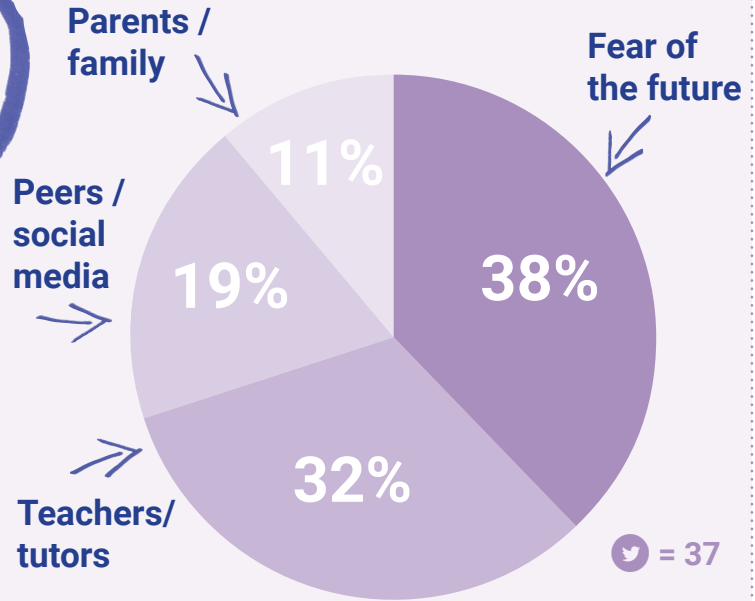
🗣️ = 27



"They provided free on campus counselling and GP appointments but when I availed of these they were terrible experiences. Some of the departments were good for illness certificates and late hand-ins, but it was a department-by-department basis with no set policy I could check where I stood with- CARLA"

"I know so many friends who would get unwell from exam-related stress, it's so sad that we do this to our young people, just for some letters on a piece of paper that does not define who you are as a person" - CHLOE

WHAT'S THE MAIN SOURCE OF PRESSURE / FEARFUL RHETORIC AROUND EXAMS?



94%
SAID SCHOOL/UNI DID
**NOT GIVE THEM
ADEQUATE
MENTAL HEALTH
SUPPORT
DURING EXAMS**

📷 = 32

"Give students a realistic view of what to expect. Tell them they may feel overwhelmed, upset, feel helpless and not know what to do with some of the feelings that come up. They are still learning. No one knows how to do it. Give them the red flags – this is when you need to seek help. Tell them when things are not usual" - KATIE

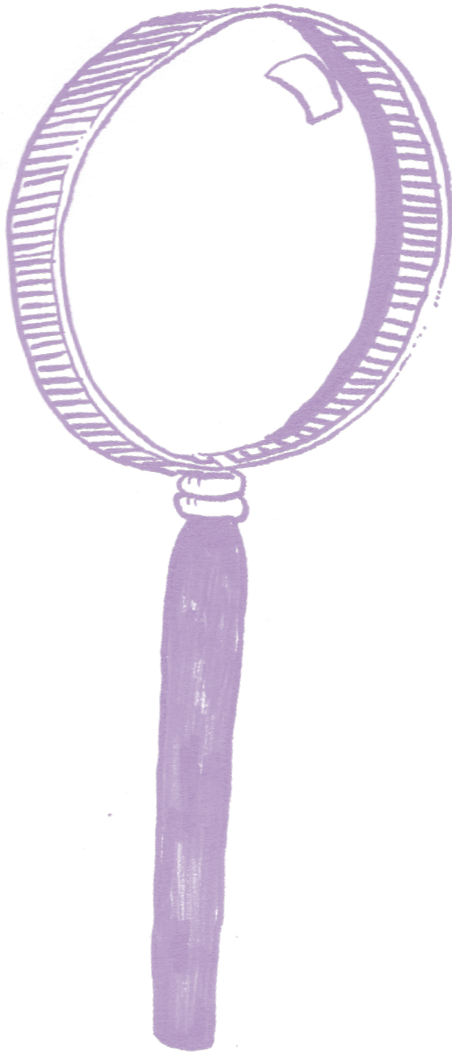
WHAT CAN EDUCATIONAL INSTITUTIONS DO TO SUPPORT YOUR MENTAL HEALTH DURING EXAMS?

"The best thing they did at University was switching exams so that they fell before the Christmas holidays rather than after so we could actually relax during the holidays. - MIA"



"I would emphasise that you have the whole rest of your life ahead of you, everything does not depend on what grades you get at uni" - ANNABEL





OUR RECOMMENDATIONS

1. PROACTIVE + PREVENTATIVE

Offer proactive and preventative wellbeing support for students, alongside acute services for students in mental distress.

2. CHANGE RHETORIC

Transform the narrative of failure around exams, to make it less 'fearful' and stress-inducing, and to create more reasonable expectations of success/failure. This rhetoric goes beyond university/college and should be encouraged at school level, within families, and among students themselves.

3. FLEXIBILITY

Introduce more flexibilities around exam timetabling for students experiencing mental health conditions, and explore alternative forms of assessment for students suffering from mental health conditions.

LIFE AFTER GRADUATION

RATIONALE

As the final part of our 360° approach to understanding the mental health of young female and non-binary students, we looked at how students cope after they have left university or college – an area that has been noticeably under-researched (Dyckhoff, 2013). The period immediately after students leave the formal structures of higher education appears to be a particularly vulnerable time for young adults, due to the loss of educational support systems and the emergence of new financial, career and social pressures (Reino & Byrom, 2017). In response, we hypothesised that an oft-overlooked and at-risk demographic for mental health problems is recent graduates.

AIMS

- To examine young female and non-binary students' perceptions and experiences of post-graduate depression, otherwise known as the 'Graduate Blues'.
- To identify the main causes of stress when leaving university or college and how long these stressors affect the mental health of recent graduates.
- To explore the extent to which students felt supported during this transition period away from education.

METHODS

We conducted one survey, three Twitter polls and two Instagram polls. This was an extremely popular research theme and we received 246 responses (69 through surveys, 116 through Twitter and 61 through Instagram).

KEY FINDINGS

Our research found that 89% of our respondents – the vast majority of whom were recent graduates – felt that “the Graduate Blues” were a real thing.

The main causes of emotional stress for recent graduates were “financial pressures” (40%), followed by “job searching” (35%) and “loneliness” (21%). Many of our respondents reported feelings of being “lost”, struggling with no purpose, and having “no idea” of what to do with their lives. This was combined with financial pressures to get a job in order to pay debts.

With regard to the duration of post-graduate depression, 74% of respondents felt it lasted up to 12 months.

However, the vast majority (87%) of respondents felt that they weren't offered any support to manage their wellbeing during the transition from university or college to employment.

Our respondents suggested a range of ways that universities and colleges could support them after graduation, including helping them develop coping strategies and continue (short-term) access to some university and college services, such as wellbeing and careers services.

📍 = 88

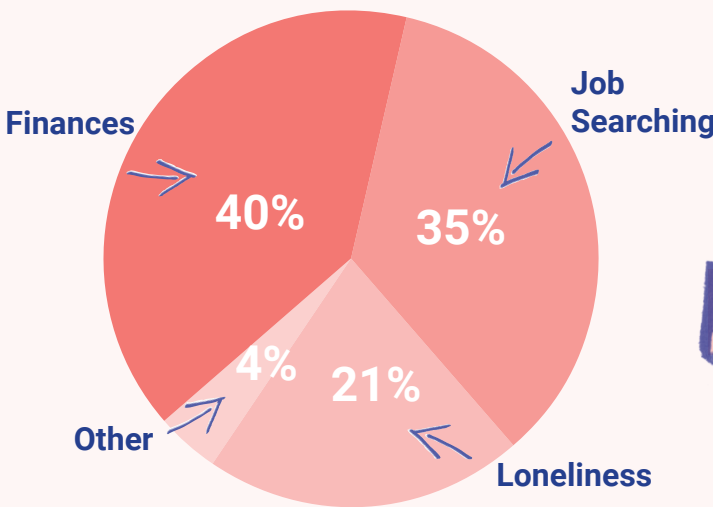
89%
 SAID THEY THINK THE
**GRADUATE
 BLUES ARE A
 REAL THING**

"I think its a real thing; loss of community, going from feeling as if you have a purpose/achieving to being unemployed or starting a career from the bottom and lots of pressure to find and succeed at your 'next step'. When I left university, I felt isolated and removed from uni friends and like a failure struggling to know what to do next" - STEPHANIE

I've struggled with anxiety and burnout. I've been thinking recently about how my education trained me in best practice, but not how to deal with work environments of bad practice (i.e. seemingly most workplaces). and how people listened to me at uni, but in the workplace don't want to listen to ideas from young women - IMOGEN

WHAT WAS THE MAIN SOURCE OF EMOTIONAL STRESS AFTER YOU LEFT EDUCATION?

📍 = 48



HOW LONG DID POST-EDUCATION DEPRESSION OR LOW MOOD LAST?



📍 = 27

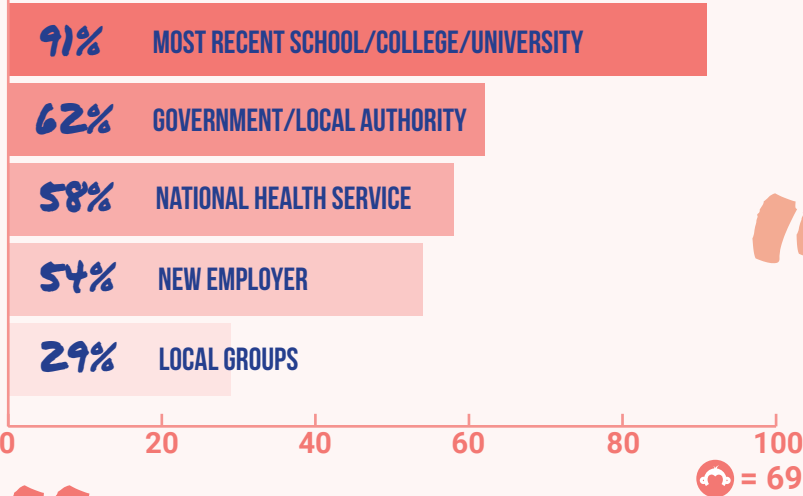
"Once I graduated I felt completely lost. I couldn't get a job and my confidence and self esteem just plummeted"
 - ALI

"After graduating I had no idea what I was going to do with my life, didn't know how to find a job, was living with my family as a child after four years living independently, and was running out of money. It was not a good time!" - ALEXANDRA

87% FELT THEY WERE OFFERED NO WELLBEING SUPPORT DURING THE TRANSITION FROM HIGHER/FURTHER EDUCATION TO WORK

📍 = 52

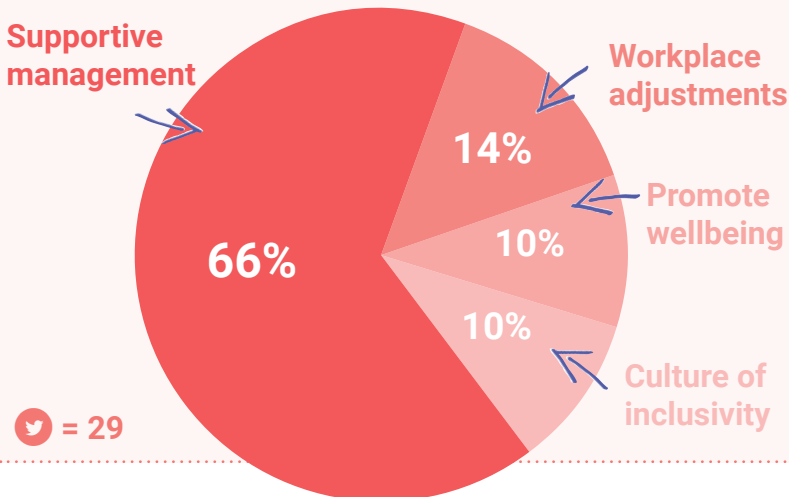
WHICH ORGANISATIONS SHOULD TAKE MORE RESPONSIBILITY FOR SUPPORTING THE WELLBEING OF GRADUATES?



"Preparing current students for the challenges of the graduate job market...in an honest and realistic way, and emphasising the benefits and inevitability of failure throughout higher education" - JENNIFER

"I would focus on helping students develop positive coping strategies during their time in education...I think many people struggle to ask for help when they find themselves floundering after graduating because there is a focus put on...where you are supposed to be 'x' years post graduation" - HANNAH

WHAT ARE THE BEST THINGS YOUR (POTENTIAL) EMPLOYER CAN DO TO SUPPORT YOUR MENTAL HEALTH IN THE WORKPLACE?



"I lost the support worker I'd had at uni to support my mental health, when I graduated. There was no transition support. There were graduate employment fairs, but they just made me feel more stressed" - IONA

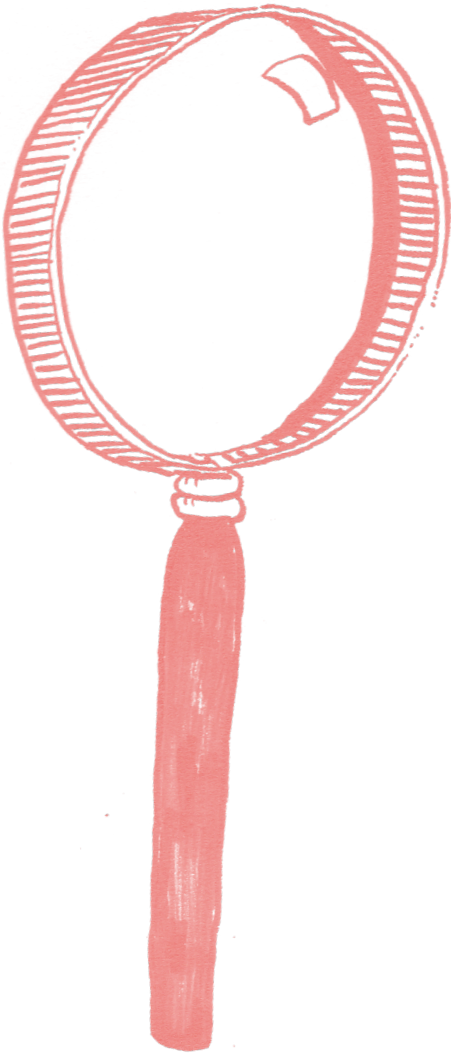
"I would introduce more support following graduation and a more transparent explanation as to what difficulties students can expect when attempting to find 'good' employment... I think especially vulnerable students require much more post-graduate support and assistance with learning to how to re-structure their time and how to utilise the skills they have developed [at] university" - LAYLA

WHAT SUPPORT WOULD YOU BENEFIT FROM IN THE TRANSITION FROM EDUCATION TO EMPLOYMENT?

- 83% more honest narrative in education about 'failure'
 - 72% more support in navigating the job market & developing your career
 - 59% graduate "drop ins" with career guidance services
- 👤 = 69

70% SAID THEIR EMPLOYER HAS NOT PUT ADEQUATE MENTAL WELLBEING SUPPORT SYSTEMS IN PLACE

👤 = 37



OUR RECOMMENDATIONS

1. CONTINUED SUPPORT

Continue offering institutional support for students for 6-12 months after graduation, including mental health services, careers services, library and IT resources, and make this support clear to graduates.

2. MORE HONEST NARRATIVE

Develop a more honest narrative on failure and career expectations throughout university and college programmes, to prepare students for life after graduation.

3. SOCIAL NETWORKS

Continue providing strong social networks for recent graduates, especially those dealing with mental ill-health, for instance through alumni networks.

MENTAL HEALTH POLICY

RATIONALE

There has been a wealth of recent research exploring the mental health crisis among young people in the UK (e.g. Sadler et al., 2018). However, in these surveys, respondents are often exclusively asked about the nature of their mental illness, rather than inviting them to share their views on how to proactively shape mental health policies. This is what we sought to do in our research programme. We invited young female and non-binary people to tell us what they thought public services, workplaces and educational institutions should do to improve people's mental health. Our aim was to give a voice to young people, with the view of collating their stories and suggestions, and feeding these back to policy-makers.

AIMS

- To understand how young female and non-binary people felt about governmental, workplace and educational mental health policies.
- To determine if young female and non-binary people feel empowered to shape the direction of policy-making on mental health in the UK.
- To encourage respondents to suggest new policy initiatives and feed back how they would change existing policies to improve mental health outcomes for young adults.

METHODS

We conducted one survey on "Mental Health Policy: What needs to change?", four Twitter polls and three Instagram polls. We received 269 responses to this research sub-theme (75 through surveys, 113 through Twitter and 81 through Instagram).

KEY FINDINGS

When commencing this research strand, we first wanted to gauge how much influence young female and non-binary people felt they had over current mental health policy. Here, a majority said they felt unable to shape mental health policy (77% of our Instagram followers and 87% of our Twitter poll participants).

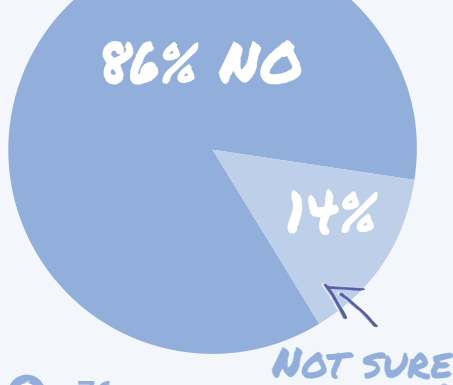
We then asked our respondents if they felt the government, educational institutions, and workplaces were doing enough to support the mental health of young adults: 86% said the government was not doing enough; 75% felt that schools, colleges and universities were not doing enough; and 68% felt workplaces were not doing enough.

We further investigated what needs to change, in the hope of giving a voice to respondents who felt unable to shape policy. It became apparent that "more counselling places" (33%) and "less stigma in society" (34%) were what people believed were most necessary for positive change. A majority of our respondents (59%) also informed us that "early education about mental health" is the best way to alleviate the aforementioned stigma.

Finally, we asked respondents if they felt that mental health services should be more nuanced, with different tailored support for people who identify as female, non-binary, male or other. Here, 65% said "yes" they should be nuanced for different genders, 28% said they should be "somewhat" nuanced, and a minority of 8% said "no".

DO YOU THINK ENOUGH IS BEING DONE TO SUPPORT THE MENTAL HEALTH OF YOUNG ADULTS BY...

GOVERNMENT



🗳️ = 76

“Services are being cut and more should be available to reach out to young people within the community rather than waiting until a crisis for help” - MAYA

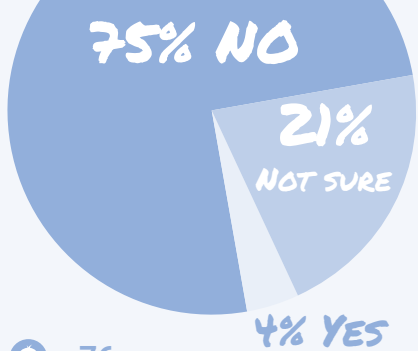
82%
SAID COUNSELLING COST OR WAIT TIME HAD STOPPED THEM GETTING HELP

🗳️ = 28

“I have tried to get help from government programmes at a point where I was at my worst and it was an awful experience – it took 8 months and I ended up receiving help from a local organisation” - KATHERINE



SCHOOLS, UNIS + COLLEGES



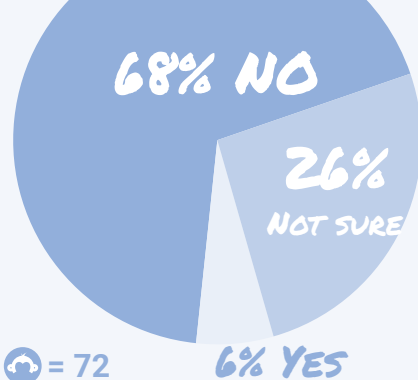
🗳️ = 76

“Schools and universities have been relatively good at encouraging children and young people to look after their physical health...but they have failed to include looking after your mental health on the curriculum/ as core activities” - ELEANOR

“Services are often only accessible once you become acutely ill and from that point it is so difficult to recover. People need to be able to get help when they first experience difficulties” - SARAH



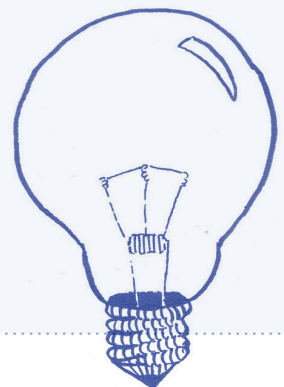
WORKPLACES



🗳️ = 72

“I don’t think most workplaces give particular focus to mental health. I think it’s still hard to speak and be honest about mental health...to counteract that, employers need to be more proactive in talking about mental health and making clear they are a mental health friendly employer” - AMY

“I’ve personally had really negative experiences with the HR department at my work in relation to sick absences due to my mental health. The stress that they caused me made me worse and resulted in a longer absence and severe anxiety about returning” - YASMIN



WHICH MENTAL HEALTH SERVICES AND AREAS OF FOCUS WOULD YOU LIKE TO SEE PRIORITISED?

Easy access to free talking therapies
84%

Tackling the stigma around mental health
77%

Better workplace/school/uni support services
75%

🗣️ = 75

WHAT'S THE MOST IMPORTANT THING THAT NEEDS TO CHANGE IN MENTAL HEALTH POLICY?

34% Less stigma in society

33% More counselling places

25% Uni/workplace support

8% Self-care resources

🗣️ = 36

WORK/SCHOOL/UNI SUPPORT

"Have more transparent mental illness leave and mental health support 'allowances' in workplaces and unis"
- KAREN

"Teach kids at school all about mental health and teach them resilience training and support mechanisms that they can use in the future. Have clear and easy access to support in and out of school. Have teachers take mental health training so they can spot problems"

- CHRISTINE

TALKING THERAPY

"Easier access to talking therapy would be a breakthrough in feeling like you're taken seriously...so making this accessible for you to be assessed out with seeing a GP could be better" - ISABELLA

"Focus on prevention as well as treatment by making access to talking therapies easier...providing basic therapy early will help to prevent severe symptoms later and reduce the burden on the NHS" - LIN

"More funding, especially for young people. Easier access to proper psychiatrists/therapists who can diagnose and prescribe, rather than being sent away with anti-depressants and no further intervention. Sometimes it's not just a chemical imbalance but that there are things in our lives making us unhappy" - POPPY

87% SAID SOCIETAL STIGMA HAS WORSENERD THEIR MENTAL HEALTH

🗣️ = 30

HOW DO WE GO ABOUT FIGHTING STIGMA?

59% said early education about mental health

35% said equal to physical health

🗣️ = 29

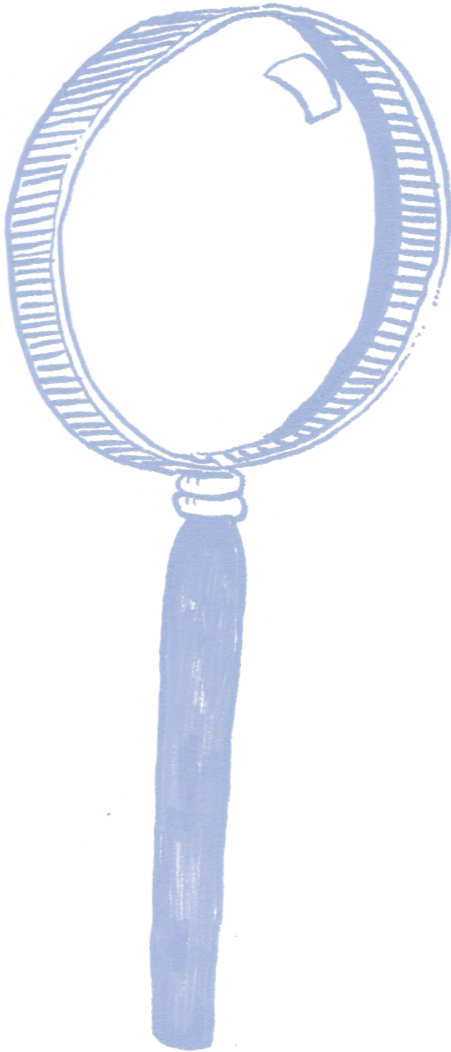
"I'd make it as okay to address and talk about as physical health. When you break down the stigmas and taboos, many barriers to tackling the issue itself are addressed" - KAYLEIGH

WHAT'S THE BEST WAY TO USE EDUCATION TO REDUCE STIGMA?

🗣️ = 76

58% integrate with the curriculum

22% training for educators



OUR RECOMMENDATIONS

1. NHS SERVICES

Increase access to talking therapies in the NHS, and ensure that people are able to receive mental health support before they reach crisis point.

2. EARLY EDUCATION + SCHOOLS

Focus on early-years education on mental health and build wellbeing into the curriculum from primary school upwards, teaching pupils how to look after their mental health alongside their physical health, which will reduce stigma later on.

3. WORKPLACES

Mandatory mental health training for managers and HR professionals, with clearer guidance for managers and staff on possible workplace adjustments.

IMPACT OF FEARLESS FEMME

RATIONALE

We have sought to discover the extent to which Fearless Femme has helped young female and non-binary people manage their mental health challenges.

Some researchers have explored the therapeutic value of 'expressive therapies' and creative expression for people dealing with mental health conditions (Malchiodo, 2005). At Fearless Femme we have sought to test those scientific theories by encouraging and championing young female and non-binary people to look after their own mental health by writing, painting, creating, sharing and reading mental health stories in our magazine.

AIMS

- To explore the extent to which Fearless Femme has had a positive impact on the mental health of our creative contributors, readers and followers.
- To discover the most popular forms of creative expression amongst young female and non-binary people and the ways in which this supports their wellbeing and self-worth.
- To examine the motives of young female and non-binary people in voluntarily contributing to a non-profit creative project, and any additional benefits they may have gained from doing so.

METHODS

We sent three surveys to 200 readers and volunteer contributors (writers and artists), asking about their experience of being part of Fearless Femme's creative community and the impact this has had on their mental health. We received 107 responses to our surveys.

KEY FINDINGS

Our research revealed that 97% of Fearless Femme's volunteer writers and artists have struggled with their mental health compared to 95% of readers and followers. Anxiety, depression, stress and panic attacks were the most common mental health conditions amongst our volunteer contributors, for whom the most popular form of self-care to manage their conditions was "creative writing, artwork and photography" (89%).

With regard to the motivations of our contributors for getting involved in the Fearless Femme project and sharing their mental health artwork, poetry and prose, 66% said they donated their work to Fearless Femme to "share their story to help others feel less alone".

When asked about the impact of contributing creative work to Fearless Femme on their wellbeing, 90% of our volunteer contributors said it had a positive impact on their mental health. To break this number down further, 73% felt that "being part of a bigger feminist mental health community makes me feel less alone", 73% agreed that "helping others (by sharing my story/art) helps me feel better", and 46% said that "Fearless Femme makes me feel validated and less stigmatised".

We found similar effects on our readers, with 83% feeling that being part of the Fearless Femme community has helped them "feel better". Here, almost two-thirds of readers said it felt good "to support an organisation that is de-stigmatising mental health" while over one-third said reading Fearless Femme "makes me feel less alone".

IMPACT ON READERS

SOCIAL MEDIA

5,181 FOLLOWERS


31,297 REACTIONS

37,538 ENGAGED

"I just read your online mag and it is ALL kinds of Awesome!! It's like nothing I've ever read before and I now feel totally energised after reading it – like I've just put on some wonder woman pants and I'm ready to face the world!?! So thank you to all the amazing humans who made it happen!!" – MOLLY

"Ladies everywhere...you NEED to read this amazing insightful mag, pass it on to your daughters, sisters, cousins and anybody else you know who can read... Well impressed with the amazing format and contents" – JASMINE

"This has a very different voice from other publications – it's great to come somewhere that is authentically inclusive rather than somewhere that claims it and yet is full of stereotypes that make you feel wretched if you aren't a thin/beautiful/rich woman. Thank you" – REBECCA

95% OF READERS STRUGGLE WITH THEIR MENTAL HEALTH  = 55

ONLINE MAG 19,127 USERS IN 129 COUNTRIES
133,960 PAGE VIEWS

 = 48
83% SAID READING FEARLESS FEMME HAD HELPED THEM FEEL BETTER

"Zara you are a strong woman and this article though heartbreaking when I read it, gives me joy and hope that you bulldozed through it. It also will help those in the same shoes as you were to break out. It's great you embraced love and dared to live" – SIAN

"absolutely love your content so far, looking forward to reading more in the future" – LINDSEY

58% feels good to support an organisation that is de-stigmatising mental health

36% it makes me feel less alone

 = 50

"It can sometimes help me put my struggles into perspective, they then can feel more manageable" – KIRSTEN


"I felt so much reading this. There is so much I recognise and can relate to. Accepting yourself, not being a people pleaser and feeling no guilt for this can be a daily struggle. Reading this helps. Thanks" – NIAMH

IMPACT ON CONTRIBUTORS

230+ CONTRIBUTORS
600+ SUBMISSIONS

"I feel so inspired to be able to contribute to such a worthwhile magazine, to be able to focus on mental health awareness. The mind can be a dark place, so I hope to bring a little bit of light to anyone experiencing some time in the shadows" - FI

"The Fearless Femme movement can and does change lives. The team are supportive and nurturing and Fearless Femme has helped to restore my self-belief and has given me a voice. I'm braver now and feel like I can inspire my son to change the world in whichever amazing way he decides to" - SOPHIE, VOLUNTEER CASE STUDY

90% SAID THAT  = 41 CONTRIBUTING TO FEARLESS FEMME HAD A POSITIVE IMPACT ON THEIR MENTAL HEALTH

97%  = 34 OF CONTRIBUTORS STRUGGLE WITH THEIR MENTAL HEALTH

89%  = 27 USE CREATIVE WRITING, ARTWORK & PHOTOGRAPHY AS A FORM OF SELF CARE

"Fearless Femme has been fabulous for me - I feel validated as a writer...People have reached out to me to say how much my writing has helped them, which just makes me so tremendously happy" - ANNA

The community is so welcoming, and it is clear that you are valued and have an equal say regardless of whether you're the contributor or editor. It's so relieving to talk to like-minded people...It's touching and inspiring, and I really cherish it!!" - NATASHA

"It was a big step for me to share my work with Fearless Femme, as I prefer to hide my mental health issues (due to experiences of stigma and being misunderstood). So, it took a lot of confidence and courage for me to do so, but contributing my poem to Fearless Femme, then sharing that with others felt like a positive way to communicate with people about my mental health, because the focus was on my creativity and my ability to write, rather than what's "wrong" with me. I think Fearless Femme is a really good idea and I am pleased to be a part of helping to de-stigmatise mental health" - LUCIA

5 MOST READ ARTICLES IN 2018

1,424 Intimacy! (with anxiety)

810 Reflections on Anorexia

640 Cycle Charting

636 Me Too Art Series

615 Relationships: Equality vs Codependency

CASE STUDY

By Lauren Drinkwater, Volunteer Artist

It's hard to know where to begin when it comes to my mental health, which seems strange because it's something I think about every day. This, of course, is a prime example of why living with a mental health illness is a process of living and learning, constantly. I find myself going through waves of feeling like I can express honestly and openly as well as feeling motivated to work towards my goal of living as a Mental Health & Body Positivity Artist.

In spring I decided I wanted to dedicate every Sunday to be my 'Creative Sunday', the one day of the week where I would focus on gaining knowledge about mental health, body positivity, colour theory, self-care, being an artist and more...I spent a lot of time reading cool articles online and stumbled across the truly inspiring Fearless Femme.

I DIDN'T KNOW AT THE TIME BUT FEARLESS FEMME WAS ABOUT TO CHANGE MY LIFE AS AN ARTIST, A WOMAN AND SOMEONE SUFFERING FROM A MENTAL HEALTH ILLNESS.

I plucked up the courage to submit some work, something I'd never done properly before. Although it was so scary and induced quite a lot of anxiety, you know what? It felt so good! Of course not as good as the reception I received from the Fearless Femme team – I was appreciated for something that had been and always will be the biggest relationship of my life. My art and my illness.

I could never thank Fearless Femme enough (honestly it's hard to put into words), for the love they deliver into my lil heart every single day.

THEY HAVE GIVEN ME STRENGTH WHEN I THOUGHT MY LIFE WAS OVER, THEY HAVE GIVEN ME LOVE WHEN I COULDN'T LOVE MYSELF AND THEY HAVE OPENED MY WORLD UP IN A WAY I DIDN'T THINK WAS POSSIBLE.

I am a changed woman, or more so, I am more of a woman because of Fearless Femme. I still fear for my life, of course, I still fear I am not worthy, I still fear my art isn't what people want to see and I still fear that I'll never be able to live my life without shame or guilt.

BUT, I AM A FEARLESS FEMME – I COULDN'T REMOVE THAT PART OF MY SOUL EVEN IF I TRIED. IT'S INGRAINED INTO ME AND I WILL HOLD ONTO THAT FOR MY FOREVER.



CONCLUSION

This report has focused on an under-explored area: the mental health challenges of young female and non-binary students in the UK. Our research has confirmed that there is a mental health crisis among young female and non-binary people, and it's happening against a backdrop of public service cuts, economic and political uncertainty, and an increase in sexual harassment and discrimination.

Our respondents have told us that they feel so pressured to achieve perfect grades at university/college in order to secure a job after graduation that they have become fearful of the future. This is an existential anxiety fuelled by real-life concerns about rising levels of student debt, economic slowdown, a competitive job market and unaffordable housing. And we have found that, worryingly, some of our respondents feel that their fears have come true, whereby the transition from education to work life has left many young adults feeling isolated, lonely and ashamed if they don't quickly start generating income to pay off their debts.

Young female and non-binary people face additional structural inequalities outside of the education system that exacerbate these pressures. Women continue to be paid less than men for the same work, which means it will take young women longer to clear off their student debts; women often continue to be judged based on their appearance rather than

their merits, making it more challenging for them to climb their chosen career ladder; and non-binary people continue to feel misunderstood and discriminated against, creating barriers to their exercise of equal opportunities.

In short, the pressures on young female and non-binary students have never been greater. We know from our conversations with universities and colleges that they are working hard to tackle the student mental health crisis, and we believe there is an opportunity for them to be leaders in showing how society can support young people's wellbeing. To help support this leadership, we have made several policy recommendations for universities and colleges based on the rich feedback that young female and non-binary people have given us. In particular, we have found that the transition to and from university/college is a particular point of stress, and we believe greater support to smooth these transitions would greatly enhance the wellbeing of young adults.

We also hope this report catalyses more research to identify the underlying causes of mental distress among young female and non-binary people as they journey through and beyond their education, so we can begin to turn the tide of the mental health epidemic. Because, we can all agree that, young people deserve to experience education and its benefits without fear.



OUR RECOMMENDATIONS

STARTING UNIVERSITY

1. PRE-ARRIVAL

Make it easy and comfortable for students to disclose pre-existing mental health issues to university or college staff and provide clear information on university and college websites stating what support is available to encourage pre-study reporting.

2. UPON ARRIVAL

Give students clear information on where to find mental health services, and how to access them, alongside more training for staff and a campus-wide wellbeing campaign that raises the visibility of mental health services.

3. COUNSELLING

Increase student counselling capacity and offer long-term support for those who need it, and provide wellbeing resources for students with less acute conditions.

LIFE AFTER EDUCATION

1. CONTINUED SUPPORT

Continue offering institutional support for students for 6-12 months after graduation, including mental health services, careers services, library and IT resources, and make this support clear to graduates.

2. MORE HONEST NARRATIVE

Develop a more honest narrative on failure and career expectations throughout university and college programmes, to prepare students for life after graduation.

3. SOCIAL NETWORKS

Continue providing strong social networks for recent graduates, especially those dealing with mental ill-health, for instance through alumni networks.

SURVIVING EDUCATION

1. PROACTIVE + PREVENTATIVE

Offer proactive and preventative wellbeing support for students, alongside acute services for students in mental distress.

2. CHANGE RHETORIC

Transform the narrative of failure around exams, to make it less 'fearful' and stress-inducing, and to create more reasonable expectations of success/failure. This rhetoric goes beyond university/college and should be encouraged at school level, within families, and among students themselves.

3. FLEXIBILITY

Introduce more flexibilities around exam timetabling for students experiencing mental health conditions, and explore alternative forms of assessment for students suffering from mental health conditions.

MENTAL HEALTH POLICY

1. NHS SERVICES

Increase access to talking therapies in the NHS, and ensure that people are able to receive mental health support before they reach crisis point.

2. EARLY EDUCATION + SCHOOLS

Focus on early-years education on mental health and build wellbeing into the curriculum from primary school upwards, teaching pupils how to look after their mental health alongside their physical health, which will reduce stigma later on.

3. WORKPLACES

Mandatory mental health training for managers and HR professionals, with clearer guidance for managers and staff on possible workplace adjustments.

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ANNEX

Table 1. Data collection methods used for each theme


	Surveys	Twitter	Instagram
Starting University	1	4	2
Surviving Education	1	2	2
Life After Education	1	3	2
Mental Health Policy	1	4	3
Impact of Fearless Femme	3	-	-
Total	7	13	9

Table 2. Number of respondents for each theme

	Surveys	Twitter	Instagram	Total
Starting University	21	118	39	178
Surviving Education	42	81	59	182
Life After Education	69	116	61	246
Mental Health Policy	75	113	81	269
Impact of Fearless Femme	107	0	0	107
Total	314	428	240	982



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