

FILE+ CHARTA

Technical document of the National Union of Students in Hungary (HÖÖK) on young people's mental health



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TERMS AND DEFINITIONS

subclinical: a state of a mental disorder in which no illness requiring clinical intervention can be diagnosed and the symptoms do not fulfil the set of criteria for the diagnosis of the mental disorder

stress: a nonspecific response of the body to any stimuli that disrupt its original state of balance and force it to adapt (Selye, 1976)

distress: stress that is harmful to the body and which does not facilitate development

stigmatization: the act of branding people

dissociation: a phenomenon manifested in the dysfunction of memory without any obvious physical causes, types: dissociative amnesia, dissociative fugue, dissociative identity disorder (multiple personality disorder) (Comer, 2005)

PTSD (posttraumatic stress disorder): reactions to exposure either directly or indirectly of the individual's person, their family or friends to mentally traumatic threats, severe injuries or mortal threats, which persist for longer than 28 days from the event (Sharan, Chaudhary, Kavathekar, & Saxena, 1996)

disease burden: a subjective factor that impacts life quality in the life of the person experiencing the disease through the restriction of activities of importance for them (Devins, 1994)

I. INTRODUCTION

Relevance of the subject

The pandemic has brought numerous changes throughout our society. Curfews had a paralyzing effect on all aspects of life (WHO, 2020). It has left a lasting impact on the regular activities and social life of everyone, regardless of work, profession or lifestyle (Albert-Lőrincz & Albert-Lőrincz, 2020). University students have transitioned to online learning. Not only did this have a negative effect on studying, but also on educational progress (Zalsman, Stanley & Szántó, 2020; McGinty, Presskreischer, Han et al, 2018). The field exercises of numerous students was spent in uncertainty, or conducted virtually in its entirety. Many were forced to abandon their dormitory or sublets; therefore the support of friends and peers was also less available for them (Albert-Lőrincz & Albert-Lőrincz, 2020). Overall, these have led to psychological distress, anxiety-depression symptoms and suicidal tendencies in the case of numerous students (Wathelet, Duhem, Vaiva et al, 2020).

Although universities and dormitories have reopened, students still have a certain degree of uncertainty concerning their housing and university education. The general uncertainty and a sense of threat as an overall societal source of stress caused by the pandemic lingers even after the restrictions have been lifted (Zalsman, Stanley & Szántó, 2020). This is occasionally accompanied by anxiety, gloominess, a sense of hopelessness and suicidal thoughts (Lazáry, 2020; Banerjee, Kosagisharaf & Sathyanarayana Rao, 2021; qtd. Osváth, 2021). The psychological hazards caused by the pandemic have been identified as a syndrome as coronophobia. Its symptoms include: dizziness, loss of sleep, muscle tension, loss of appetite, nausea and abdominal discomfort (Asmundson & Taylor, 2020). Therefore, in the current situation, a great deal of attention must be paid to physical as well as mental health factors. In the following, we will present the factors of mental health and mental disorders relevant to the subject and the mental burdens that students of higher education are faced with.

The definition of mental health and its public health significance

“Mental health represents well-being on the biological, psychological, social and spiritual level and also includes the ability to maintain and experience positive conditions, which is combined with effective coping and savouring, as well as resilience and dynamic self-regulation.” (Vargha, Zábó, Török & Oláh, 2020, 1.).

Therefore, mental health is an umbrella term for our self-acceptance, effective coping ability and our general sense of well-being (Kopp-Pikó, 2006). Ideally, we are capable of coping with stress, taking advantage of our abilities and contributing to the function of our social surroundings (Kopp-Pikó, 2006). According to Wernigg (2020), preserving our mental health has become one of the greatest challenges of

the 21st century, as a result of the disease burden of mental illnesses as well as the growing economic burden bearing down on the concerned parties and society as a whole. The public health significance of dealing with mental health is supported by the fact that the majority of individuals coping with mental illnesses are not capable of working, often fall victim to stigmatization and discrimination and in the case of unidentifiable conditions, become so-called “frequent attendees” of doctor’s offices, greatly burdening the healthcare system.

Mental disorders

The categorization of mental disorders is set forth in the Diagnostic and Statistical Manual of Mental Disorders) (APA, 2013). This allows us to distinguish between anxiety and mood disorders, personality disorders, psychosomatic disorders, etc. The following includes a list of disorders relevant to the subject.

Depression

The DSM-IV identifies nine symptoms related to depression, as follows. Depression can be diagnosed when at least 5 of the 9 are present simultaneously (Frances, First & Pincus, 1995).

1. Depressed mood
2. Markedly diminished interest or pleasure in most or all activities
3. Significant weight loss (or poor appetite) or weight gain
4. Insomnia or hypersomnia
5. Psychomotor retardation (due to emotional impulses inducing anxiety, the person is only capable of performing automated movements)
6. Fatigue or loss of energy
7. Feelings of worthlessness or excessive or inappropriate guilt
8. Diminished ability to think or concentrate, or indecisiveness
9. Recurrent thoughts of death or suicidal ideation, plan, or attempt

Anxiety

Individuals suffering from such disorders typically experience lasting, intensive fear even in common, everyday situations. In many cases, anxiety is accompanied by recurring episodic events, during which the feeling of fear and worry is suddenly intensified (panic attack). These feelings can hinder or render impossible the performance of everyday activities and are hard to control.

Its symptoms include (Rose & Devine, 2014):

1. Feeling nervous, anxious or on edge
2. Having an increased heart rate, hyperventilation
3. Sweating, trembling
4. Sense of exhaustion, trouble concentrating
5. Sleep disorders
6. Digestive disorders
7. Loss of control, avoidance of situations causing anxiety

The determinants of mental illness, the prevalence of mental illnesses amongst young people

A felsőoktatásban hallgatók mentális egészsége

Young adulthood is a critical period in terms of establishing habits and social relationships vital for independent adult life. It is no surprise that 3/4 of mental illnesses appear in the early twenties and the median age of drug use is also between 18 and 29 years of age (Kessler, Amminger, Aguilar-Gaxiola et al. 2007).

The question as to whether these are tied to the challenges of the age or specifically to university existence has been the subject of multiple researches. These researches generally focus on the mental comparison of university students and their non-university peers. According to a survey of American students, from the range of mental health-related disorders, depression is extremely common amongst higher education students, impacting 17% (Eisenberg, Hunt & Speer, 2013). Non-American researches also show that university students bear a greater mental burden compared to their peers (Arias de la Torre, Fernandez-Villa, Molina et al. 2019). According to the 3 year-long research of the British Association of Colleges (2019), there is an increasing tendency of mental health burdens of this nature amongst students.

The researches focusing on the mental health of students devote particular attention to medical students due to the crucial role they play in society. The exposure of this group is due to the fact that the experience of distress and the necessity of facing mortality are everyday factors, even in the initial years of university life. All of this can impair the mental health of students, resulting in reduced mental functionality. Based on the research of Mrs. Veres-Balajti (2010), mental health disorders can be assumed in the case of 18.5% of students. Due to the increased burden, mental disorders such as depression or anxiety disorders can appear even during the university period. Based on the survey of Papp and Túry from 2009, 21% of students display mild, 4% moderate and 1% severe depressive symptoms. Furthermore, in terms of anxiety, 16% of students display mild, 16% moderate and 6% severe anxiety. When comparing the psychological condition of medical students to

the overall population, the results show that the mental health of medical students is less favourable and they cope with multiple issues (Bíró, Balajti, Ádány & Kósa, 2008; Terebessy, 2015; Mrs. Veres-Balajti, 2010). As a result of the constant exposure to stress, symptoms of burnout can appear even during the university years, which can pose a great threat to their future professional work (Terebessy, 2015). Not only does everyday distress influence the individual's mental condition, it can also affect their health as well. Although the majority of medical students feel they are in a good health condition, some suffer from symptoms such as sleep disorders, headaches, back or waist pain, stomach pain, fatigue and digestive conditions (Terebessy, 2015). Finally, the physical and mental condition can also be influenced by the degree of support the individual receives from their immediate surroundings. Based on the results of Mrs. Veres-Balajti (2010), 17.5% of students are not satisfied with the support they experience in their immediate or broader surroundings. The negative effect of stress and emotional burden are also present amongst future physiotherapists, dentists and pharmacists (Pikó & Piczil, 2012; Sima, Pikó & Simon, 2004).

Educators and kindergarten teachers are also highly ranked in terms of social responsibility. Their thoughts about health and mental health are important as these views and attitudes can be conveyed, even covertly, to children during education. All of this can influence the personal development, attitude and health-related thoughts of the future generations they are teaching. Similarly to the above-mentioned groups, they also consider their health condition to be generally acceptable, yet they experience a high level of psychological stress (Veres-Balajti, Bíró, Ádány & Kósa, 2013). Comparing the experienced stress to the national average measured on a representative sample shows that students opting for the educational profession experience far more stress compared to the national average of 8% and 24% of these individuals display a pathological level of psychological stress (Veres-Balajti et al, 2013). Only 41% of students felt the perceived social support to be appropriate, which is also lower than the results from a national representative sample of a similar age group (Veres-Balajti et al, 2013). The values and attitudes conveyed by kindergarten teachers can serve as a model for children, thus influencing their personal development, future attitudes and skills (Silver, Maeselle, Armstrong & Essex, 2010). Based on the study of Bíró, Olvasztó and Kósa (2010), the psychological stress experienced by one-thirds of kindergarten teacher students exceeds the average level, which is indicative of their disrupted mental health. In terms of depression and gloominess, 75% of students fall into the mild, 8% into the moderate and 0.8% into the severe category. This is alarming even in comparison to the national representative sample, as (subclinical) depression symptoms are more for common amongst kindergarten teacher students. In relation to social support, typically one-thirds of kindergarten teacher students feel they do receive the right amount of support from their peers.

The mental condition of economics university students has also been surveyed in previous research. The survey of Vágány (2021) calls attention to an important issue that mostly concerns students who major in economics, namely that the number of state subsidized university spaces has been reduced, therefore a growing number of students are forced to work alongside their studies. The fact that they have to perform well at their job as well as in their studies can amplify their anxiety and generate a crisis situation, which on the long run, can result in unmotivated states due to reduced rest and recreation and ultimately lead them to abandon their institution.

Overall, the researches show – regardless of universities, faculties or programmes – that the lack of peer support and the ensuing sense of loneliness is one of the issues that must be urgently addressed in higher education, which often appears to be a sprawling and opaque system. The students' levels of perceived stress are also a noteworthy factor requiring intervention as not only does this endanger their mental condition, it is also detrimental to their physical health over time. It is clear that the mental health of higher education students is continuously deteriorating. The phenomenon of burnout can mostly be interpreted in the case of those studying to be professional helpers, however, continuous burdens and failures can also be experienced by students in other programmes. This can be manifested in the form of reduced motivation or university dropouts. Focusing on prevention should be indispensable in the case of burnout.

The disease burden of mental illnesses

Suicide is the leading cause of death amongst young people (15-29 years of age), which includes most university students (WHO, 2016). Moreover, apart from completed suicides, suicide-related thoughts and attempted suicides are also major issues amongst higher education students (Uchida & Uchida, 2017). According to a research, 40% of students who seriously consider suicide do not share their thoughts with anyone (Becker, Holdaway & Luebbe, 2018) therefore it is particularly important to identify the various factors that can link students to suicide throughout university life.

According to most related researches, personal and social factors can both contribute to the risk of suicide (Li, Dorstyn & Jarmon, 2019). What is certain is that those who commit suicide most frequently experience states of hopelessness, loneliness, the lack of connection with others, great burdens and the pointlessness of life, whether or not they have any diagnosed disorders (Bagge, Lamis, Nadorff & Osman, 2014; Chang et al, 2017).

In the case of negative life events, unless the student receives early assistance, they will not necessarily be able to cope with the cognitive-affective consequences (Palmer, McMahon, Rounsaville & Ball, 2010). On the long run, this could lead to major depression, posttraumatic stress disorders, dissociation and substances abuse (Carey, Norris, Durney, Shepardson & Carey, 2018). The risk of depression and suicide has been proven by numerous researches. Chronic low moods can exacerbate the experience of negative emotions, therefore increasing the risk of suicide (Joiner, 2005).

At-risk alcohol consumption and a sense of anxiety are also considered risk factors. The heavier the consumption of alcohol, the higher the risk of suicidal thoughts and suicide (Paulus, Capron & Zvolensky, 2020). In the case of someone characterised by anxiety sensitivity, they are afraid that their anxiety will lead to negative consequences (Peterson and Reiss, 1992), with an increased risk of the appearance of suicide-related thoughts and behaviour (Allan, Norr, Boffa et al, 2015; Oglesby, Capron, Raines & Schmidt, 2015). The reason for this is the exaggeration of the perceived distress (Capron, Lamis et al, 2014) and the inducement of catastrophizing approaches (Capron, Bujarski, Gratz et al, 2016). An increased sense of anxiety is more typical of at-risk alcohol users than not-at-risk alcohol users (Paulus & Zvolensky, 2020). Therefore, at-risk alcohol consumption can be a result of anxiety sensitivity, however the intoxication brought on by alcohol consumption can further increase a sense of anxiety, resulting in a maladaptive, vicious cycle (Stewart et al, 1999).

II. DOMESTIC OVERVIEW

In Hungary, Section 81 (1) e) of *Act CCIV of 2011 on National Higher Education* (Nftv.) cites student counselling as one of the services available for students. State-funded access to student allotments and services is regulated by *Government Decree no. 51/2007 (III. 26.) on the provisions paid to and certain fees to be paid by the students studying in higher education institutions*. Pursuant to Section 10 paragraph (6), item a) of said document, “*cultural activities shall include, particularly (...) career counselling as well as lifestyle, academic and mental health counselling provided to students within the framework of the higher education institution*”. The related decisions shall be made in agreement with the body stipulated in the higher education institution’s allowances regulation, which – pursuant to Section 61 (2) of the Nftv. – is the student union.

Following the systematic review of domestic higher education institutions, we came to the conclusion that most universities and colleges – in compliance with the above-cited regulation – provide services to support and protect its students’ mental health.

In September 2021, students could apply to 62 higher education institutions through the general admission process. We examined these universities and colleges to see whether they provide free mental health counselling for students. 42 of the 62 institutions reviewed had some service of this nature and we only experienced the complete lack of such services or related information only in the case of 20 institutions. (Footnote: We have attached a table to the current document that details the information on the available services, a brief description of the services as well as the terms and conditions for applying for said services.)

II.1 AVAILABLE SERVICES

Currently, the Hungarian higher education system offers a number of services for students that are aimed at supporting and preserving the mental health of young people. The following is a collection of the various types of these services.

professional mental health counselling:

individual psychological counselling. This typically concerns the following fields: issues related to studying and performance, uncertainties about career and future prospects, private life conflicts (relationship, romantic relationship, family difficulties), adjustment and conflict management issues, life situation crises, stress management. Counselling takes place at pre-arranged appointments, usually involving at least 5, yet no more than 10 sessions depending on the nature of the problem and the opportunities of the institution providing the service. The two-person sessions are typically 50-minute long and take place on a weekly basis. Such services are available at, for example, Corvinus University, Edutus University, at the Student Service Office of the Eötvös József College (EJF), Kodolányi János University (KJE), at the Psychological Counselling Office of the Milton Friedman University, at Óbuda University (OE), Pannon University (PE), at the Psychology and Sports Psychology Faculty of the University of Physical Education (TE), at Tomori Pál College (TPF), etc.

career counselling, career coaching:

aimed at answering students' career choice-related questions. Amongst others, the Student Information and Service Center at Dennis Gabor College (GDF) provides such services. The Budapest Metropolitan University (METU) provides specialized psychology support as lifestyle counselling, allowing for the discussion of questions such "did I choose the right career?" The Dharma Gate Buddhist College (TKBF) provides career counselling through its institutional mentor system, specialists and administrators.

trainings:

these are mainly aimed at developing learning techniques, learning methodologies and hosting conflict management, communication and sensitizing trainings. Such services are offered, for example, by the Debrecen University of Reformed Theology (DRHE)

peer mentoring service:

the University of Veterinary Medicine (ATE) specifically provides peer support services to support the cultural/university adjustment of first-year foreign students (SAM-buddy peer-mentoring programme). The Hungarian University of Fine Arts (MKE) offers the assistance of peers specialized in consultation and counselling. The complaints of university citizens are forwarded to peer mentors, who provide support for them in the enforcement of their interests.

online courses and materials:

the websites of the Budapest University of Technology and Economics (BME) and Semmelweis University (SE) offer easily accessible materials in a number of related subjects, including articles, video recordings, practical and universal advice. The counselling portal of the University of Veterinary Medicine (ATE) (www.mentalhub.hu) features a range of self-knowledge and reading materials, tests and videos as well as up-to-date university news and events. However, these are only available for university students after logging in.

recreation, lifestyle course as part of the curriculum:

the curriculum of the Budapest Business School (BGE) includes courses that support healthy lifestyles and the preservation of physical and mental health.

talks, lectures, activities, events:

the “Körvonalazó” (“Outliner”) event of the Budapest University of Technology and Economics (BME) is fundamentally a casual, informal discussion on the subject of young people's mental health. Apart from providing assistance with problems and hosting evening discussions on various self-knowledge subjects, The Lifestyle Guidance Center at the Pázmány Péter Catholic University (PPKE) Faculty of Humanities also hosts lectures on psychology-related themes. The open days and further study events of the Faculty of Humanities are typically attended by MA psychology students, where attendees are assisted with career guidance services. Similarly, the Budapest Business School (BGE) also hosts its annual “TEstTudat7” event, a week devoted to health.

peer-study/study group seeking service:

the service office at the University of Veterinary Medicine provides services to support the organization of students in order to help them jointly face their academic challenges.

complex student counselling portfolio:

the student counselling office at the Hungarian University of Agriculture and Life Sciences (MATE) offers learning methodology counselling, intercultural counselling, student legal counselling, student taxation counselling, counselling related to tender writing, as well as equal opportunities and admission procedure counselling.

targeted support of students with disabilities:

At the University of Szeged (SZTE), the University Lifestyle Guidance Center offers a separate group of services to establish the equal opportunities for students with disabilities, providing personalized solutions for their own individual needs to establish their independent lifestyles. The University Services Directorate of the Eötvös Loránd University (ELTE) has an Office for the Support of Special Student Needs (SHÜTI) that provides and coordinates the equal opportunities functions of university students. Their activities contribute to reducing dropouts and maintaining human dignity.

pastoral service:

At the Adventist Theological College (ATF), the student mentor tasks are performed by a pastor. The tasks of the pastoral service are concentrated in the following four main fields: the spiritual guidance of students, the mentoring of student careers, counselling, organizing community services for students at the institution and involving students in the lives of ecclesiastic congregates as well as those operating at the institution's seat. At the Károli Gáspár University of the Reformed Church (KRE), the University Spiritual Care Service can be contacted for mental support in the subjects of self-knowledge, mediation, coaching, supervision, counselling and relationship self-knowledge. The University of Sopron (SOE) also has a university pastoral service that supports students with weekly masses, shared hymns, rosary, adoration, spirit day and retreats. The Sárospatak Theological Academy of the Reformed Church (SRTA) also offers spiritual guidance services.

job search counselling:

the Eszterházy Károly University's (EKE) Peer Support Mental Care Counselling Office (KoMeTI) supports the job search of students.

academic counselling:

the IBS International Business School provides individual counselling for all students who have questions related to credits, modules or academic advancement. Through personal meetings, students can discuss fundamental academic subjects and get answers to their questions.

group self-knowledge training:

the portfolio of the Student Service Center at John von Neumann University (NJE) includes individual counselling as well as group self-knowledge trainings, however, these were last organized in March 2020.

KIP-therapy:

the University of Miskolc (ME) currently has a 2-person staff for weekly mental care counselling including, when required, group counselling as well as psychodiagnosis and individual therapy assistance in the case of psychological, mental or psychopathological disorders through KIP-therapy.

II.2 BEST PRACTICES IN DOMESTIC HIGHER EDUCATION

We have encountered a number of best practices in the domestic higher education space in relation to the support of the mental health of young people, which can serve as model examples for other institutions. We already listed a number of specific institutions and services above, while in the following, we collected a handful of examples that are considered innovative and progressive in this field.

The University of Debrecen (DE) created a separate, accessible center for its Mental Health and Equal Opportunities Center (DEMEK) that both students and teachers can turn to when faced with difficulties. The service is provided in a building created specifically for this purpose, where personal consultations (apart from online services) were even provided during the coronavirus pandemic. Additionally, the University of Debrecen also paid special attention to providing mental health counselling for students with multiple disadvantages, which is one of the reasons why it maintains the Esélyháló (Network of Chance) Mentor Network, aimed at providing complex support for disadvantaged, Roma and disabled young people.

Apart from providing extensive, high-quality mental health services for its students and teachers, the Eötvös Loránd University (ELTE) also provides on-going psychological support for students at major university events, e.g. at its freshmen camps. Pursuant to *Section 3 (1) of the University's Rector-Chancellor joint order no. 5/2015 (VII.13) on organizing freshmen camps and orientation days*, amongst other things, the university provides psychological counselling in relation to freshmen camps.

II.3. CHALLENGES RELATED TO THE INSTITUTIONAL SUPPORT OF THE MENTAL HEALTH OF YOUNG PEOPLE

II.3.1. Lack of resources and delegating tasks

During our research work, it became clear that there are a number of higher education institutions that are unable to provide comprehensive mental health services, due to – amongst other things – the lack of appropriate on-site professional skills and experience or suitable funding. In overcoming these challenges, we also saw numerous examples of institutions providing these services by delegating them to another higher education institution through an agreement with other service providers. For example, all active students of the Andrásy Gyula German Language

University of Budapest (AUB) and the Moholy-Nagy University of Arts (MOME) can freely benefit from mental health services of the Lifestyle Guidance Center at ELTE PPK, based on an agreement between the institutions. Similarly, the associate professor and head of faculty of the University of Physical Education also deals with student well-being and counselling at the University of Theatre and Film Arts (SZFE).

II.3.2. Challenges of communication and visibility

Although in a handful of institutions there is some form of mental support services, or perhaps these tasks have been delegated to other organizations, the related information is not provided to students, or only in a limited form. For example, university psychological counselling is provided through the Career Office of the University of Pécs (PTE) which allows students to turn to the psychologists of the Kairosz Foundation free of charge, yet students can only find out about this service after lengthy searches and information gathering. Similarly, the University of Public Service (NKE) offers a mental health service, yet this is not a widely known fact.

II.3.3. Narrowly defined student well-being service portfolio

It is typical of some institutions that the range of student well-being services is rather narrowly defined. For example, the services offered at these institutions include career counselling, competency surveying and other trainings, yet there are no other personal counselling or mental health services available.

II.3.4. Overload and waiting lists

Apart from a few exceptions, in practically all higher education institutions, the number of students applying for psychological counselling exceeds the capacity of the professionals providing the services. Therefore, students requesting assistance often have to wait for weeks, or in the worst case, months until they receive professional assistance. This unpredictability and period of waiting can often exacerbate mental conditions.

II.4 THE IMPACT OF THE CORONAVIRUS PANDEMIC ON THE INSTITUTIONAL SYSTEM SUPPORTING THE MENTAL HEALTH OF YOUNG PEOPLE

At the time of the pandemic, there was an increased demand for higher education institutions to deal specifically with preserving, supporting and promoting the mental health of students. In some institutions, this singular situation has given rise to free, telephone or online lifestyle guidance counselling services. For example, the consulting psychologists of the Apor Vilmos Catholic College (AVKF) announced such opportunities for college students at the time. Similarly, during the pandemic,

the consulting psychologist of the Liszt Ferenc Academy of Music (LFZE) also provided online counselling during the pandemic, responding to e-mail inquiries in the case of emotional challenges, moodswings, family, relationship problems, issues related to learning or careers or self-knowledge or simply to provide advice and conversation.

Characteristically, the institutions supplemented the range of existing and functioning services according to new needs of students. For example, the Social Sciences Institute of the University of Dunaújváros (DUE) established a separate forum to support students faced with any learning or technical difficulties or extraordinary financial challenges that appeared over time, allowing them to contact the student adviser of the Competence Center and the Institute's mentor teacher. Similarly, Gál Ferenc University (GFE) supplemented its range of student services with a mentor program and student support network during the coronavirus pandemic.

The services portfolio has been expanded by a number of major universities. The Student Psychology Consultancy Service ("Student Advisory") of Semmelweis University has been operating at ÁOK for over 10 years and has been available at multiple faculties of the institution since November 2020. As the pandemic placed particularly psychological burden on university students, the Student Advisory has since established a consultancy service – a so-called crisis hotline – and there is also an opportunity for partaking in group counselling and high volume personal consultancy. Students with severe mental disorders can benefit from rapid counselling or appropriate institutional placement. Subsequent to the downscaling of the coronavirus pandemic, the Student Advisory was prepared to support students in processing their experiences and traumas. The Student Advisory can be contacted with the following issues: learning difficulties, the challenges of handling stress and anxiety, relationship and/or romantic relationship problems, time management problems, issues related to parents, the challenges of detachment and becoming independent, problems related to various losses or the illnesses of parents, professional identity search, uncertainties and decision-related challenges. Additionally, the services also help in resolving the consequences of the increased burden imposed by the coronavirus pandemic as well as the related stress. Consultation or counselling does not constitute patient care, but is rather a brief, temporary solution-oriented intervention with the aim of mobilizing resources, establishing or developing certain skills and evolving the opportunities of the person in question.

III. RECOMMENDATIONS

The careful examination of the range of mental health services provided by Hungarian higher education institutions has identified a number of challenges and shortcomings, yet we have also encountered a number of promising initiatives and best practices. Overall, our intention is to present recommendations that can provi-

de student unions with a basis for preserving, supporting and promoting the mental well-being of young people.

On the micro-level, it is indispensable for student unions, including the national student movement, to pay special attention to the mental health of young people and to include such efforts in their everyday advocacy activities. Organizing mental health-related conferences and discussions is also greatly needed, as well as generally focusing on the importance of mental health-related communication and promoting the possibility of asking for help. Student union organizations must play an active role in the education of young people.

On the meso-level of higher education institutions, it is necessary to develop the system of services that supports the well-being of students, ensuring the existing infrastructure and establishing complex services and establishing student-oriented care tailored to individuals and needs, not to mention the appropriate communication. In relation to this, one of the key tasks of student unions is to survey the needs of the students in the particular institution and to convey these to the service providers (or in lack thereof, to initiate the establishment of the service with the decision-makers of the institution). Student union representatives typically maintain an active discourse with their fellow students and this must include consultations on mental health and the importance of its preservation. Conversely, student unions are also charged with the task of promoting existing services in the widest possible range of students.

Last, but not least, on the macro-level, student unions must take part in political acts conducted in relation to the financing of services that ensure the well-being of students and do the utmost within their respective spheres of competence to provide for the ample funding and infrastructural conditions for services that support the mental health of young people. Student unions must also take place in upholding the quality assurance of services by continuously monitoring the feedback and satisfaction of students and forwarding this to service providers and funding bodies.

If you are unwell, in trouble or need help, check the services provided by your college/university. You can find their brief description and contact information [HERE](#). If your institution provides insufficient services or if you are faced with a crises and need immediate help, call one of the following services:

Hungarian Association of Mental Support Hotlines (LESZ)

<https://sos-116-123.eoldal.hu>

Telephone: 116-123

Available for young adults under 24 years of age:

Kék Vonal (Blue Line) <https://www.kek-vonal.hu>
(chat or e-mail consultation)

Telephone: 116-111

Youth Mental Health First Aid

Telephone: 137 - 000

(free of charge on weekdays from 5:00 to 9:00 pm)

IN SPECIAL CIRCUMSTANCES:

In the case of suicidal thoughts:

<http://www.ongyilkossagmegelozes.hu/>

Telephone: +3680505390

(free of charge from 7:00 pm to 7:00 am)

National Crisis Management and Information Telephone Service (OKIT)

Telephone: +3680205520

(in the case of a severe crisis, for example, when running away from home)

EMMA hotline

<https://emmaegyesulet.hu/emma-vonal/>

Telephone: +3680414565

(free of charge hotline for prenatal and postnatal mothers, in any stage of their motherhood)

NANE Women's Rights Association

<http://www.nane.hu/>; <https://nane.hu/erintetteknek/chat-segely/>

Telephone: +3680505101

(Monday, Tuesday, Thursday and Friday 6-10 pm, Wednesday 12-2 pm)

