DIETARY BEHAVIORS AND MENTAL HEALTH IN COLLEGE STUDENTS
AT THE UNIVERSITY OF TEXAS AT AUSTIN

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Purpose: A growing number of college students are seeking help for mental health concerns, yet factors contributing to this increase are not well understood. Although the onset and duration of mental illnesses such as depression are said to be unquestionably linked with nutrition, there is limited research on the association between symptoms of mental health disorders and dietary behaviors. Previous literature has indicated that unhealthy eating habits, smoking, and lack of exercise are highly prevalent among adolescents and young adults (AYAs) and are associated with poorer mental and physical well-being. As AYAs transition to college life, dietary and exercise behaviors are likely to change, and this may in turn impact their mental health. Identifying behaviors among college students that may be associated with increased risk for mental health disorders is the first step in informing the development of preventative measures. This study examined the relationship between dietary behaviors, physical activity, and mental health symptoms in a sample (N=284) of undergraduate students at The University of Texas at Austin.

Methods: A cross-sectional correlation design was used. An online survey assessed participants’ dietary behaviors (e.g., dietary restrictions, meeting daily recommendations, and snacking habits), physical activity (e.g., amount of exercise per week and perception of personal weight), and mental health symptoms. The DSM-5 Self-Rated Level 1 Cross-Cutting Symptom Measure asked participants to report frequency of symptoms over the last two weeks across thirteen psychiatric domains. Scores were calculated for each subscale to assess functioning with higher scores indicating worse mental health status.

Findings: While 97% (n=276) of participants agreed that eating healthy is moderately important, 68.7% (n=195) of participants agreed that healthy foods cost too much. Only 11.3% (n=32) of participants reported eating the recommended number of servings of vegetables, and even fewer met recommendations of servings of fruit (n=15, 5.3%). Approximately 75% of the participants reported eating more when they felt anxious, worried, or stressed. Only 52% of students stated they exercise regularly, with lack of time being the largest hindering factor. Those who were dissatisfied with their weight were more likely to report concerning levels of depression ($\chi^2=7.908, p = .005$), while those who exercised regularly were less likely to report symptoms of depression ($\chi^2=12.55, p <.001$) and anxiety ($\chi^2=6.77, p =.009$). Students most often reported concerning levels of anger (42.3%; n=120), sleep problems (36.6%; n=104), depression (36.3%; n=103), then anxiety (33.8%; n=96).

Conclusions: Trends in poor dietary behaviors and lack of physical activity in study participants suggest a need for education and intervention on campus. Health promotion programs can provide education, promote healthy behaviors, and encourage autonomy for healthy choices among students. Study findings suggest identifying and addressing poor dietary choices and lack of physical activity which can contribute to weight gain may help decrease symptoms of depression and anxiety in the college-aged population. Nurses can contribute to preventative care by making recommendations regarding healthy lifestyle choices to students who may not recognize the impact of their developing habits.