

Search the Archives

Search

With depression on the rise among college students, Health Service starts screening

Students have mixed opinions about personal questions during routine visits

By Kerianne Okie

Published: Thursday, September 25, 2008

Updated: Thursday, September 25, 2008

As bundled Tufts students make the trek to Health Service this winter in pursuit of a respite from a troublesome cough or cold, they may get more help during their medical consultation than anticipated.

As the medical community continues to publicize new correlations between mental and physical health, it is becoming increasingly common to screen patients for depression and other psychological problems in addition to the standard checkup routine. Tufts' Health Service office is keeping up with these trends.

Dr. Margaret Higham, the office's medical director, said that the university is hoping to screen every student for depression once a year. To do that, Health Service employees have started asking students who enter the office for any reason to fill out a mental health survey.

"[Having students fill out depression surveys] is becoming more and more common practice," Higham said. "The Institute for Health Care Improvement and the Task Force on Preventative Health Care have [both] recommended that the primary care settings should be screening for depression as long as they're able to then deal with the situation. It's something we're doing to keep up with all of that."



Mitchell Duffy / Tufts Daily

The Health Service office is using surveys to screen for depression.

Screening for depression in college comes in step with a hike in the number of afflicted students. According to a survey taken in 2006 by the American College Health Association, 8.5 percent of students nationwide had seriously considered suicide, and 15 percent were diagnosed with depression. This marks a 10 percent increase from the statistics taken in 2000.

Junior Logan Crane said that the depression surveys may prove useful.

“I think that a lot of students overlook the symptoms of depression, and they get caught up in believing that depression only affects some people,” Crane said. “It’s important that students are both physically and mentally healthy.”

Sophomore Nancy Shrodes, however, argued that the process of having every student fill out a survey is somewhat impractical. Shrodes, who went to Health Service because she was sick with a cold, was frustrated that the process of filling out the survey detracted from her immediate medical care.

“Because I don’t suffer from [depression] myself, I didn’t find it helpful,” Shrodes said. “I do think it’s possible that there are a lot of people that are depressed out there who don’t know where to go for help, so it could be a useful tool, but I don’t know how many of them are sick and dying and happen to go into Health Service.”

In addition to questions about depression, it is not uncommon for doctors at Health Service to ask students other questions regarding their mental health.

According to Higham, many doctors ask questions concerning a student’s body image, sleep and exercise habits and relationship security. Higham also noted that it is very common for Health Service to inquire about a patient’s alcohol consumption.

“[Alcohol consumption] is a key important part of mental health,” she said.

Higham believes mental and physical health are interrelated. “If you have a Venn diagram of health and mental health, there’s a huge overlap,” she said. “We’ve always been oriented towards seeing that and understanding that — particularly in college students — so when people come in for all sorts of types of visits we’re open to hearing that information.”

Some students, however, feel that, although it is important to help with all facets of their health, certain doctors may go overboard when asking personal questions.

“The purpose of the doctor is to monitor your health, and I think that’s important,” Crane said. “I went to Health Service, and my doctor seemed a little judgmental ... sometimes they overlook the fact that we do live on a college campus and we do have a few drinks on the weekends. They need to monitor us, but they should also be realistic.”

Shrodes agreed that doctors should sometimes ask personal questions but only when it is pertinent to a patient’s particular health condition.

“I think it’s invasive [to ask personal questions] unless it affects [a patient’s] physical health — unless you go in there and they find out you have an STD — then they might be able to question your sexual practices, but besides that, I think it’s unnecessary,” she said.

Shrodes also insisted that the definitions used to characterize binge drinking are unrealistic on a college campus. The popular definition of binge drinking is the consumption of five or more drinks in one sitting for men, or four drinks for women.

“With those statistics about alcohol, practically every college student is [a binge drinker],” Shrodes said. “When I had mono they told me not to drink, and that was very pertinent information that I needed to know ... but accusing someone of being an alcoholic — not helpful, not productive.”

For patients who are diagnosed with depression and other psychological problems, there is a careful process to which the university must adhere in order to ensure optimum care for students.

“Students who we think might need medication — or who they think might need medication — we recommend they have an evaluation at the counseling center,” Higham said. “If the counseling people also feel that that might be useful, [the student] would have a consultation with a psychopharmacologist here and then a decision would be made about whether that was the right step.”