

# The Effect of Identifying with One's University on Mental Health Among Emerging Adults

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## Introduction

Emerging adulthood (e.g., ages 18-25; Arnett, 2000) is a stage of life characterized by notable personal development across several domains, including social identity. Many emerging adults attend colleges and universities, a context in which substantial social identity development occurs and strong social ties form. Cameron (2004) proposes three dimensions of social identity -- centrality, ingroup ties, and ingroup affect -- that can be measured for each group to which an individual belongs. Centrality is defined as how frequently identification with a particular group comes to mind and how integral this membership is to the way individuals define themselves. Ingroup ties are the perception of one's similarity, belongingness, and connection to the other members of the group. Lastly, ingroup affect refers to emotions one experiences as a result of identification with a particular group.

The present study investigated the relationships among perceived belongingness to GWU (social identity) with negative and positive indicators of mental health. Research has shown that the development of strong social ties predicts lower rates of anxiety and depression, while a lack of group connections predicts higher rates of anxiety and depression (Pittman & Richmond, 2008). This is particularly important because college students report high levels of depression symptoms (13.5) and anxiety symptoms (21.8%; American College Health Association, 2014). Thus, it was hypothesized that there would be inverse relationships between social identity factors and symptoms of those disorders, including depression, worry and panic symptoms. Social identity model dimensions have also been shown to predict psychological well-being (Cameron, 1999). Therefore, it was hypothesized that the social identity factors would be positively related to measures of psychological well-being, including optimism and positive affect, and inversely related to negative affect.

## Methods

### Predictors:

**Social Identity Scale (Cameron, 2004):** 12-item self-report measure designed to measure one's connection to a social group with the following 4-item subscales, which reflect the dimensions of social identity theory:

- **Centrality Subscale**
  - Example item: "I often think about being a George Washington University student"
- **Ingroup Ties Subscale**
  - Example item: "I have a lot in common with other George Washington University students"
- **Ingroup Affect Subscale**
  - Example item: "In general I'm glad to be a George Washington University student"

### Outcomes:

**Depression: Patient Health Questionnaire, PHQ-9 (Kroenke et al., 2002):** 9 items assessing presence and severity of depression over the past 2 weeks on 4-point scale

- Example items: "Little interest or pleasure in doing things,"

**Worry: Penn State Worry Questionnaire (PSWQ; Meyer et al., 1990):** 16 items assessing the symptoms of worry

- Example item: "Many situations make me worry"

**Panic: Beck Anxiety Inventory (BAI; Beck et al., 1988):** 21 items assessing the symptoms of panic experienced over the past month on a 4-point Likert scale

- Example items: "numbness or tingling," "hands trembling"

**Optimism: Life Orientation Test-Revised (LOT-R; Scheier, M.F. & Carver, C.S., 1985):** 10 item self-report measure designed to assess an individual's level of optimism

- Example items: "In uncertain times, I usually expect the best,"

**Positive and Negative Affect Scale (PANAS; Watson et al., 1988):** 20 item self-report Likert scale designed to measure positive and negative affect

- Example item for positive affect: "Interested," "Excited"
- Example item for negative affect: "Distressed," "Upset"

## Results

**Table 1 Intercorrelations Between Social Identity Subscales**

Variable (Mean, SD)	Centrality (19.6, 4.0)	Ingroup Ties (18.4, 5.9)	Ingroup Affect (19.5, 4.0)
Centrality	-	-	-
Ingroup Ties	.20*	-	-
Ingroup Affect	.17*	.47*	-

**Table 2 Correlations Between Social Identity Subscales & Mental Health Outcomes**

Variable (Mean, SD)	Depression (8.4, 5.5)	Worry (55.2, 13.7)	Panic (18.6, 11.5)
Centrality	.10	.09	.09
Ingroup Ties	-.22*	-.12*	-.14*
Ingroup Affect	-.18*	-.14*	-.09

**Table 3 Correlations Between Social Identity Subscales & Psychosocial Outcomes**

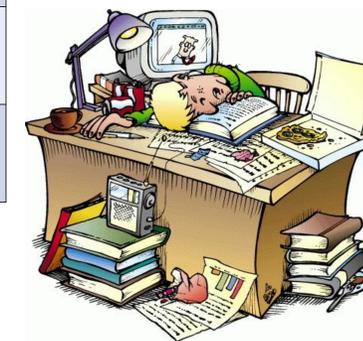
Variable (Mean, SD)	Optimism (23.0, 6.2)	Positive Affect (31.1, 7.8)	Negative Affect (24.7, 7.3)
Centrality	.06	.04	.05
Ingroup Ties	.30*	.24*	-.15*
Ingroup Affect	.28*	.24*	-.23*

## Discussion

The results of the present study suggest that students who more strongly identify with the university are more optimistic and experience more positive affect. In addition, these students experience fewer depressive symptoms and fewer negative emotions. While ingroup ties and ingroup affect were negatively correlated with depression, panic, worry, and negative affect, and positively correlated with optimism and positive affect, results did not demonstrate any significant relationship between centrality and mental health outcomes.

The sample was selected from a single university and consisted of underclassmen who were enrolled in psychology courses. Future studies investigating the impact of university belongingness should work to recruit samples that reflect diverse university atmospheres, sizes, and demographic compositions. Finally, as the present study is cross-sectional, the directionality of relationships between social identity and mental well-being cannot be determined. Therefore, it would be helpful to evaluate associations between university belongingness and psychological outcomes over time to better understand the influence of school affiliation and identity in emerging adults.

These findings carry numerous implications for both the perspective of the university and its students. From the perspective of the university, there is substantial incentive to increase their students' identification with the school. Financially, having higher student identification may correspond to higher retention rates, maintaining revenue from tuition. From the students' perspective, a stronger identification with the university could have an impact beyond the improvement of mental health symptoms. Psychological wellbeing fosters concentration, and subsequently learning, in the higher education environment. The findings here reaffirms the contribution of psychological well-being to the development of friendship and other social bonds. Ultimately, students who strongly identify with their school be more likely to be having the best years of their lives.



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