

THE PRINCETON REVIEW®

2025 CAMPUS MENTAL HEALTH SURVEY REPORT

ABOUT THE SURVEY

In partnership with the Ruderman Family Foundation, The Princeton Review conducted this two-part survey from the Fall of 2024 through Spring 2025. The first reached out to administrators at nearly 2,000 colleges nationwide that the education services company annually surveys about their institutional data, academics, campus services, and other offerings. On that annual survey, 56 questions were added about the institution's mental health and wellness services for students. Administrators from nearly 540 colleges completed that section of the survey. The second component gathered opinions from students at colleges and institutions participating in The Princeton Review's annual college student survey. On this survey, which asks students to rate their schools on dozens of topics and report on their campus experiences at them, four questions were added about the students' awareness of their school's mental health and wellness services. Findings reflect opinions of students from more than 300 colleges.

This report presents selected findings of the administrator and student surveys.

THE SURVEYS WERE CONDUCTED IN PARTNERSHIP WITH RUDERMAN FAMILY FOUNDATION TO PROMOTE MENTAL HEALTH RESOURCES—AND STUDENT AWARENESS OF THEM—ON COLLEGE CAMPUSES.

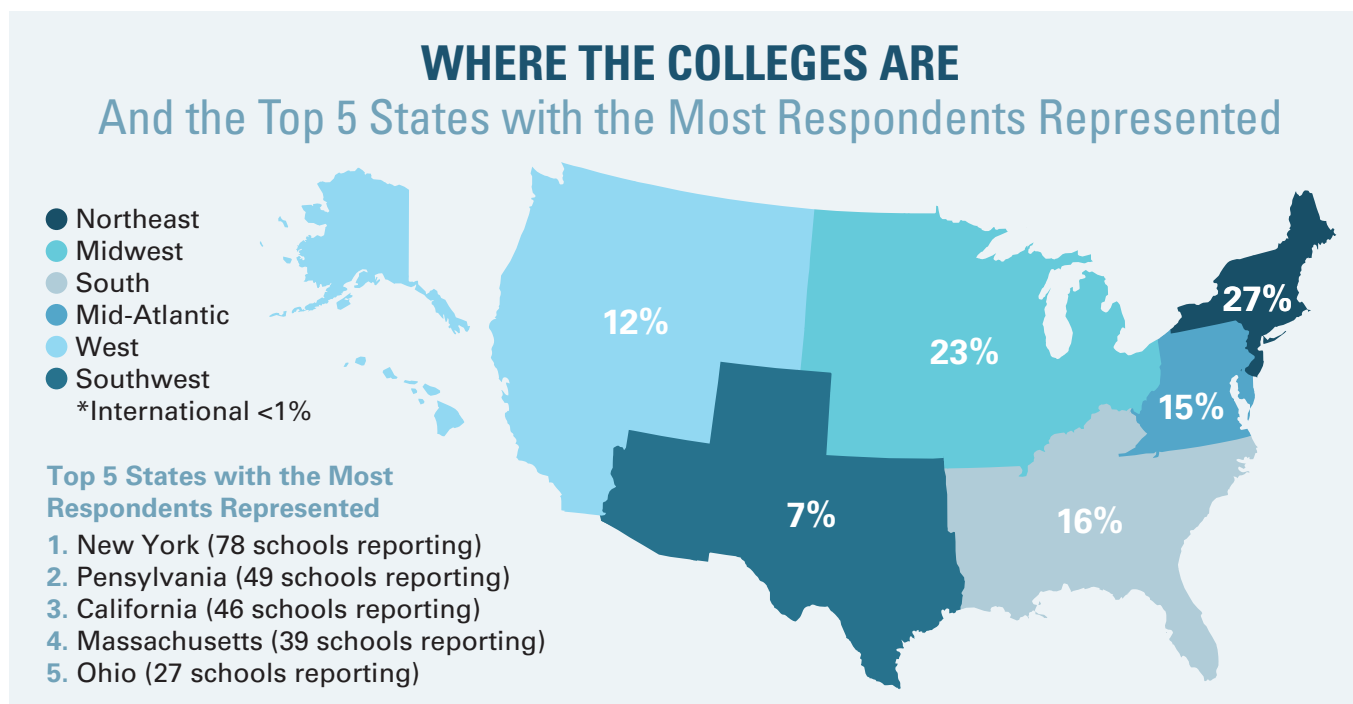


ABOUT THE SURVEY: 2025 CAMPUS MENTAL HEALTH SURVEY

Colleges nationwide are increasingly integrating mental health into their core student support systems. Results from *The Princeton Review–Ruderman Family Foundation 2025 Campus Mental Health Survey*—featuring responses from 540 institutions, more than twice as many as last year—indicate continued progress toward preventive, inclusive, and evidence-based wellness models.

The Princeton Review conducted the 2025 Campus Mental Health Survey—the company’s second annual survey of colleges’ mental health offerings—from the Fall of 2024 through Spring 2025. The 56-question survey was sent to administrators at nearly 2,000 institutions. They included colleges The Princeton Review profiles in its book [The Best 391 Colleges: 2026 Edition](#) (August 12, 2025), colleges featured in the company’s website designation [Best Regional Colleges for 2026](#), and colleges who annually report data to The Princeton Review to be featured on their website and [college search tool](#). The Princeton Review conducted this survey in partnership with the Ruderman Family Foundation.

Administrators from nearly 540 colleges completed the full survey, which had a response rate of 27%. 63% of the respondents were from private colleges and 37% were from public colleges.



ABOUT THE PRINCETON REVIEW

[The Princeton Review](#) is a leading tutoring, test prep, and college admissions services company. Every year, it helps millions of college- and graduate school-bound students as well as working professionals achieve their education and career goals through its many education services and products. These include online and in-person courses delivered by a network of more than 4,000 teachers and tutors; online resources; a [line](#) of more than 150 print and digital books published by Penguin Random House; and dozens of categories of school rankings. Founded in 1981, the company is now in its 44th year. The company’s [Tutor.com](#) brand, now in its 25th year, is one of the largest online tutoring services in the U.S. It comprises a community of thousands of tutors who have delivered more than 28 million tutoring sessions. The Princeton Review, headquartered in New York, NY, is not affiliated with Princeton University. For more information, visit [PrincetonReview.com](#). Follow the company on [Instagram](#) (@theprincetonreview), [LinkedIn](#) (the-princeton-review), [YouTube](#) (@ThePrincetonReview), and [TikTok](#) (@princeton.review).

ABOUT THE RUDERMAN FAMILY FOUNDATION

The Ruderman Family Foundation is an internationally recognized organization working to end the stigma surrounding mental health. By identifying gaps in resources, supporting innovative programs, and forging partnerships, the Foundation is reshaping how communities nationwide understand and prioritize mental health. From empowering educators and students, to collaborating with leaders in entertainment, sports, and gaming to foster connection and resilience, the Foundation’s work spans multiple arenas. Together, these efforts are turning awareness into action and making mental well-being a visible, mainstream part of society. For more information, visit www.rudermanfoundation.org

CONTACTS

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EXECUTIVE SUMMARY

Findings from both administrator and student surveys show steady, measurable progress in campus infrastructure, policies, and awareness surrounding student mental health. This year’s data also underscores the number of schools newly implementing specific offerings, highlighting a continued institutional shift toward broader, more preventive approaches to student well-being.

SUMMARY OF INSTITUTIONAL SHIFTS

This year’s findings reflect both continuity and expansion. Colleges are steadily adding new structures, roles, programs, and policies—that extend mental health care along a continuum of need. The percentage of institutions newly implementing specific offerings (ranging from 3% to 14%) suggests an active and ongoing adaptation process rather than static maintenance. These developments point toward a maturing ecosystem approach that emphasizes early intervention, preventive education, and normalized access to support.

2025 CAMPUS MENTAL HEALTH SURVEY

EXECUTIVE SUMMARY

The Princeton Review in partnership with the Ruderman Family Foundation

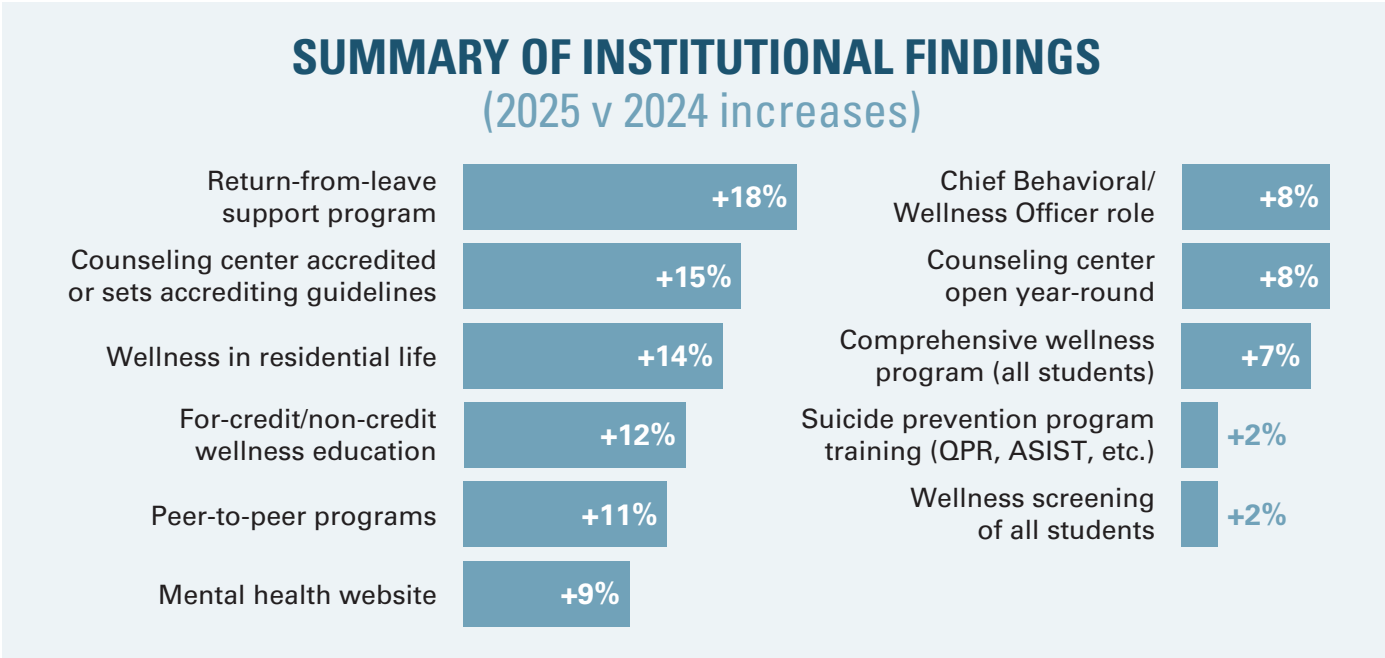
A NATIONWIDE SHIFT TOWARD PROACTIVE WELL-BEING

540 colleges

31,462 students

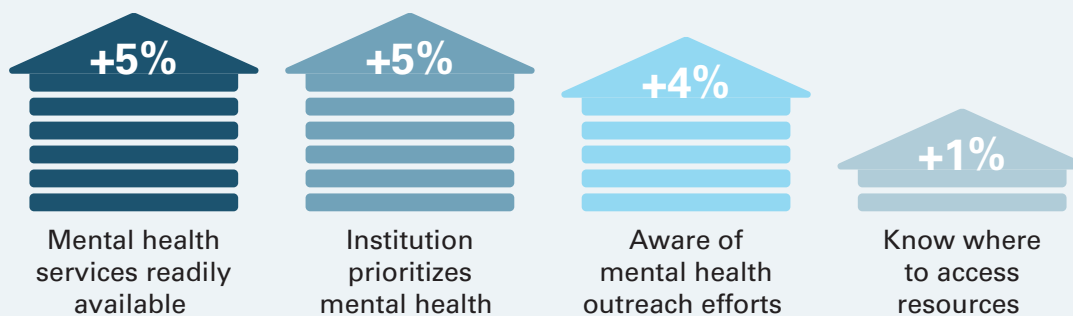
Findings show higher education embracing a more comprehensive, prevention-oriented approach to student well-being

Colleges are building sustainable wellness ecosystems—expanding infrastructure, training, and awareness that normalize mental health as a shared campus responsibility.



SUMMARY OF STUDENT SURVEY FINDINGS

(2025 v 2024 increases)



CONCLUSION

Between 2024 and 2025, institutions reported broad-based progress across every indicator of campus mental health infrastructure. The majority of schools this year reported adding new programs or formalizing policies, underscoring a movement toward sustained, system-level investment in student well-being. Continued tracking of these indicators will help clarify how institutions maintain and scale these changes over time.

2025 MENTAL HEALTH SERVICES HONOR ROLL SCHOOLS

These 30 institutions have shown a strong commitment to their students' mental health and well-being based on these three areas:

1. Overall administrative support for campus mental health and well-being through policies including commitments to staffing and student support.
2. A campus quality of life for students that is both healthy and attentive to overall well-being.
3. Empowerment by the school through which students can address their own mental health with education programs and peer-to-peer offerings.

You can find this data on each school's [college profile](#) or through a dedicated Campus Mental Health page [here](#).

Arizona State University
(Tempe, AZ)
Boston University
(Boston, MA)
Coastal Carolina University
(Conway, SC)
Colorado State University
(Fort Collins, CO)
Columbia University
(New York, NY)
Dartmouth College
(Hanover, NH)
Florida Institute of Technology
(Melbourne, FL)
Massachusetts Institute of Technology
(Cambridge, MA)
Mercer University
(Macon, GA)
Michigan Technological University
(Houghton, MI)

Molloy University
(Rockville Centre, NY)
Nazareth College
(Rochester, NY)
New York University
(New York, NY)
Northern Michigan University
(Marquette, MI)
Pace University
(New York, NY)
Princeton University
(Princeton, NJ)
Rice University
(Houston, TX)
Samford University
(Birmingham, AL)
St. John's University (NY)
(Queens, NY)
State University of New York—
Stony Brook University
(Stony Brook, NY)

State University of New York—
University at Albany
(Albany, NY)
Stevens Institute of Technology
(Hoboken, NJ)
Syracuse University
(Syracuse, NY)
Texas Christian University
(Fort Worth, TX)
University of Florida
(Gainesville, FL)
University of North Carolina
at Greensboro
(Greensboro, NC)
University of North Dakota
(Grand Forks, ND)
Weber State University
(Ogden, UT)
William & Mary
(Williamsburg, VA)
Worcester Polytechnic Institute
(Worcester, MA)

WHY PARTICIPATION MATTERS: KEY BENEFITS FOR SCHOOLS

Participation in *The Princeton Review–Ruderman Family Foundation Campus Mental Health Survey* offers colleges and universities a clear, evidence-based understanding of how their mental health services compare nationally and where opportunities for growth exist.


- **Benchmark Performance Across Peer Institutions**
Schools can see how their mental health programs and policies align with those at hundreds of peer institutions nationwide. This comparative view helps identify both strengths and areas for continued improvement.
- **Inform Campus Planning and Resource Allocation**
Survey results highlight national trends—such as the growing adoption of peer-support models and wellness education—that can guide institutional planning and resource decisions. Findings can help campus leaders make informed choices about future investments and initiatives.
- **Assess Student Awareness and Access**
By combining administrator and student perspectives, the survey provides insight into how well students understand and engage with available resources. This helps schools evaluate whether programs are not only in place but also visible and accessible to students.
- **Gain Recognition Through the Mental Health Services Honor Roll**
Participating institutions are eligible for inclusion in *The Princeton Review's* Mental Health Services Honor Roll, which highlights campuses demonstrating notable commitment to student well-being. Recognition can reinforce institutional values and provide public acknowledgment of ongoing efforts.
- **Support Long-Term Improvement and Accountability**
Annual participation enables schools to track changes over time, document progress, and contribute to a broader understanding of best practices in campus mental health. This consistent measurement supports transparent, data-driven improvement.

IN SUMMARY


The Campus Mental Health Survey provides a structured way for colleges to evaluate their current efforts, learn from peer practices, and plan next steps in supporting student well-being.

SELECT SCHOOL SURVEY FINDINGS

A selection of the survey's 56 questions, answer choices, and percentages of respondents choosing each answer are shown below by respondents overall. Answers chosen by the highest percentage of respondents are underlined. The numbered fields represented below make up the criteria for *The Princeton Review's* 2026 Mental Health Services Honor Roll. Non-numbered fields were asked of schools but are not part of the honor roll methodology. The 30 schools chosen for the Mental Health Services Honor Roll reported in their offerings the criteria deemed most important by the Campus Mental Health Advisory Board. Please see more information at the end of this data summary.

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Training is available for students and faculty/staff in at least one of the following Question, Persuade, Refer (QPR); Applied Suicide Intervention Skills Training (ASIST); SafeTALK; Mental Health First Aid; Talk Saves Lives; Campus Connect

89% of schools reported offering at least one of the education trainings above
11% of schools reported offering no education and training opportunities
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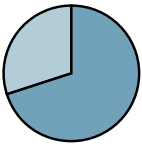
Institution has a Chief Behavioral Health Officer (and/or Chief Wellness Officer) tasked by the administration to advise on and implement policies and programs related to mental health on campus

73% of schools reported having this role on their campus
27% of schools reported having no such role on their campus

3. **Clinicians are trained to provide care to these specific groups** (ordered from the highest to lowest percentages of schools offering tailored care to each group)

Student Group	% of Schools Offering Tailored Care
Racial/ethnic minority students	93%
LGBTQIA+ students	93%
Neurodiverse students	92%
Students with substance use disorders	91%
Students experiencing eating concerns	87%
First-generation students	85%
Student-athletes	84%
Students experiencing discrimination based on sexual orientation	80%
International students	80%
Students experiencing discrimination based on gender identity	80%
Students experiencing discrimination based on race/ethnicity	78%
Students on scholarship or financial aid	73%
Students who are veterans	71%
Students experiencing religious discrimination	63%

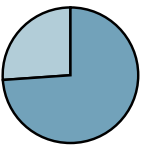
4. **How often is a wellness screening and assessment of all students conducted?**



70% of schools reported having no formal wellness screening of all students
30% of schools reported regular wellness screenings of all students

Frequency			
At least monthly	10%	Every 6–9 months	7%
Every 1–3 months	7%	Every 9–12 months	59%
Every 3–6 months	17%		

5. **Institution has peer-to-peer offerings relating to mental health**



74% of schools reported having peer-to-peer mental health offerings
26% of schools reported having no peer-to-peer mental health offerings

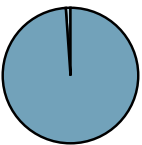
6. **Institution incorporates mental health and wellness into the residential experience**



Top themes included: Mental Health Education and Awareness; Residence Life Staff and Peer Support; Counseling and Crisis Services; Wellness and Wellbeing Programming; Community Building and Supportive Environments

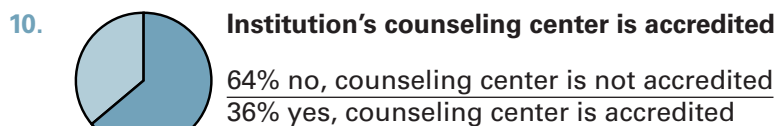
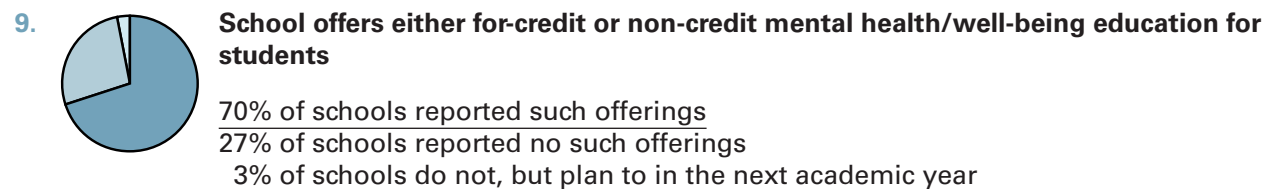
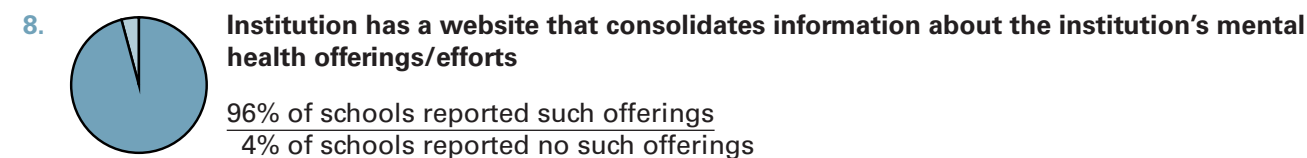
93% of schools reported incorporating offerings into residential life
7% of schools reported not incorporating offerings into residential life

7. **Institution has a mental health/wellness program that makes counseling, referral, and well-being services available to all students**

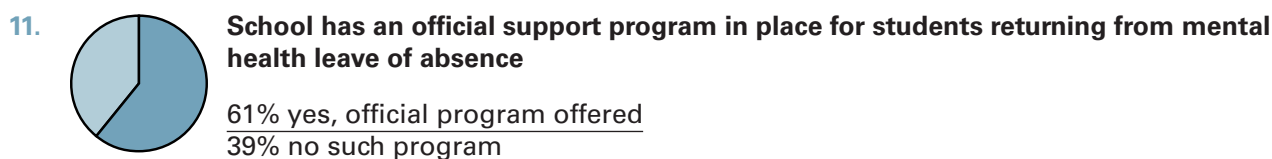


99% of schools reported such offerings
1% of schools reported no such offerings

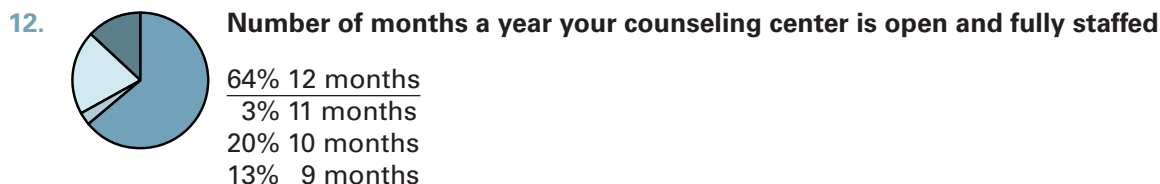
Mental Health Services Details (check all that apply)			
Students can maintain confidentiality	89%	Available as part of urgent care (Urgent Counseling)	61%
Available for free	85%	Available 24/7	29%
Available in person or by telehealth	84%	Available at a discounted rate	12%



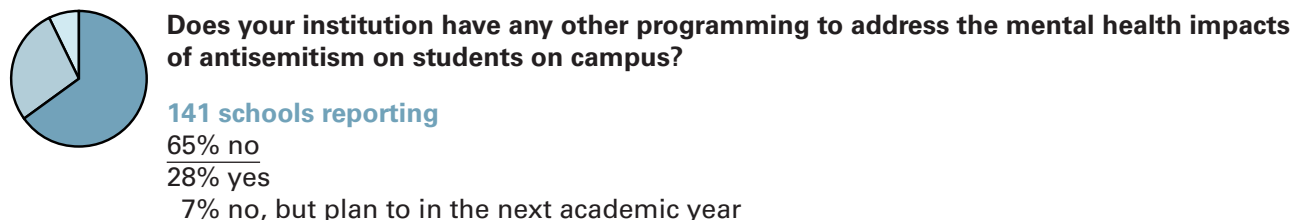
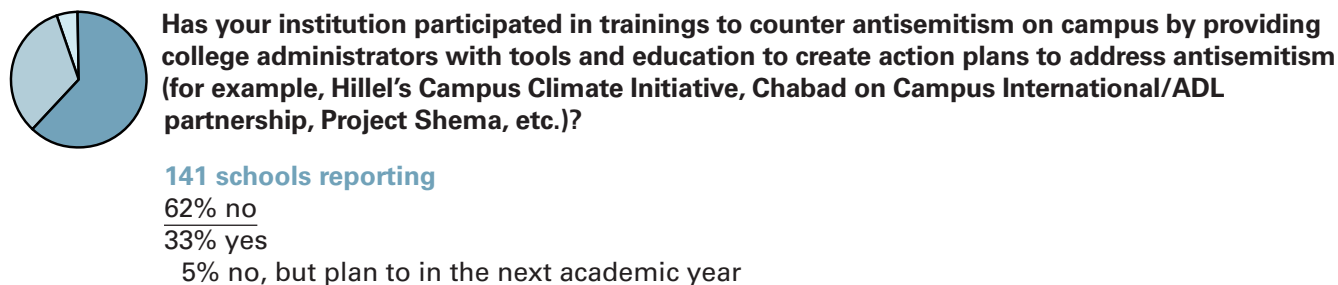
If no, does your institution use any accrediting guidelines to set expectations?



Is it policy for school to maintain contact with students after they take a mental health leave of absence to check on their well-being?



OTHER SCHOOL REPORTED DATA FIELDS OF NOTE





Institution has a mental health task force, committee, office, and/or coordinator that are tasked by the administration to advise on and implement policies and programs related to student mental health on campus

345 schools reporting

82% yes
18% no



Institution has a mental health task force, committee, office, and/or coordinator that are tasked by the administration to advise on and implement policies and programs related to employee mental health on campus

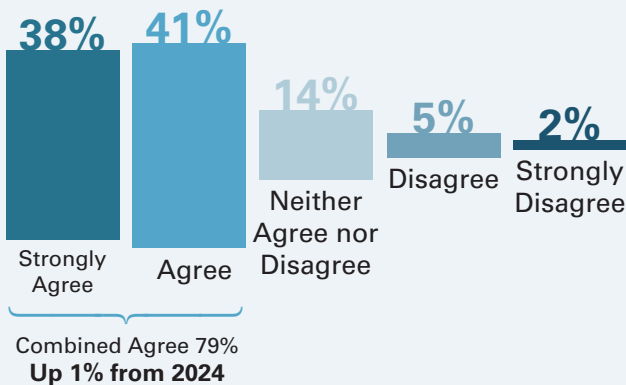
145 schools reporting

61% yes
39% no

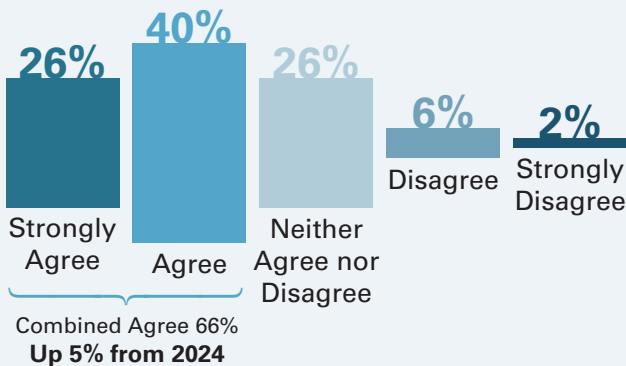
SELECT STUDENT SURVEY FINDINGS

Below are the overall responses to select questions from The Princeton Review's latest annual [undergraduate student survey](#). For the 2024–25 collection cycle four questions relating to campus mental health were included. The questions offer an answer choice on a five-point grid—a Likert scale—the most commonly used measurement for this type of survey research. The answer choices for the questions below were presented as statements with students responding with the following answer choices: *Strongly Disagree*, *Disagree*, *Neither Agree nor Disagree*, *Agree*, *Strongly Agree*.

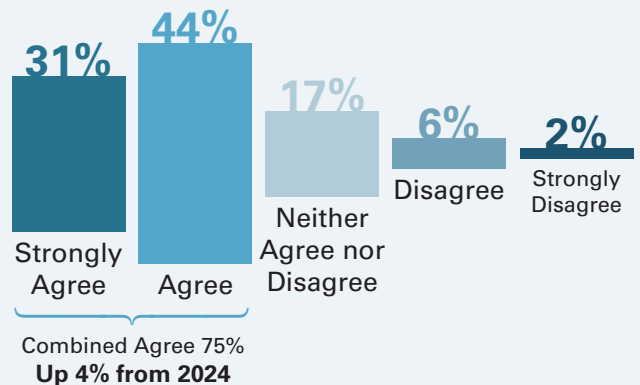
- 1. If I needed to seek professional help for my mental or emotional health, I would know where to access my school's resources.**



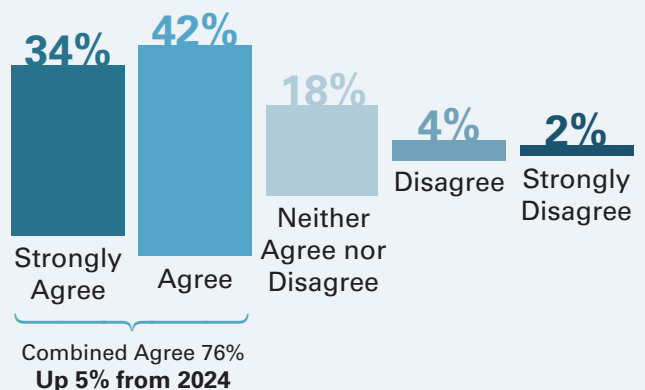
- 2. My institution prioritizes the mental health of students.**



- 3. I am aware of mental health outreach efforts by my school (such as educational programs, awareness events, anti-stigma campaigns, screening days).**



- 4. Mental health services are readily available on campus.**



MENTAL HEALTH SERVICES HONOR ROLL METHODOLOGY

The Princeton Review assembled a panel of experts in higher education mental health practices to produce a survey for school administrators. The panel then selected key questions for its honor-roll criteria. As with all of the Princeton Review's research, nearly all 4-year colleges and universities were invited to participate early in the year.

The Princeton Review asked all the schools it annually collects data from to answer questions about their efforts to provide (and continually develop) a student experience centering around mental health and wellness. Colleges that did not supply answers to the survey are displayed as "Not Reported" in the Mental Health and Wellness section of their college profile. The schools have an opportunity to update their Campus Mental Health data every year and will have their data posted online upon completion of their reporting.

The questions covered include:

- 1. Training is available for students and faculty/staff in at least one of the following Question, Persuade, Refer (QPR); Applied Suicide Intervention Skills Training (ASIST); SafeTALK; Mental Health First Aid; Talk Saves Lives; Campus Connect**

Our board notes that ideally a campus reviews a number of well-established prevention programs and selects one which best suits the needs of their campus. Selection criteria is often based on cultural fit, number of trainers required, length of training, mode of training, target audiences, and resources available. At times, a campus might select more than one well-established training for different populations on campus. It might also create customized trainings, but the key is that anything available to students "should have clear outcomes and learning objectives." Colleges have an opportunity to help respond to and treat those mental health issues that first occur in those between the ages of 18 and 24, and the wider the range of training, the more a school can cover.

- 2. Institution has a Chief Behavioral Health Officer (and/or Chief Wellness Officer) tasked by the administration to advise on and implement policies and programs related to mental health on campus**

Our board notes that these positions not only demonstrate a commitment to collegiate mental health but show a respect among colleagues in various roles throughout campus for the expertise of an experienced mental health professional as well as an acknowledgement of the specialized nature of the role. Ideally, the person in that role and/or designees from their team consult on curricular issues, campus-wide strategy, environmental scans, faculty and staff (not just student) onboarding, risk mitigation, budgetary planning, fundraising, donors and campaigns. The person in this role is also able to remain current and share best practices and national (and beyond) trends with the wider campus community, as they are members (often leaders) in professional organizations and advisory boards focusing specifically on collegiate mental health. Most important, they can ensure the alignment between the scope and depth of what a campus seeks to deliver, messages that they deliver and is resourced to deliver.

- 3. Clinicians are trained to provide care to these specific groups: First-generation students; International students; LGBTQIA+ students; Neurodiverse students; Racial/ethnic minority students; Student-athletes; Students experiencing discrimination based on gender identity; Students experiencing discrimination based on race/ethnicity; Students experiencing discrimination based on sexual orientation; Students experiencing eating concerns; Students experiencing religious discrimination; Students on scholarship or financial aid; Students who are veterans; Students with Substance Use Disorders**

Members of our board agree that it is critical to include the thoughts, opinions, and experiences of students, faculty, and staff to ensure that services and resources meet their needs. They note that college counseling centers should have clinicians with not only an interest in specialty areas and engaging with specific groups but, also, postgraduate/post-licensure training and expertise in those areas. The more varied these backgrounds, the better served specific groups will be, whether through individual and group psychotherapy, specialty workshops, outreach programming, or supervision of trainees. Additionally, schools can continue to grow by listening to direct feedback from their intended audience. This not only improves the appropriateness and acceptability of services but shows students, faculty, and staff that their college or university is invested in their mental health and well-being. Board members add that any programs or communications produced by the school should be responsive to feedback from specific groups, so that it can tailor to their needs.

4. How often a wellness screening and assessment of all students is conducted

Our board leans in favor of regular, widespread screening (campus screening days, screenings in primary care medical services, online screenings sent to randomly selected students via email, etc.) for two reasons: First, it introduces students to available resources and supports they may not have sought out on their own. Second, it is an awareness-raising tool that helps to destigmatize any negative perceptions about seeking services, and the board suggests there's a value in making these screenings as routine as a yearly physical that checks for things like high cholesterol or blood pressure.

5. Institution has peer-to-peer offerings relating to mental health

Board members note that even schools that are fully staffed around the year to provide professional coverage to students may benefit from developing peer-to-peer offerings for one simple reason: some students may feel more comfortable speaking with a fellow classmate. Just as trained clinicians may be better served to meet the needs of students from specific backgrounds (see Question #3 above), so too may those who have been through similar stressors on campus be seen as more empathetic. It's also possible that students may be more willing to take issues that they deem less serious (although not necessarily objectively less serious) to a peer as opposed to a professional. Ultimately, peer programs have a long history of thriving and playing an important role on many campuses.

6. Institution incorporates mental health and wellness into the residential experience

Emotional and physical well-being are foundational to academic rigor. Our board explains that a healthy integration of well-being across campus, from curriculum to athletics to residential life, can demonstrate that campus leadership is just as committed to the emotional wellness of students as they are to their academic wellness. They also point to the natural infrastructure of residential communities, which can support campaigns and programming that normalizes healthy communication, sleep, eating, and self-care.

7. Institution has a mental health/wellness program that makes counseling, referral, and well-being services available to all students

There is no way to predict the services that students will need, which is why a robust referral network is a key part of a counseling center's network of care. Off-campus referrals allow for targeted expertise in a variety of specialty areas (eating concerns, substance abuse, trauma, etc.), as well as the opportunity for a higher level and/or higher frequency of care. Having such services available helps to broaden coverage.

8. Institution has a website that consolidates information about the institution's mental health offerings/efforts

Think of this akin to a tree falling in the forest when nobody's around: if a school has services that students remain unaware of, how useful are those offerings? To that end, the board notes that websites are essential in dispensing clear and concise messaging regarding mental health resources, wayfinding, screening tools, and asynchronous learning. Websites are also now being used effectively to guide students to navigate off-campus referral databases; make students aware of the counseling center's scope of service; manage expectations and provide psychoeducation; and highlight important policies, procedures, and workflows (such as for seeking accommodations). According to findings from the NIH, there is a positive correlation between enrollment size in programs and the clarity of online information.

9. School offers either for-credit or non-credit mental health/well-being education for students

The value of well-being courses being a part of the curriculum is akin to the value of education being a natural part of residential life (see Question #6), or as the board puts it, it reduces stigma and normalizes help-seeking. It also gives faculty an opportunity to model discussing mental health topics, which allows them to appear more approachable and less intimidating to students. An increase in the number of available courses brings with it the opportunity to shift culture on campus where a discussion of mental health, help-seeking, and self-care becomes common place and part of the fabric of the university.

10. Institution's counseling center is accredited or if not accredited, uses accrediting guidelines to set expectations

The institution's counseling center is either accredited or, if not formally accredited, uses recognized accrediting guidelines to establish and maintain high professional standards. Accreditation reflects that the counseling center has voluntarily undergone a comprehensive external review by a team of counseling professionals, verifying that its services meet the highest established standards in the field. Centers that are not accredited but follow accrediting guidelines demonstrate a commitment to aligning their practices with these same rigorous expectations.

11. School has an official support program in place for students returning from mental health leave of absence

Institutions of higher education support the self-determination of all students, especially those students who are actively enrolled in classes and students taking a leave of absence. The board recognizes students, their families, and their supporters have a right to choose what their wellness goals are and how they want to proceed in achieving those goals. Institutions support students to make informed decisions about taking a leave of absence and provide pathways that are equitable for return.

12. Number of months a year your counseling center is open and fully staffed

The board feels that the level of services provided need to reflect the student presence on campus. This may vary depending on the type of school, or whether it is open year-round. What's important is that students are aware of when they will reliably be able to seek counseling, and that there are alternatives available for students who need continued care.

2025-2026 CAMPUS MENTAL HEALTH ADVISORY BOARD MEMBERS:

The 2025–2026 Campus Mental Health Advisory Board includes the following members:

- **Brett Harris**, Senior Research Scientist, NORC; Clinical Associate Professor, University at Albany School of Public Health; President, New York State Public Health Association
- **Sarah Ketchen Lipson, PhD, EdM**, Boston University, Associate Professor, Health Law Policy and Management; Principal Investigator, Healthy Minds Network
- **Nadja Lopez, PhD**, William James College, Executive Director, Center for Behavioral Health, Equity, and Leadership in Schools; Director, Graduate Certificate in Classroom Mental Health Faculty, Children and Families of Adversity and Resilience Concentration; Adjunct Faculty, School Psychology Department
- **Karen Singleton, PhD**, Massachusetts Institute of Technology, Deputy Chief Health Officer, MIT Health

APPENDIX

SUMMARY OF INSTITUTIONAL FINDINGS

Institutions reported measurable gains across all fields tracked in both years. Each row below includes the year-over-year (YOY) percentage-point change and the proportion of institutions that reported adding the offering in 2025.

Table 1. Institutional Mental Health Offerings (2024–2025)

Note: N = 540 institutions completed the 2025 survey. Percentages are based on schools responding to each field (n varies by item).

Category	2024	2025	YOY Change	Schools Adding Offering in 2025	(Schools Reporting field in 2025)	% of total respondents (N = 540)
<i>Suicide prevention program training (QPR, ASIST, etc.)</i>	87%	89%	+2 pp	8%	320	59%
<i>Chief Behavioral/Wellness Officer role</i>	65%	73%	+8 pp	8%	339	63%
<i>Wellness screening of all students</i>	28%	30%	+2 pp	7%	389	72%
<i>Peer-to-peer programs</i>	63%	74%	+11 pp	8%	325	60%
<i>Wellness in residential life</i>	79%	93%	+14 pp	6%	322	60%
<i>Comprehensive wellness program (all students)</i>	92%	99%	+7 pp	4%	520	96%
<i>Mental health website</i>	87%	96%	+9 pp	3%	520	96%
<i>For-credit/non-credit wellness education</i>	58%	70%	+12 pp	14%	320	59%
<i>Counseling center accredited or sets accrediting guidelines</i>	61%	76%	+15 pp	13%	307	57%
<i>Return-from-leave support program</i>	43%	61%	+18 pp	13%	299	55%
<i>Counseling center open year-round</i>	56%	64%	+8 pp	12%	321	59%

The most significant increase was the 18-point rise in schools with formal mental health leave of absence support programs (13% newly added this year). Multiple areas, including peer-to-peer programming, mental health and wellness residential life integration, and for-credit or non-credit mental health/well-being education for students, also show double-digit growth, reflecting expanding infrastructure and awareness of student well-being as a shared campus responsibility.

STUDENT AWARENESS AND PERCEPTION

Student responses also demonstrate incremental gains in awareness and perceived prioritization of mental health services.

Table 2. Princeton Review Student Survey (2024–2025)

Note: N = 31,462 students participated in the 2025 survey.

Question	2024 Strongly Agree/Agree	2025 Strongly Agree/Agree	YOY Change
<i>Know where to access resources</i>	78%	79%	+1 pp
<i>Institution prioritizes mental health</i>	61%	66%	+5 pp
<i>Aware of mental health outreach efforts</i>	71%	75%	+4 pp
<i>Mental health services readily available</i>	71%	76%	+5 pp

While student ratings improved modestly across all measures, the data indicates that awareness of services and institutional visibility continue to strengthen year over year.