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Student Mental Health & Wellbeing in France: What changed after Covid?

- A French perspective based on recent national student surveys
- Several years after Covid, what changed and what did not?
- Focus on mental health, inequalities, support systems and access to care

ESAC - 8th of July 2026

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What is OVE?

- **OVE = the French Observatory for Student Life**
- A public research body created in **1989**
- Produces national surveys on students' living conditions and more recently, on health and wellbeing
- Supports research and informs higher education policy

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Our recent data

- **Conditions of Life Survey 2023**
  - **49,523** complete questionnaires
- **Health and Wellbeing Survey 2024**
  - **5,773** usable questionnaires
  - The 2024 survey recontacted 2023 respondents
  - It excluded first-year entrants in 2023–2024 and students in short-cycle STS programmes

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From a broad European picture to the French case

- Across Europe, student wellbeing is under pressure
- In France, the question is not only how students feel
- It is also how they **reach support** or fail to reach it
- The French case helps connect mental health, institutions and access to care

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In France, student mental health became a major public issue

- Student mental health is no longer a marginal or specialist topic
- It is now central to higher education policy and student services
- Mental health was elevated as a **national priority in 2025 and extended into 2026**
- This shift reflects both growing concern and growing visibility

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The French support landscape has expanded since 2023

2023

France reformed its student health services

Expanded SSE missions

- Prevention
- First-line care
- Health monitoring
- Mental health

2024 — SSE activity recorded

685,000 consultations

264,000 students seen at least once

39% **of consultations linked to mental health**

Students can access support through multiple channels

The system is expanding — but more complex to navigate

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This is not a marginal issue

- **In 2024, 40.1% of students in higher education in France were in psychological distress**
- **26.0% reported degraded general health**
- **26.1%** reported a limiting health problem

→ These are large scale issues, not isolated situations

France, students in higher education. Source: OVE/DGESIP, Health and Wellbeing Survey 2024, forthcoming report.

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Student mental Health was closely tied to broader living conditions in 2024

- The BSE survey captured not only mental health, but also:
  - Sleep
  - Financial pressure
  - Food insecurity
  - Healthcare access
  - Everyday living and study conditions

→ Health and wellbeing should be approached as multidimensional

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Sleep: A good example of everyday strain

- In 2024, 45% of students rated their sleep as good or very good
- **21% rated it as bad or very bad**
- **Around one third report study difficulties related to sleep**

→ Sleep offers a useful entry point into everyday student strain

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Mental health is deeply unequal

- In 2024, men more often reported good or very good health than women
- Health perception worsened with age
- Students from working-class backgrounds reported poorer health than students from more advantaged backgrounds
- Living arrangements also shaped health perception

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Student vulnerability does not look the same for everyone

- French qualitative research (Bugeja-Bloch et *al.*, 2025): student precarity is **not one single profile**

1. **Severe multidimensional precarity**
2. **Blocked emancipation**
3. **Socio-educational mismatch**
4. **Lack of support after leaving the parental home**

Example — *one student's arrival in France was marked by unstable housing, temporary accommodation, dependence on new support networks, and the feeling of being "too much" in other people's homes.*

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Not all students relate to care in the same way

- The 2024 analyses identified **3 broad care-use profiles**

1

Relatively healthy but under-informed students

2

Routine users of care

3

High-need students facing multiple barriers

- Care use was structured by **health status, gender, social background and resources**

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A central paradox in the French case

- Mental health support is more visible than before
- Student support services have expanded
- Yet high levels of need remain, and actual care use remains uneven
- The issue is not only « ***Do services exist?*** » but « ***Who reaches them, when, and under what conditions?*** »

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Mental healthcare remained underused

All students in 2024 — never consulted	**Students with depression** — actually consulted
53% never consulted a psychologist	**38%** consulted a psychologist
77% never consulted a psychiatrist	**22%** consulted a psychiatrist

- High levels of need did not translate into equal access to care

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What support is available to students in France today?

- **Student Health Services (SSE)** on campus
- **Santé Psy Étudiant**:
  - 12 free sessions
  - no upfront payment
  - renewable
  - 1,400 partner psychologists
  - 95,000+ students supported since 2021
- **BAPU**: specialised university psychological support centres
- **Cnaé**: listening, guidance, and reporting service for distress, violence or discrimination
- **Nightline**: peer-oriented listening lines and tools

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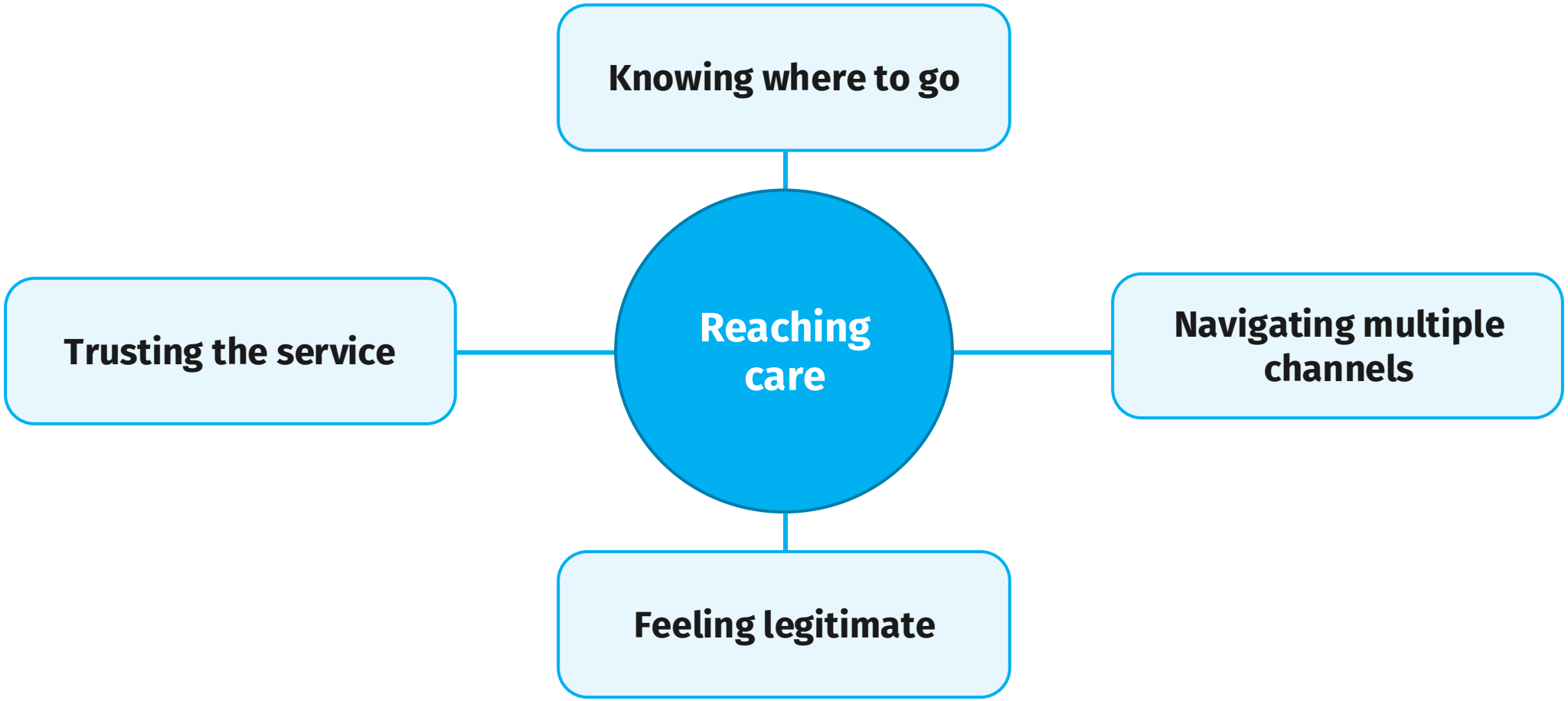
Access is also a coordination issue

- Reaching care is not only about recognising distress , it also depends on:



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Barriers to care were not only financial

- Reasons cited by students who forewent care in the previous 12 months:

- **Other barriers:** poor orientation, low health literacy, and minimisation of symptoms

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More Need, Better Access, or Both?

What seems to have improved

- Mental health issues were more visible
- Services were more visible within higher education
- Help-seeking may have become legitimate

But unmet needs remain high

- Psychological distress remains widespread
- Mental healthcare remains underused
- Barriers remain strong

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After Covid: Not Back to “Normal”

- **Covid was a turning point in the public visibility of student mental health**
- By 2024, the peak crisis may have passed, but strain remained high
- Current difficulties reflected **a broader configuration**:
  - Academic pressure
  - Cost of living pressures
  - Uncertainty
  - Unequal access to support

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For Student Affairs, this is not only about counselling

- What mattered in practice:
  - Easier access and navigation
  - Shorter waiting times
  - Better information
  - Coordination between services
  - Attention to inequalities
  - Non-judgmental interactions with professionals

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Conclusion: 3 takeaways from the French case

- In 2024, student mental health remained seriously degraded
- Difficulties were strongly shaped by social and gender inequalities
- The challenge was not only to provide services, but to make them truly reachable

Thank you for your attention

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