

# STATE OF SORORITY WOMEN'S MENTAL HEALTH

EXECUTIVE SUMMARY (ALL SORORITY AFFILIATIONS)



WOMEN'S RESEARCH INITIATIVE

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# WHAT WE SET OUT TO LEARN

This project aims to delineate the mental health landscape experienced by collegiate women, with a focus on sorority affiliation.

This study highlights a range of factors influencing mental well-being, including academic performance, social engagement, institutional integration and access to resources. We specifically wanted to know:



What is the prevalence of mental health issues among sorority members compared to unaffiliated peers?



Do sorority women differ from their unaffiliated peers on measures of positive mental health?  
Are there differences in the utilization of mental health resources between sorority members and unaffiliated peers?



What individual and institutional factors are associated with prevalent mental health issues among sorority women compared to their unaffiliated peers?

## ADDITIONAL CONTEXT

In 2023, the CDC released a [report](#) showing that teen girls are experiencing record high levels of violence, sadness and suicide risk. The data shows that nearly **3 in 5 (57%) of U.S. teen girls felt persistently sad or hopeless** in 2021—double that of boys, representing a nearly 60% increase and the highest level reported over the past decade.

## OUR RESEARCH PARTNER

**Dr. Amanda Blakewood Pascale** serves as associate professor of higher education administration at the University of North Florida in the College of Education and Human Services. Her research examines leadership in higher education settings and the praxis of ideas that promote university community success. She has particular interest in college student learning and faculty success.

## METHODOLOGY

### About the Study

The Healthy Minds Study, conducted by the University of Michigan for 15 years, is a large-scale, ongoing research project investigating the mental health and well-being of college students across the United States.

The survey includes seven sections: demographics, stress items, prevalence items, psychological coping items, help-seeking behavior items, institutional perception items and institutional characteristics.

### State of Sorority Women's Mental Health Specifics

- Data analyzed from 33,825 women on 135 campuses who completed the 2022-2023 survey
  - 12% — 4,059 respondents — identified as being a member of a sorority
  - Note: This data does not differentiate between council or type of sorority (social, business, honors, etc.). *Beginning with the 2023-2024 report, council differentiation will be possible with respondents able to choose: National Association of Latin Fraternal Organizations (NALFO); National Asian Pacific Islander Desi American Panhellenic Association (NAPA); National Multicultural Greek Council (NMGCC); National Pan-Hellenic Council (NPHC); National Panhellenic Council (CPC, NPC, PHA, PHC); Other (please specify)*
- 18-24 year-old, baccalaureate degree-seeking women



# KEY INSIGHTS

## Overall, this research confirmed sorority women have positive mental health and well-being.

Compared to their unaffiliated peers, sorority women are less afflicted by mental health challenges and feel less shame about mental health; in nearly every single measure, when compared to their peers, they have more positive mental health and well-being.

Sorority women reported being less depressed, less anxious, less likely to report thoughts of suicide, less likely to report feelings of loneliness, higher levels of flourishing\* and lower levels of psychological inflexibility\*\*. However, sorority women are more likely to say they have previously been diagnosed with anxiety and eating disorders.

Additionally, compared to their peers, sorority women face less critical stressors — like finances, access to food and stable housing — that can drive mental health afflictions.

## AHA! NO. 1

### WHILE SORORITY WOMEN HAVE MORE POSITIVE MENTAL HEALTH, SOME KNOWLEDGE GAPS EXIST FOR UNDERSTANDING AND TREATMENT.

Sorority women's mental health literacy lags when it comes to knowledge of mental health illnesses and symptoms compared to unaffiliated women.

Unaffiliated women are significantly more knowledgeable of symptoms, especially in understanding common symptoms for depression and eating disorders, while less than half of sorority women identified key symptoms as indicators.

Additionally, sorority women are less aware of treatment resources available compared to their unaffiliated peers. Sorority women also report lower levels of how to recognize that someone is in emotional or mental distress.

## AHA! NO. 2

### ENGAGEMENT CAN BE THE ANTIDOTE TO LONELINESS (AND SORORITY WOMEN ARE PROOF).

More than 40% of college women surveyed say they feel they lack companionship some of the time. However, unaffiliated women are significantly more likely to experience a lack of companionship or feel signs of loneliness often.

Sorority women are significantly more likely to describe themselves as fitting in and feeling a sense of belonging. They agree they fit in well at their school; have a group, community or social circle at school where they belong; and see themselves as a part of the campus community.

Sorority women lead the way in health-seeking behaviors, and lean on their connections for help.

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\* The Flourishing Scale is a brief 8-item summary measure of the respondent's self-perceived success in important areas such as relationships, self-esteem, purpose and optimism. The scale provides a single psychological well-being score.

\*\* Psychological inflexibility refers to the inability to accept, tolerate and navigate challenging thoughts, feelings and experiences. It is characterized by rigid and avoidance-based coping mechanisms that interfere with well-being and personal growth.

# KEY INSIGHTS

## AHA! NO. 3

### THE CHAPTER FACILITY CAN PLAY AN IMPORTANT ROLE FOR MENTAL HEALTH.

While these differences are marginal, women who live in a chapter facility have lower loneliness, depression and eating disorder ratings, but a higher anxiety rating compared to those who live out. A win for housing, sorority women who live in their chapter facility have higher average (mean) flourishing scores compared to those who don't.

## AHA! NO. 4

### SORORITY WOMEN'S POSITIVE SELF-PERCEPTIONS CAN BE A CATALYST FOR THEMSELVES AND OTHERS.

Sorority women generally have higher self-perceptions than unaffiliated women. They say they have a sense of purpose and are optimistic about their future. Their positive thinking, plus community approach, make them good candidates to promote mental health awareness and help seeking to others.

# IMPLICATIONS & CONSIDERATIONS

## KEEP MENTAL HEALTH & RELATED RESOURCES A KEY PRIORITY.

Continually infuse mental health education and resources into already established programming to better support our members. It is not proposed that members counsel other members, however, we should empower our women to recognize their own symptoms or have a better sense of when someone is in distress and know the resources available to help address needs.

This could look like engaging campus partners to bring their education to the sorority space — a powerful and collaborative opportunity.

## CONTINUE TO HELP COMBAT LONELINESS BY PROMOTING ENGAGEMENT FOR ALL MEMBERS.

We want to ensure members are engaged and not just joiners. This is especially important for different personas, like Comfort Seekers and Focused Achievers ([learn more about these personas here](#)), as well as large chapters.

Convening small groups, hosting conversation sessions and offering mentorships can help further engagement for all members. Consider what opportunities your organization already has in place to enhance engagement *and* increase mental health support.

## FURTHER EXPLORE THE ROLE AND IMPORTANCE THE CHAPTER FACILITY PLAYS.

Consider how your education and housing teams can partner to learn more about and promote the benefit of your organization's chapter facilities.

Explore different ways to make your facilities even more conducive to positive mental health. Are there existing housing resources or programs that can be tweaked to add mental health education? Can spaces be crafted where people feel comforted? For example, consider being more intentional about providing personalized study or relaxation spaces where members can have some "me time."

# IMPLICATIONS & CONSIDERATIONS

## ENCOURAGE MEMBERS TO PROMOTE THE IMPORTANCE OF MENTAL HEALTH ON THEIR CAMPUS & IN THEIR CHAPTERS.

Consider training the chapter leaders how to educate others about mental health and resources (to their chapter and on campus) and how to encourage help-seeking behavior to sisters, friends and classmates.

We know that sorority women feel responsible to help a friend or classmate in need, what are the resources or programming opportunities you can offer to help them assist others safely and effectively?

## CONSIDER SHARING TOP-LEVEL FINDINGS WITH PARENTS AND UNIVERSITIES.

Highlight the benefits, gaps and opportunities of mental health and sororities in marketing collateral and informational pieces. If your organization puts out a parent email or newsletter, what information would be vital to share with them? Are you communicating with student affairs staff? How can you infuse this research into your touchpoints with them?

Promote mental health training and resources as a donor investment opportunity. Foundation teams can include information in appeals to elevate fundraising and support more education and programming to directly impact members.



## THANK YOU DONORS

This research project was made possible by gifts to the Amplifying Sorority Campaign, through the Foundation for Fraternal Excellence (FFE), to fund sorority-focused, sorority-led research. For more information on the campaign, other research priorities and projects, and how to give, please visit: [foundationfe.org/research](https://foundationfe.org/research)



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