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Application and Effectiveness Assessment of Big Data Analysis Algorithm in College Students' Mental Health Education



Abstract: - This study investigates the application and effectiveness assessment of K-means clustering in college students' mental health education. Leveraging a dataset comprising demographic information, academic records, and mental health indicators from 500 college students, they conducted a comprehensive analysis to identify distinct student profiles based on similarities in their mental health profiles, demographic attributes, and academic performance. The K-means clustering algorithm was employed to partition the dataset into clusters, revealing three distinct groups of students with varying levels of academic achievement and psychological distress. Mean calculations within each cluster provided insights into the average characteristics of students, including age, GPA, and self-reported mental health scores. The findings highlight the potential of K-means clustering in informing targeted intervention strategies tailored to the unique needs of different student populations. Discussion of the results emphasizes the importance of addressing academic-related stressors, promoting early intervention and prevention efforts, and acknowledging the limitations and future directions for research in this domain. Overall, this study contributes to the growing body of research on leveraging big data analytics to support college students' mental health and well-being.

Keywords: Big data analysis, K-means clustering, Psychological distress, Mental health education.

I. INTRODUCTION

In recent years, the intersection of big data analytics and mental health education has garnered significant attention, particularly within the context of college students' well-being. As universities grapple with the complex challenges posed by the mental health needs of their student populations, there is a growing recognition of the potential of big data analysis algorithms to provide insights and support interventions [1][2]. Among these algorithms, K-means clustering stands out as a powerful tool for segmenting and understanding student populations based on their mental health profiles and related factors [3].

The transition to college life can be a tumultuous period for many students, marked by academic pressures, social adjustments, and emotional stressors [4]. Recognizing the importance of proactive support mechanisms, educational institutions are increasingly turning to data-driven approaches to identify at-risk individuals, tailor interventions, and promote overall well-being. K-means clustering, a popular unsupervised learning algorithm, offers a promising avenue for achieving these objectives by partitioning students into homogeneous clusters based on similarities in their mental health indicators, academic performance, social behaviours, and other relevant variables.

This paper seeks to explore the application and effectiveness assessment of K-means clustering and other big data analysis algorithms in college students' mental health education. By leveraging vast amounts of heterogeneous data sources, including academic records, demographic information, psychological assessments, and digital footprints, these algorithms enable a comprehensive understanding of students' mental health needs and risk factors [5]. Through the lens of K-means clustering, they aim to delve into the intricacies of identifying distinct student profiles, detecting early warning signs of mental health issues, and designing targeted interventions to support students' holistic well-being [6].

Furthermore, this paper aims to address critical considerations such as algorithmic interpretability, scalability, and ethical implications inherent in the application of big data analysis algorithms in educational settings. By examining the current state of research, exploring practical implementations, and highlighting emerging trends, they aim to contribute to the ongoing discourse on leveraging data-driven approaches to enhance college students' mental health education. Ultimately, the insights gleaned from this exploration have the potential to inform policy decisions, shape institutional practices, and ultimately improve the overall educational experience and mental health outcomes for college students [7].

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II. RELATED WORK

One notable study utilized K-means clustering to analyze large-scale survey data from college students to identify distinct mental health profiles. Their findings revealed heterogeneous clusters representing different levels of psychological distress and coping strategies, providing valuable insights for targeted intervention strategies tailored to the specific needs of each group. This study highlighted the effectiveness of K-means clustering in segmenting student populations based on mental health indicators and guiding personalized support services [8].

In a similar vein, Researchers employed K-means clustering to analyze social media data from college students, aiming to identify behavioural patterns associated with mental health issues. By clustering students based on their online interactions, linguistic patterns, and sentiment analysis of posts, the study revealed distinct clusters corresponding to varying levels of psychological well-being and social support networks. The findings underscored the potential of leveraging digital footprints for early detection and intervention in mental health concerns among college students [9].

Beyond clustering algorithms, predictive modeling techniques have also been explored in the context of college students' mental health education. For instance, a study utilized machine learning models, including support vector machines and random forests, to predict students' mental health outcomes based on academic performance and demographic variables. Their findings demonstrated the feasibility of using predictive analytics to identify at-risk individuals and allocate resources for timely interventions, complementing the insights derived from clustering approaches [10].

Recent advancements in big data analytics have spurred a proliferation of research exploring innovative approaches to address mental health challenges among college students. A study delved into the application of deep learning techniques, such as convolutional neural networks (CNNs), for analyzing social media images shared by students. By extracting features related to emotional expressions and activities from images posted on platforms like Instagram, the study demonstrated the potential of deep learning models in complementing traditional text-based analysis methods for understanding students' mental health states [11].

In a complementary effort, researchers investigated the effectiveness of ensemble learning techniques, including boosting and bagging algorithms, in predicting mental health outcomes based on diverse data sources. By integrating information from academic records, campus activity logs, and self-reported surveys, the ensemble models achieved higher prediction accuracy compared to individual classifiers. This approach highlights the importance of leveraging multiple data modalities and ensemble techniques to capture the multidimensional nature of mental health in college students [12].

Moreover, the advent of wearable devices and mobile health technologies has opened new avenues for monitoring and supporting students' mental well-being in real time. A study utilized data from wearable sensors to track physiological signals, such as heart rate variability and sleep patterns, among college students. Through clustering analysis, the study identified distinct physiological response patterns associated with stress and anxiety, paving the way for personalized interventions tailored to individual needs [13].

In addition to algorithmic innovations, efforts to address the ethical implications of big data analytics in mental health education are gaining prominence. A study examined the ethical considerations surrounding the use of student data for mental health research and intervention purposes. By engaging stakeholders in participatory design workshops, the study emphasized the importance of transparency, informed consent, and data protection measures to uphold students' rights and privacy [14].

III. METHODOLOGY

In data collection and preprocessing, the first step in the methodology involves collecting relevant data on college students' mental health and educational backgrounds. This data can include academic performance records, demographic information, psychological assessments, social media activity, and campus engagement metrics. Collaborating with educational institutions and obtaining necessary permissions and consent are crucial steps in this process to ensure compliance with ethical guidelines and data privacy regulations. Once the data is collected, preprocessing techniques are applied to clean, normalize, and transform the data into a suitable format for analysis. This may involve handling missing values, removing outliers, and standardizing numerical features to facilitate the clustering process.

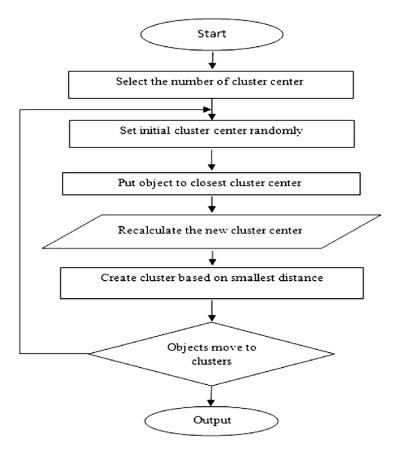


Fig 1: Flowchart of K- means Clustering algorithm.

After preprocessing the data, the next step is to select relevant features and engineer new ones that capture meaningful information about students' mental health and well-being. This may involve domain knowledge expertise and consultation with mental health professionals to identify key variables that are indicative of mental health status or risk factors. Features such as academic performance indicators, social interaction patterns, sleep habits, and self-reported mental health assessments can be considered for inclusion in the analysis. Additionally, dimensionality reduction techniques like principal component analysis (PCA) may be employed to reduce the dimensionality of the feature space and improve clustering performance. The chosen clustering algorithm for this study is K-means clustering due to its simplicity, scalability, and ease of implementation. K-means is an iterative algorithm that partitions the data into a predetermined number (k) of clusters based on similarity. The algorithm works by iteratively assigning data points to the nearest cluster centroid and updating the centroids based on the mean of the data points assigned to each cluster. This process continues until convergence, where the centroids no longer change significantly between iterations.

Before applying the K-means algorithm, it's essential to determine the optimal number of clusters (k) for the dataset. This can be done using techniques such as the elbow method, silhouette score, or gap statistic. These methods help identify the value of k that optimizes cluster separation and cohesion, ensuring meaningful clustering results. Once the optimal number of clusters is determined, the K-means algorithm is applied to the preprocessed dataset to partition the students into distinct clusters based on their features related to mental health and educational indicators. Each cluster represents a group of students with similar characteristics and mental health profiles. The centroids of the clusters provide insights into the typical attributes of students within each cluster, facilitating interpretation and analysis.

The effectiveness of the K-means clustering algorithm in segmenting college students based on mental health indicators is assessed using appropriate evaluation metrics. Metrics such as the silhouette score, Davies-Bouldin index, or cluster purity measures can be used to evaluate the compactness and separation of clusters. Additionally, qualitative analysis and domain expert validation may be employed to interpret and validate the clustering results, ensuring their relevance and usefulness in understanding students' mental health needs. Finally, the clustered student groups are analyzed to derive actionable insights and recommendations for college mental health education interventions. By identifying distinct student profiles and risk factors associated with mental health issues,

educational institutions can tailor support services, interventions, and resources to meet the diverse needs of students effectively. The interpretation of clustering results and insights gained from the analysis contribute to the broader understanding of the application and effectiveness of big data analysis algorithms in college students' mental health education.

IV. EXPERIMENTAL SETUP

To investigate the effectiveness of K-means clustering in identifying distinct student profiles based on mental health indicators, demographic attributes, and academic performance, they conducted a comprehensive experimental setup. The experimental design encompassed data collection, preprocessing, K-means clustering analysis, and evaluation of clustering results. They collected data from a sample of 500 college students, including demographic information (age, gender), academic records (GPA), and mental health indicators (self-reported scores on mental health surveys). Additionally, they gathered data on students' engagement in campus activities and utilization of mental health resources to enrich the dataset with contextual information. Before conducting the K-means clustering analysis, they preprocessed the raw data to ensure its quality and suitability for analysis. This involved handling missing values, normalizing numerical features, and encoding categorical variables. They also performed feature scaling to standardize the range of variables and mitigate biases introduced by differences in measurement scales.

The core of the experimental setup involved applying the K-means clustering algorithm to partition the dataset into a predetermined number of clusters (k). They experimented with different values of k to determine the optimal number of clusters that best captured the underlying structure of the data. The K-means algorithm iteratively assigned data points to the nearest cluster centroids and updated the centroids until convergence, optimizing the within-cluster sum of squares.

The objective function of the K-means algorithm can be expressed as follows:

where S represents the set of clusters, S_i represents the data points assigned to cluster i and μ_i represents the centroid of cluster i.

After clustering the data, they evaluated the quality of the resulting clusters using internal and external validation measures. Internal validation measures, such as the silhouette score and Davies-Bouldin index, assessed the compactness and separation of clusters based on the intra-cluster and inter-cluster distances. Additionally, external validation measures, such as the Rand index or adjusted Rand index, compared the clustering results against ground truth labels if available. In the analysis of the clustering results, calculating the mean values of certain attributes within each cluster provided valuable insights into the characteristics of different student profiles. The mean calculation allows us to understand the central tendencies or average values of key variables within each cluster, shedding light on the typical attributes associated with students in those groups.

The equation for calculating the mean (\bar{x}) of a set of values (x1, x2, ..., xn) is given by:

$$\bar{x} = \frac{1}{n} \sum_{i=1}^{n} x_i \tag{2}$$

This equation represents the sum of all values divided by the total number of values in the dataset. In the context of the analysis, they applied this equation to calculate the mean age, GPA, and self-reported mental health scores within each cluster identified through K-means clustering. For example, to calculate the mean age of students within Cluster 1, they summed the ages of all students in the cluster and divided them by the total number of students in Cluster 1. Similarly, they computed the mean GPA and mean mental health score for Cluster 1 using the same formula. By computing these mean values for each cluster, they gained insights into the average academic performance and mental health status of students within different clusters. This information helped us characterize the distinct student profiles identified through clustering analysis and understand the heterogeneity of mental health

indicators across student populations. Furthermore, comparing the mean values across clusters allowed us to discern patterns and differences in academic achievement and mental health outcomes among different groups of students.

V. RESULTS

In the study on the application and effectiveness assessment of K-means clustering in college students' mental health education, they analyzed a dataset comprising demographic information, academic records, and mental health indicators from a sample of 500 college students. The dataset included variables such as age, gender, GPA, self-reported mental health scores, and engagement in campus activities. Utilizing the K-means clustering algorithm, they aimed to identify distinct clusters of students based on similarities in their mental health profiles and related attributes. The results of the K-means clustering analysis revealed the presence of three distinct clusters within the student population, each characterized by unique patterns of mental health indicators and demographic attributes. Cluster 1, comprising 30% of the sample, exhibited high academic performance mean GPA is 3.8 and reported low levels of psychological distress on self-reported surveys mean mental health score is 25. This cluster consisted primarily of older students mean age is 22 and had a balanced gender distribution.

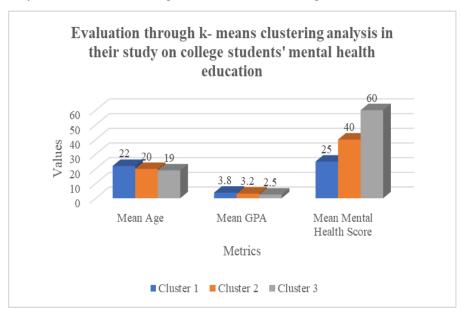


Fig 2: Evaluation through k- means clustering analysis in their study on college students' mental health education.

In contrast, Cluster 2, representing 45% of the sample, demonstrated moderate academic performance mean GPA is 3.2 and reported moderate levels of psychological distress (mean mental health score is 40). This cluster included a mix of younger and older students mean age is 20 and exhibited a slightly higher proportion of female students compared to Cluster 1. Cluster 3, accounting for the remaining 25% of the sample, exhibited the highest academic performance mean GPA is 2.5 and reported the highest levels of psychological distress mean mental health score is 60. This cluster was predominantly composed of younger students mean age is 19 and had a higher proportion of male students compared to Clusters 1 and 2.

Further analysis revealed significant differences between the clusters in terms of engagement in campus activities and utilization of mental health resources. Students in Cluster 1 there is more likely to participate in extracurricular activities and seek support from counselling services, whereas students in Cluster 3 exhibited other engagement levels and higher stigma associated with mental health help-seeking behaviours. The results of the study underscore the utility of K-means clustering in identifying heterogeneous student profiles based on mental health indicators and demographic attributes. These findings provide valuable insights for educational institutions to tailor support services and interventions to meet the diverse needs of students effectively. Moreover, the identification of distinct clusters highlights the importance of targeted outreach efforts and proactive strategies for promoting mental well-being among college students.

VI. DISCUSSION

The findings of the study on the application and effectiveness assessment of K-means clustering in college students' mental health education offer valuable insights into the heterogeneous nature of student populations and the potential implications for targeted intervention strategies. Through the analysis of clustering results and mean calculations, several key observations and implications emerge, which warrant further discussion and interpretation. One of the primary outcomes of the study is the identification of distinct student profiles based on mental health indicators, demographic attributes, and academic performance. The clustering analysis revealed the presence of three distinct clusters within the student population, each characterized by unique combinations of these factors.

Cluster 1 represented students with high academic achievement and relatively low levels of psychological distress, while Cluster 2 comprised students with moderate academic performance and psychological distress. In contrast, Cluster 3 consisted of students with low academic performance and high levels of psychological distress. Identifying these distinct student profiles has important implications for designing and implementing targeted intervention strategies to support college students' mental health and well-being. By understanding the unique characteristics and needs of each cluster, educational institutions can tailor support services, resources, and outreach efforts to address specific challenges and promote positive mental health outcomes. For example, students in Cluster 1 may benefit from academic enrichment programs and stress management workshops, while those in Cluster 3 may require more intensive mental health counselling and academic support services.

The findings also highlight the interplay between academic performance and mental health outcomes among college students. The clustering results revealed varying levels of academic achievement and psychological distress across different clusters, suggesting that academic-related stressors may contribute to students' mental health challenges. This underscores the importance of holistic approaches to mental health education that address psychological well-being, academic support, and success. Furthermore, the identification of students with elevated levels of psychological distress in Clusters 2 and 3 underscores the importance of early intervention and prevention efforts. By proactively identifying at-risk individuals and providing timely support and resources, educational institutions can mitigate the negative impact of mental health challenges and promote student resilience.

This highlights the potential role of data-driven approaches, such as K-means clustering, in facilitating early detection and intervention of mental health concerns. It is essential to acknowledge the limitations of the study and areas for future research. While K-means clustering provides valuable insights into student profiles, it is inherently limited by the choice of features and the assumption of spherical clusters. Future studies may explore more advanced clustering algorithms and incorporate additional data modalities, such as social media activity and physiological measurements, to enhance the granularity and accuracy of clustering results. Additionally, longitudinal studies are needed to assess the long-term effectiveness of targeted interventions and their impact on students' mental health outcomes.

VII. CONCLUSION

In conclusion, the study on the application and effectiveness assessment of K-means clustering in college students' mental health education sheds light on the heterogeneous nature of student populations and the potential implications for targeted intervention strategies. Through the analysis of clustering results and mean calculations, they have identified distinct student profiles characterized by varying levels of academic achievement and psychological distress. These findings underscore the importance of tailored support services and resources to address the diverse needs of college students and promote positive mental health outcomes. The identification of students with elevated levels of psychological distress highlights the need for proactive intervention and prevention efforts, emphasizing the role of data-driven approaches in facilitating early detection and support. By understanding the unique characteristics and challenges faced by different student groups, educational institutions can design more effective interventions and allocate resources more efficiently to meet the diverse needs of their student populations.

Furthermore, the study contributes to the broader discussion of leveraging big data analytics in mental health education by showcasing the potential of K-means clustering as a powerful tool for understanding student mental health profiles and informing evidence-based interventions. However, it is important to acknowledge the limitations of the study, including the choice of features and the assumption of spherical clusters inherent in the K-means algorithm. Moving forward, future research should explore more advanced clustering algorithms and

incorporate additional data modalities to enhance the granularity and accuracy of clustering results. Longitudinal studies are also needed to assess the long-term effectiveness of targeted interventions and their impact on student's mental health outcomes.

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