Promoting College Student Mental Health: Promising Approaches and Programs

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Consensus on mental health during the college years...

- peak onset years (incidence) for most mental health disorders mood, anxiety, and substance use disorders, 1st episode psychosis
- high rates (prevalence) of most mental health disorders
- 1/3 of college students, each year, experience a mental health disorder
- most college students, each year, report feeling "overwhelmed,"
 "exhausted," "very lonely," "very sad," "anxious," and/or "hopeless"
- mental health disorders in college are likely to go untreated
- mental health disorders in college often are long lasting and/or recurrent

How can we best address mental health problems among college students?

- Early identification through screening
- Accessible CBT intervention
- Increase mental health literacy
- More accessible systems of care
- Train gatekeepers
- Assertive mobile detection strategies for hard-to-reach cases

Overarching goals: reduce stigma, increase awareness, increase help-seeking and treatment acceptability, promote mental health

The Washington Post Democracy Dies in Darkness

Grade Point

To prevent suicide in college, make mental health screening mandatory By Marney A. White December 21, 2015

Marney A. White is an associate professor of psychiatry and chronic disease epidemiology at Yale University, on the faculty of the School of Medicine and the School of Public Health. She also served from September 2011 to June 2015 as associate director of the Yale Center for Anxiety and Mood Disorders, a position that put her in frequent contact with students.

- early identification through early and routine mental health screening
 - CollegeResponse®, Screening for Mental Health (a national non-profit that provides screenings and educational resources for mental health disorders)— https://www.mentalhealthscreening.org/programs/college
- easily accessible <u>internet-based CBT interventions</u> for a broad range of psychiatric disorders
 - shown to be effective for both prevention and treatment
 - are inexpensive and avoid delays or waitlists
 - address barriers to treatment, notably stigma and inconvenience

EXAMPLE: FIU Counseling and Psychological Services



The TAO therapy is an online platform of tools and educational materials to help you to learn about and change how you think and feel. Along with the educational materials in the platform, every week you will be completing a short mood survey and meeting online with your therapist in a brief video conference.

Increase mental health literacy

ability to recognize and understand characteristics of mental disorders, including risks, causes, and when and how to obtain resources and services

allows for accurate evaluation of and communication about mental health foundation for...

- increased awareness about mental and emotional health
- promoting, maintaining, and improving well-being.
- college students often (a) struggle to define mental and emotional health, (b) believe is less important than other interests and pursuits, (c) rely indiscriminately on information from a variety of sources, & (d) use extremes to talk about mental illness versus wellness (Vasquez, 2016)
- male college students, Asian college students, and STEM students particularly struggle with mental health literacy and report lower mental health help-seeking comfort and intention (Rafal, Gatto, & DeBate, 2018)

More accessible systems of care

- Insurance (or healthcare fee) coverage
- Telehealth
 - Online screening
 - Online triaging
 - Online intervention (for low severity)
- Multiple access points, and available days and times
 - In-person contact
 - Online contact

Train key gatekeepers

residence life staff, health center staff, academic advisors, career counselors, faculty, campus police, and student leaders such as sorority/fraternity counsel members or club presidents

about mental disorders and treatment

- symptoms of mental disorders range from subclinical through severe
- range of available resources

EXAMPLE: GKT program, Mental Health First Aid (Lipson et al., 2014)

Assertive mobile detection strategies for hard-to-reach cases

- smartphones
 - mental health apps
 - location, calling and texting records, & app usage
 - passively analyzing mobile data
- activity bracelets
- smart watches
- wearable sensors
- social media data from various sources

must account for the uniqueness of this transitional age

- developmental tasks such as expanding education, searching for career options, and engaging in romantic relationships
- tasks can create instability due to change in or decrease in structure, frequent moves, and change of intimate partners and supports
- limited lifetime experience with mental illness (substance use problems, etc.)

college mental health services, to be successful, require

- genuine integration of multidisciplinary and age appropriate care
- strong, stigma-free and effective systems of care for younger adults
- novel youth mental health model
 - overlapping with but discrete in culture and expertise from systems for children and systems for older adults
- attention to subthreshold cases in order to reduce the incidence of threshold cases

The Comprehensive Counseling Center Model (Brunner et al., 2014)

- uniquely suited to manage and alleviate students' psychological distress
- mission driven campus-wide initiatives to prevent psychological problems
- integrated clinical, consultative, outreach, and education and training functions across campus
- positive psychology emphasis
 - building resilience, adaptive coping skills, and grit
 - improving human life and enabling individuals to be more effective and contented
- psychological and emotional well-being for students and the entire university community

Comprehensive Counseling Center Four Pillars

- 1. <u>Clinical services</u>—direct individual and group counseling and therapy, crisis intervention and, in some cases, psychiatric services. Career counseling and psychological assessment may also be offered.
- 2. <u>Consultation and collaborative services</u>—with students, parents, staff, and faculty, including departmental liaison relationships and consultations, service on crisis management committees, and collaboration within the context of inclusion and diversity
- 3. Outreach and prevention programming—such things as skill building workshops, prevention programming, psychological and emotional well-being screenings, peer coaching, and campus community development
- 4. <u>Training and education</u>—practicum and internship sites for masters and doctoral level mental health professionals, postmasters or postdoctoral supervised professional experience, and teaching, staff development and continuing education

Behavioral Health Continuum of Care Model

https://www.samhsa.gov/prevention

- <u>Promotion</u>—environments and conditions supporting behavioral health and the ability of college students to withstand challenges; reinforces the entire continuum of behavioral health services.
- <u>Prevention</u>—interventions intended to prevent or reduce the risk of developing a behavioral health problem
- <u>Treatment</u>—services for people diagnosed with a behavioral health disorder
- <u>Recovery</u>—services supporting individuals' abilities to live productive lives in the community after experiencing a behavioral health disorder



EXAMPLE: British Columbia's Healthy Minds | Healthy Campuses Initiative











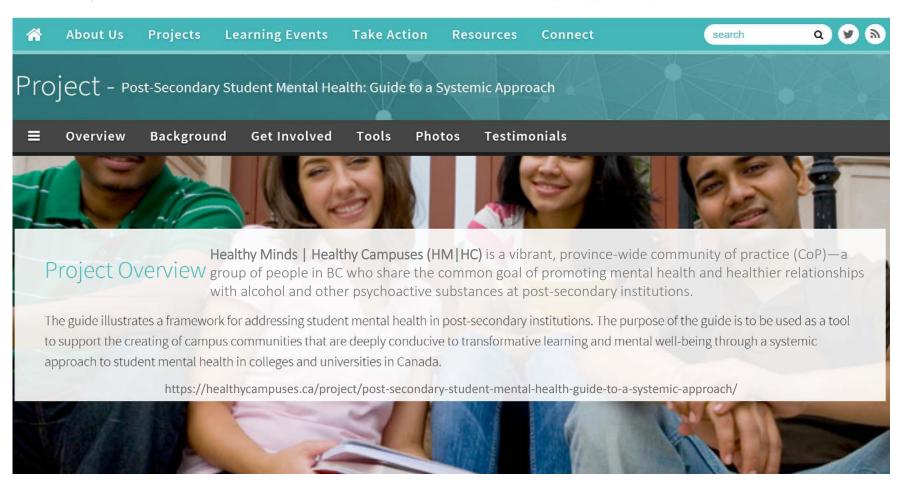
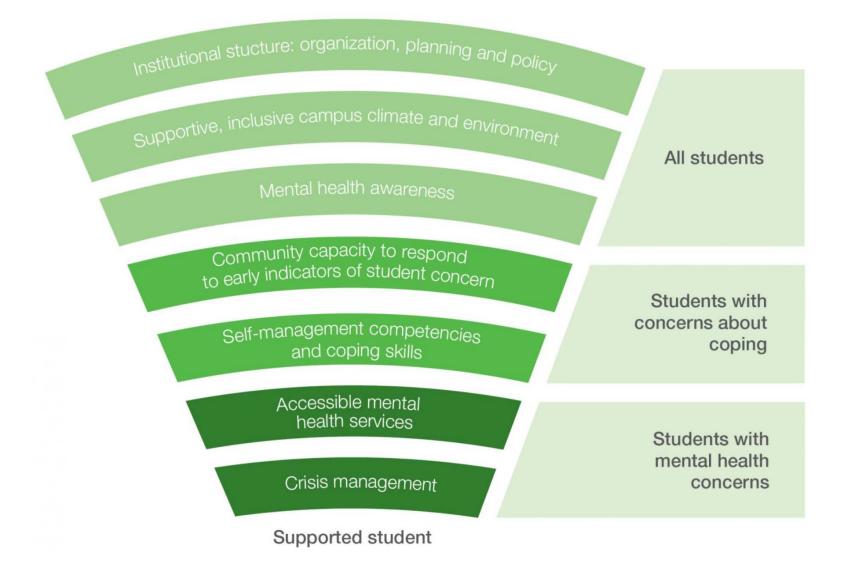


Figure 2: Framework for Post-Secondary Student Mental Health



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