Our Student Body: Mental Health Needs & Supports

Objectives
- Identify
  - Observed mental health needs
  - High profile incidents
- Discuss
  - National data on counseling center use
  - NCAT data on counseling center use
- Review
  - Response strategies
  - Available support mechanisms

Participant Goals/Motivations
- What brings you here?

What is mental health?
WHO, 2014

"Mental health is an integral and essential component of health. ... mental health is more than just the absence of mental disorders or disabilities.

Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community."

"A depressive episode made it impossible for me to go to classes and I did not get help until it was too late and I was withdrawn and I could never afford the cost to go back because I lost my scholarship for being withdrawn."

Warning Signs in Murder of Yeardley Love: 'Nobody Put It All Together - Good Morning America, 5/7/2010
National and Campus Data

National Trends
Gallagher, 2012; Gates, 2011; Weiss, 2010

- National utilization: 10-13% of student body
- 88% of counseling directors report increased acuity
  - Crises
  - Psychiatric medication management
  - Learning disabilities
  - Drugs
  - Self-injury
  - Sexual assault
  - Problems related to prior sexual abuse

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- Increased attention to interpersonal violence
  - Sexual assault, Domestic violence, Stalking
- Increased attention to learning and neurodevelopmental disorders
  - Attention Deficit/Hyperactivity Disorder
  - Autistic Spectrum Disorder
- Concerns consistent with developmental age
  - Bipolar Disorder – late teens
  - Schizophrenia – early twenties
  - Identity development – late teens & early twenties

NCAT Trends

- Utilization ranges 10-12%, consistent with national trend
- Demographics consistent with university population
  - Sophomores slightly underrepresented
- Average number of sessions attended: 4

NCAT Trends

- Stress, distress and more stress
  - Non-suicidal self-injurious behavior (cutting)
  - Grief reactions
  - Alcohol & drug use (marijuana)
- Depression & Bipolar Disorder
- Chronic and Intense Anxiety Disorders
- Personality Disorders
- Eating Disorders
- Unresolved trauma
  - Physical and/or sexual abuse as a child
  - Other interpersonal violence
Why Is This Happening?

- Increased recognition of mental health needs
- Characteristics of the Millennium Generation
  - Helicopter parenting
  - High expectations – emphasis on achievement
  - Minimal coping skills – unrefined resilience skills
- Less Family Stability
- Over Stimulating and Competitive World

Response Strategies

Depression in Class
- Based on the video, how might a student with depression present in your classroom?

Schizophrenia in Class
- Based on the video, how might a student with schizophrenia present in your classroom?
Bipolar in class
- Based on the video, how might a student with bipolar present in your classroom?
- Presentation depends on whether person is actively experiencing depression or mania

Anxiety in class
- Social anxiety is one kind of anxiety
- How have you seen anxiety manifest in your class?

Response Strategies

Set the Stage
- Students are more likely to reach out to someone they believe is warm and trustworthy
- Be mindful of your attitude
- Choose an appropriate time and place
- Approach the situation knowing your boundaries
  - i.e., “At what point do I refer?” or “At what point do I need to inform my colleagues?”
How to Help

- Listen
- Accept
- Empathize
- Offer Hope
- Encourage
- Offer Options/Referrals
- Be available and Follow-up

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Additional training

- On-line, self-paced training available for free
- Features scenarios and possible responses with instant feedback
  - Akin to Choose Your Adventure Books

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Available Support Resources

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Counseling - Faculty/Staff Services

- Student letters of support
  - Can provide confirmation of student participation in counseling
  - Permission from student prior to verification
  - Verification provided via e-mail
  - Sometimes asked by family members to notify faculty of an extenuating circumstance
  - Correspondence is intentionally vague
  - Once they enter your files, documentation becomes academic information rather than strictly health information

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Counseling - Faculty/Staff Services

- Consultation prior to meeting student
  - COD to discuss concerns and approach strategies
  - Can be done anonymously – you need not share your name or the student’s name
  - If name is shared, confidentiality will be respected, except in cases of harm to self/others or abuse

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Psychiatric services

- Sebastian Health Center contracts with a part-time psychiatrist
- Readily accessible to students in university health insurance
- Students on another policy will have to follow-up with panel providers
- Students may or may not disclose use of medications
  - Antidepressants, anxiolytics, and stimulants most common

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Closing Reminders

- Know your boundaries
  - Personal
  - Professional
- When in doubt, consult
  - Within your department/school
  - Counseling Services
- Collaboration makes us stronger

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Questions?
Thank You!

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