College Student Mental Health

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University Health Partners Counseling & Psychological Services
Today’s Topics

• Introductions
• Overview of national and state mental health
• College mental health – legal issues and trends
• MSU CPS trends
• Depression and Anxiety
• How to help students
College Mental Health - National
College Students Nationally

90% lack of sleep impacted functioning

60% overwhelming anxiety

39% significant depression

10% seriously considered suicide

*National College Health Assessment - 2017*
College Mental Health National Trends

• Majority of students seeking treatment do not take psychotropic medications
• Students increasingly likely to report past traumatic experiences
• Students reporting usage of marijuana is increasing
• Anxiety and Depression continue to be top two presenting concerns at UCCs
College Mental Health - Law

- Confidentiality exceptions
- Recent legal cases
- Student autonomy
- College is protective – suicide rate among college students is at least $\frac{1}{2}$ of the general population
Distinct Student Populations

- Experiences of oppression, discrimination, and marginalization impact mental health
- Recognizing the additional barriers to access
- Mindful of intersecting identities
- In MT, impact of higher suicide rates for American Indian population as well as intergenerational trauma
National Counseling Center Utilization

- Over past 5 years, university counseling center (UCC) utilization increased by 30%-40% while enrollment increased by 5%
- UCCs increased “rapid access” appointments by 28% on average over past 6 years
- Treatment provided at UCCs is effective and achieves symptom reduction at same level as randomized controlled trials

*Center for Collegiate Mental Health 2017*
Suicide Facts & Figures: Montana 2018*

On average, one person dies by suicide every 33 hours in the state.

More than six times as many people die by suicide in Montana annually than by homicide.

The total deaths to suicide reflect a total of 6,232 years of potential life lost (YPLL) before age 65.

Suicide cost Montana a total of $253,380,000 of combined lifetime medical and work loss cost in 2010, or an average of $1,116,213 per suicide death.

8th leading cause of death in Montana

- 2nd leading cause of death for ages 15-44
- 5th leading cause of death for ages 45-54
- 7th leading cause of death for ages 55-64
- 18th leading cause of death for ages 65 & older

Suicide Death Rates

<table>
<thead>
<tr>
<th></th>
<th>Number of Deaths by Suicide</th>
<th>Rate per 100,000 Population</th>
<th>State Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Montana</td>
<td>267</td>
<td>26.01</td>
<td>1</td>
</tr>
<tr>
<td>Nationally</td>
<td>44,695</td>
<td>13.42</td>
<td></td>
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</tbody>
</table>

*Based on most recent 2016 data from CDC. Learn more at afsp.org/statistics.
College Mental Health - State

- Suicide 2\textsuperscript{nd} leading cause of death for those 15-44 in MT
- OCHE Suicide Prevention and Student Mental Health Task Force
  - Common Training
  - Universal Screening
  - Focus on reducing access to lethal means
College Mental Health and Academics

• Of students who withdrew from university, 64% did so due to mental illness (NAMI 2012)
• For every 100 students treated, 6 dropouts are averted (Eisenberg, 2015)
• MSU Healthy Minds Data:
  – 78% reported their emotional/mental health issues hurt their academic performance
  – 69% would talk to faculty/TA/advisor for personal issues impacting their academics
• CPS Clients:
  – 73% reported their mental health concerns were impacting academics
  – In AY 17-18, 96% of CPS clients stayed in school
COUNSELING & PSYCHOLOGICAL SERVICES
Counseling and Psychological Services

- Swingle Hall – Above Medical Services
- 18 Licensed Staff
- 9 interns and residents
- Open two evenings/week
- 24 hour on-call
- Accreditations
Comprehensive Counseling Center

- Outreach and Prevention
- Consultation
- Training
- Direct Clinical Services
A Day in the Life of CPS....

Clinical:
- 73 Direct Appointments
- 13 Provided by Trainees
- 7 required intervention for suicidality
- 1 hospitalization

Outreach & Prevention:
- 103 people received outreach from CPS
  - Gender to Bozeman Schools
  - Class for trauma incident
  - Department for suicide prevention training

Consultation & Collaboration:
- Dean of Students
- Medical Services
- Parents
- Faculty
- Students
University Health Partners

• Services were integrated in July 2017
• Clinical Teams Model
• 15% screened positive for mental health issues in primary care setting
• Addition of APRN and Behavioral Health Specialist
Academic Year 17-18

• Served 1700 students in counseling
• Over 270 consultations with concerned parties
• Provided outreach/education to 1075 faculty, instructors, or TAs
• Most Common Presenting Concerns:
  - Anxiety
  - Depression*
  - Stress
  - Family
  - Academic Performance
## CPS Client Demographics

### Place of Residence

<table>
<thead>
<tr>
<th></th>
<th>n</th>
<th>Percent</th>
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<tbody>
<tr>
<td>Off Campus</td>
<td>895</td>
<td>55.1</td>
</tr>
<tr>
<td>Residence Hall</td>
<td>511</td>
<td>31.4</td>
</tr>
<tr>
<td>Family &amp; Graduate Housing</td>
<td>103</td>
<td>6.3</td>
</tr>
<tr>
<td>Fraternity/Sorority</td>
<td>31</td>
<td>1.9</td>
</tr>
<tr>
<td>&lt;No Response&gt;</td>
<td>90</td>
<td>5.5</td>
</tr>
</tbody>
</table>

### Race/Ethnicity

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>n</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American/Black</td>
<td>12</td>
<td>0.7</td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td>36</td>
<td>2.2</td>
</tr>
<tr>
<td>Asian American/Asian</td>
<td>43</td>
<td>2.6</td>
</tr>
<tr>
<td>Hispanic/Latino/a</td>
<td>52</td>
<td>3.2</td>
</tr>
<tr>
<td>Native Hawaiian or Pacific Islander</td>
<td>5</td>
<td>0.3</td>
</tr>
<tr>
<td>Multi-racial</td>
<td>55</td>
<td>3.4</td>
</tr>
<tr>
<td>White</td>
<td>1398</td>
<td>86.0</td>
</tr>
<tr>
<td>Self-identify</td>
<td>24</td>
<td>1.5</td>
</tr>
</tbody>
</table>

### Gender Identity

<table>
<thead>
<tr>
<th>Gender Identity</th>
<th>n</th>
<th>Percent</th>
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<tbody>
<tr>
<td>Woman</td>
<td>933</td>
<td>57.4</td>
</tr>
<tr>
<td>Man</td>
<td>665</td>
<td>40.9</td>
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<tr>
<td>Transgender</td>
<td>8</td>
<td>0.5</td>
</tr>
<tr>
<td>Self-Identity</td>
<td>19</td>
<td>1.2</td>
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</table>

### Sexual Orientation

<table>
<thead>
<tr>
<th>Sexual Orientation</th>
<th>n</th>
<th>Percent</th>
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</thead>
<tbody>
<tr>
<td>Heterosexual/Straight</td>
<td>1357</td>
<td>83.5</td>
</tr>
<tr>
<td>Bisexual</td>
<td>158</td>
<td>9.7</td>
</tr>
<tr>
<td>Questioning</td>
<td>40</td>
<td>2.5</td>
</tr>
<tr>
<td>Self-identify</td>
<td>33</td>
<td>2.0</td>
</tr>
<tr>
<td>Gay</td>
<td>24</td>
<td>1.5</td>
</tr>
<tr>
<td>Lesbian</td>
<td>15</td>
<td>0.9</td>
</tr>
</tbody>
</table>
## CPS Client Demographics

### Year in School

<table>
<thead>
<tr>
<th></th>
<th>n</th>
<th>Percent</th>
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</thead>
<tbody>
<tr>
<td>Freshman</td>
<td>417</td>
<td>25.7</td>
</tr>
<tr>
<td>Sophomore</td>
<td>406</td>
<td>25.0</td>
</tr>
<tr>
<td>Junior</td>
<td>333</td>
<td>20.5</td>
</tr>
<tr>
<td>Senior</td>
<td>282</td>
<td>17.4</td>
</tr>
<tr>
<td>Graduate</td>
<td>126</td>
<td>7.8</td>
</tr>
<tr>
<td>Post - Baccalaureate</td>
<td>37</td>
<td>2.3</td>
</tr>
<tr>
<td>Not A Student</td>
<td>14</td>
<td>0.9</td>
</tr>
<tr>
<td>WWAMI</td>
<td>10</td>
<td>0.6</td>
</tr>
</tbody>
</table>

### College Athletics

<table>
<thead>
<tr>
<th></th>
<th>n</th>
<th>Percent</th>
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<tbody>
<tr>
<td>Intramural</td>
<td>92</td>
<td>5.7</td>
</tr>
<tr>
<td>Club</td>
<td>177</td>
<td>10.9</td>
</tr>
<tr>
<td>Varsity</td>
<td>56</td>
<td>3.4</td>
</tr>
</tbody>
</table>

### Veterans

<table>
<thead>
<tr>
<th></th>
<th>n</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>1581</td>
<td>97.3</td>
</tr>
<tr>
<td>Yes</td>
<td>45</td>
<td>2.8</td>
</tr>
</tbody>
</table>
CPS Clients by College

- Letters & Science: 31%
- Engineering: 22%
- Education/HHD: 10%
- Arts/Architecture: 9%
- Agriculture: 8%
- Business: 7%
- Nursing: 4%
- University Studies: 4%
- <No Response>: 4%
- Gallatin College: 1%
% of Academic College Population Utilizing CPS

- Engineering: 12.7%
- Education/HHD: 9.3%
- Letters & Science: 9.5%
- Agriculture: 13.6%
- Arts/Architecture: 10.2%
- Business: 7.9%
- Nursing: 6.6%
- University Studies: 7.1%
- Gallatin College: 3.8%
- No Response/Other: 35.9%

% of Population that utilizes CPS
- MSU Population

Montana State University
CPS Total Clients by Academic Year

- 2013-14*: 1253
- 2014-15*: 1243
- 2015-16*: 1299
- 2016-17*: 1593
- 2017-18*: 1701
CPS Crisis Appointments by Year

- 2013-14*: 234
- 2014-15*: 278
- 2015-16*: 315
- 2016-17*: 398
- 2017-18*: 523
Client Threats to Self and Others

- Suicide attempts 10
- Referred for hospitalization 23
- Hospital admissions 15
- Safety planning for threat to self 403
- Safety planning for threat to others 8
Evaluation Data

- 98% - satisfied with their counseling experience
- 95% - felt counseling helped resolve their concerns
- 84% - counseling helped them stay in school
- 99% - would refer a friend to CPS
- 100% - important for MSU to offer these services
Outcome Data

Change for Clients with Moderate and/or Elevated Distress

- Depression: 74.8%
- Generalized Anxiety: 90.2%
- Social Anxiety: 86.9%
- Academic Distress: 71.5%
- Eating Concerns: 81.4%
- Hostility: 96.1%
- Alcohol Use: 90.5%
- Distress Index: 89.1%
MSU’s Response to Increased Demand

• Funding for increased staff at CPS
• Campus Safety Welfare Program in DOS
  – BIT and CARE teams

• Prevention Efforts
  – Mental Health First Aid
  – QPR
  – Kognito
CPS Response to Increased Demand

- Integration with Student Health
- Staffing
- Model Changes
- Satellite Offices
CPS and Diversity

• Commitment to Diversity and Inclusion
• Staff Training
• Specialized services
  – AI/AN Student Success Collaboration
  – Veterans Services
  – Men’s Services
  – SAFE Zone collaboration
  – Liaison relationships
Million Dollar Question...Why the Increased Demand?

- Prevention has paid off!
- Decreased stigma
- Access to services
- Increased understanding of trauma effects
- Cultural shifts
DEPRESSION AND ANXIETY
Depression

**PHYSICAL:**
- Fatigue
- Lack of energy
- Too much or too little sleep
- Increased or decreased appetite
- Weight loss or gain
- Constipation
- Headaches
- Irregular menstrual cycle
- Loss of sexual desire
- Unexplained aches or pains

**BEHAVIORAL:**
- Crying
- Social withdrawal
- Neglect of responsibilities
- Loss of interest in personal appearance
- Loss of motivation
- Slowed movements
- Use of drugs and/or alcohol
Depression

PSYCHOLOGICAL:
- Sadness
- Anxiety
- Guilt
- Anger
- Mood swings
- Lack of emotional responsiveness
- Feelings of helplessness
- Hopelessness
- Irritability
- Frequent self-criticism

- Self-blame
- Pessimism
- Impaired memory and concentration
- Indecisiveness and confusion
- Tendency to believe others see one in a negative light
- Thoughts of death or suicide
Anxiety

PHYSICAL:
• Cardiovascular (pounding heart, chest pain, rapid heartbeat, blushing)
• Respiratory (fast breathing, shortness of breath)
• Neurological (dizzy, headache, sweating, numbness)
• Gastrointestinal (choking, dry mouth, stomach pain, nausea, vomiting, diarrhea)
• Musculoskeletal (muscle aches and pains, restlessness, tremors, inability to relax)
• Sleep problems
• Fatigue

BEHAVIORAL:
• Avoidance of situations
• Obsessions or compulsions
• Distress in social settings
• Phobic behavior

PSYCHOLOGICAL
• Unrealistic fear or worry
• Mind racing or going blank
• Decreased concentration/memory
• Indecision
• Irritability
• Impatience/anger
• Confusion
• Feeling on edge
Video Discussion

• What warning signs and symptoms did you notice?
• How might their symptoms have been misperceived by those around them?
• How might a faculty member or administrator intervene with each of them?
Supporting Students as Faculty and Administrators

• MH Toolkit Review
• Modeling
• Discussions with faculty and TA’s
Key Takeaways

• Recognize depression and anxiety as clinical issues
• Use resources – including CPS
• Making referrals
• Distribute the CPS handout
• Review MSU MH protocol
Crisis Resources

Bozeman Help Center
406-586-3333

Crisis Text Line
Text “MT” to 741741

National Lifeline
1-800-273-8255

Veteran Resources

Veterans Crisis Line
1-800-273-8255 PRESS 1

Veterans Crisis Line
Text to 838255
Resources

• MUS Suicide Prevention and Student Mental Health Task Force Report 2016


• American Foundation for Suicide Prevention – www.afsp.org