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Summary and Minutes

2015 College Mental Health Research Symposium
University of Michigan, Ann Arbor, Michigan

www.healthymindsnetwork.org | healthyminds@umich.edu
Summary:

The fifth annual College Mental Health Research Symposium was held on March 10 and 11, 2015 at the University of Michigan Institute for Social Research in Ann Arbor, Michigan.

The symposium brought together approximately 55 researchers, clinicians, campus practitioners, health IT professionals, advocates, media representatives, and undergraduate and graduate students to discuss ongoing projects and future trends/challenges in campus mental health. The diverse backgrounds of attendees allowed for the sharing of different perspectives on existing research, and an informal environment to brainstorm new ideas and approaches.

The Symposium was designed to address several key questions, including:

- What are some of the most significant gaps in knowledge?
- What are some of the most important research opportunities in the coming years?
- What else can we do to help share data and research to practitioners in a useful way?
- What are opportunities for collaboration?

The Symposium agenda was comprised of three full group sessions and eight small group concurrent sessions. The full-group sessions focused on: e-Health Interventions; Funding and Advocacy; and Collaborations and Next Steps for the Field. Interspersed with these were concurrent sessions facilitated by attendees with an interest or experience in the topics:

- Jed and Clinton Health Matters Campus Program and Active Minds, Inc.
- Student-Athlete Mental Health
- Sexual Assault on College Campuses
- Campus Partnerships with Health IT Companies
- Involving Students in Research, Program Development, Advocacy, and Outreach
- Gatekeeper-Training Programs
- Panel Discussion on Developing a Research Career in Campus Mental Health (for junior scholars)
- ‘Healthy Minds of the Future’

This document includes the following information: 2015 College Mental Health Research Symposium agenda; notes from each of the sessions; attendee bios and contact information; and a list of additional resources and references mentioned during the Symposium. Photos from the Symposium are also included.
**DAY 1  Tuesday, March 10**

**Welcome and Overview** (1430)  
Brief welcome by HMN team, and remarks by James Jackson, Director, Institute for Social Research

**Concurrent Sessions #1**  
2. Student-Athlete Mental Health, facilitators: Will Heininger & Stephanie Salazar (1460)  
3. Sexual Assault on College Campuses, facilitator: Holly Rider-Milkovich (1450)

**Break**  
2:30-2:45pm

**Full Session #1—e-Health Interventions** (1430)  
Programs represented in discussion: Kognito, 7cupsoftea, eBridge, AFSP, TAO (see handout)

**Break**  
4:00-4:15pm

**Concurrent Sessions #2**  
1. Campus Partnerships with Health IT Companies, facilitator: Sherry Benton (1430)  
2. Involving Students in Research, Program Development, Advocacy, and Outreach, facilitators: Allison Smith, Blake Wagner III, & Sonia Doshi (1450)

**Reception and Dinner** (Atrium)  
5:15-8:00pm

**DAY 2  Wednesday, March 11**

**Breakfast and Day 2 Overview** (1430)  
8:00-8:30am

**Full Session #2—Funding and Advocacy** (1430)  
8:30-9:30am

**Break**  
9:30-9:45am

**Concurrent Sessions #3**  
1. Gatekeeper-Training Programs, facilitator: Marian Trattner (1430)  
2. Panel Discussion on Developing a Research Career in Campus Mental Health (for junior scholars), facilitators: Cheryl King & Paola Pedrelli (1460)  
3. ‘Healthy Minds of the Future’, facilitators: Daniel Eisenberg and Sarah Ketchen Lipson (1440)

**Full Session #3—Collaborations and Next Steps for the Field** (1430)  
10:30-11:30am

**Wrap-Up** (1430)  
11:30am-12:00pm
Concurrent Sessions #1: Jed and Clinton Health Matters Campus Program and Active Minds, Inc.
Facilitators: Nance Roy, Vic Schwartz, Alison Malmon, & Sara Abelson

Discussion Topics:

- Effectiveness and purposes of programs (Jed/Active Minds)
- Sustainability of programs

Take-Aways/Conclusions:

- Programs like these provide free years of consultation, hoping that schools find it helpful
- Program has been helpful on Pomona’s campus
  - Students are saying that stress, sleep, alcohol, etc. are impacting ability to finish school
- Advantage to internal consulting, as well as external consulting
  - Need teams from schools to work collectively on this
- Just getting people to decide this is an issue [mental health] is very hard – it would be helpful to get media push and awareness of mental health on campuses

Action Items/Questions:

- What’s in it for colleges?
  - Jed Clinton Foundation helps with filling the gaps of consultation
- Who do you reach out to (JF)?
  - Jed Foundation is well known among counseling centers – it’s also a matter of connecting to those we are already connected with
  - It’s about engaging folks and showing them why it’s important to take part in our program
- How close to the original document is the new survey, and how could I persuade people to use the new survey and what are the advantages to that?
  - It’s more comprehensive: technical assistance happening over the 4 years
  - Now, we are with you for 4 years to evaluate, reassess, and provide resources, so it’s much more robust
  - Students frustrated that it takes forever to be seen by counselor – so it’s good to use survey as a starting point
- How many schools using this program?
  - Currently 80 working on the project
- The level of support you are all providing is quite remarkable. Have you given thought about how you are going to take those key learnings and apply them on a larger scale?
  - We try to look at what’s going to work for school A vs. school B. We find ways to introduce policy development for the schools, and how we can make things sustainable for them.
- Do you have any specific examples of what’s happened with consultation that’s been helpful?
  - Promoting what’s working well on campus. Also, a lot of time is spent around policy development. Most schools are taking a close look at their leave policies, AOD policies, and how are schools providing the best services. Most schools that we (Jed) leave say thank you so much!
Concurrent Sessions #1: Student-Athlete Mental Health
Facilitators: Will Heininger & Stephanie Salazar

Discussion Topics:

- Athlete population is hard to tap into
  - Student-Athletes hide issues from Athletic Department and staff
  - How do we get coaches involved?
  - Issue of kicking players off team who come forward
- Mental health is a resource to student-athletes
- Connection between campus distress (sexual assault, binge drinking)
  - Administrators focus on negative aspects – what about their wellness?
- Doing program development for students who are on medical leave for psychological issues
  - Schools have passive-aggressive policies to prevent them from returning to school
- Model: Services – research – training
- Concerns:
  - Where do Athletic Trainers fit in with this issue?
  - When a student-athlete comes to them what do they do?
  - How do we serve the student-athlete population?
  - How do we provide relatively anonymous, accessible system that doesn’t create a logjam?
  - Tailored treatment through web technology (e.g., mystrength)
- Need to change the language – wellness vs. weakness/pathology
  - Digital interventions
- Collaboration is key – collective messaging over time and persistence
- Might be important to provide virtual environments, and use evidence-based communication studies
- Make it known that this is normal – what are intrinsic motivators?
  - Positive, strength-based model
- Needs to be a change in culture
  - Made progress in last 10 years
  - Combat stigma
  - Time is an issue, especially among student-athletes – how do we provide efficient care?
Discussion Topics:

- Victimization prior to campus arrival
- Under-represented minorities and sexual assault on campus
- Exploitation of victims – co-opting voice/messages
- Peer advocates
- Hunting Ground – UM involved
  - Feature-length documentary related to sexual assault - @ UNC
  - Travel across country documenting sexual assault cases
- Healthy Minds Study of the Future – survey modules with one related to sexual assault
  - White House survey is based on UNH survey instruments
  - Challenges identifying behaviors men may have experienced
  - Problems related to engrained gender binary and anatomies
  - Problems with relationship between self and alcohol/substance consumption that relates to opening own sexual inhibitions and own guilt
- Male understanding of women’s fears and thought processes
- Problems of re-victimization at Harvard on down
  - When do schools cause the re-victimization inadvertently while trying to help (need training) vs. when do schools have different objectives (need overhaul)
  - System responses causing trauma
  - Vis-à-vis affirmative consent
- Social norming campaigns for campus sexual assault prevention
  - UM social norming of sexuality and sexual activity to reduce dependence on alcohol
- UT-Austin – VAV – Counseling Center & Health Services available for victims, and now concerned about how to comply with mandatory reporting, how to react vis-à-vis Title IX
- Compare to suicidality which sessions now focus on reducing liability NOT therapy
  - SAMHSA-type funding for sexual-assault prevention
- Office of Violence Against Women – clinical program / <5% program evaluation / not for research
- UM has quasi-experimental research on campus sexual assault and program evaluation
- Abbey @ Wayne State looking at “Intent to Perpetrate” after alcohol consumption
  - More likely to commit immoral behaviors after alcohol consumption
- How to include questions about risk of perpetration in surveys such as HMS
  - UT-Austin has experiences with lack of social skills and student behaviors
    - Increasingly seen stalking behaviors
- University of Toronto has committee on sexual assault and preventions w/subcommittees

Action Items/Questions:

- Asking legislators to apply research / opportunities for research in new federal activity
- Role for campuses to have in order to identify potential assaulters – predictive analytics?
- Campus health centers need stronger HIPAA to overcome FERPA
  - University of Oregon issue of female student victimized by male athletes and then school didn’t respond “appropriately” thereby re-traumatizing student. Her campus health records were then released
Discussion Topics:

- Electronic intervention programs
- What can we think about next? How are these programs related?
- How can we establish commonalities between these programs, and how can this be used as a strength?
- How are students responding to these interventions?

Take-Aways/Conclusions:

- Good to create collaborations – more we can bring these together the better
  - Question is how can we use something with the same measure? We are all trying to use these programs that aim to measure the same thing in different ways.
  - If we can pool data collectively, and come up with a common “language” that would be beneficial.
  - It’s a problem that everyone has their “own scales” because it’s hard to demonstrate to donors/insurance companies that we are accomplishing something.
- Center for Collegiate Mental Health is a good example of a collective effort
- Keep in mind that we can still measure effect size regardless of scale used – that’s how we conduct meta-analyses
- The world of technology is constantly changing – we have invested a team of technical experts that are open to many things. Using student feedback has been really important.
- There is a problem with our standard of service. What were problems that lead to various solutions?
  - Urgent need to find a way to provide effective treatment that expanded help-resources
  - Need to look at how client is responding on a granular level so that we can determine which mental health resource is correct for them.
- How long did it take to use this concept of being online?
  - TAO: took a couple of years – piloted with students and finally found a way to get them engaged
  - 7cupsoftea: Took 20 months – constantly switched code and system until people satisfied – stigma is huge and online resource is great way to maintain anonymity
  - Kognito: Classical model interventions tell you that you need to do this, but we want to let people practice how to gently tell those in need to find resources and seek help - takes about 6 months to develop this
  - Put a learner in a virtual environment that’s contextually rich and have them interact with virtual humans so they will act exactly like a student in psychological distress. This way you can gain self confidence, and ability to create referrals.
- Any hesitation from counseling staff?
  - It’s easier to do 3 sessions with TAO than 1 session with a clinician. Counselors caught on.
- Empathy is important in time of distress: how are you creating that digitally?
  - The therapeutic relationship is the most important aspect. Students preferred to interact with virtual therapist (for TAO).
- Some literature shows that there is more comfort around a virtual character – more anonymous
- Difficult to create empathy for a virtual character without a voice – we (7cupsoftea) try to train within the chat to build empathy component
- There is an assumption that therapy has to be in person. We are shifting (we don’t call, we text, we don’t go out to shop, we sit on our computer and shop, etc.) – standards of therapy are also shifting
- Veterans Crisis Line Chat Training Program – very useful
- If we have range of options (face-to-face and virtual therapy), we have the best shot of treating the most people
- College campuses have advantage of having large networks
- Every other field has made big strides (cancer, Alzheimer’s, etc.) – they’ve done it through pre-competitive collaboration.
  - If we’re all separate entities, but all doing same thing, we shouldn’t be competing, we should come together an pool our data. This would waste less time
  - However, important that we shouldn’t market products before the line between research and implementation is analyzed.
  - Another concern that these discoveries will become part of the “noise” and won’t be taken up.
- In terms of student involvement: there are measures that are available to gauge student involvement: Means Efficacy vs. Self-Efficacy. Means Efficacy examines student perception, engagement, and it shows that with high needs assessment, you will perform better.
7 Cups is a peer-to-peer emotional support system that matches people who need to talk with caring, trained, non-judgmental listeners. The app addresses typical mental health barriers by making the service anonymous, convenient, and free. Anonymity allows people to easily ask for help because there is no fear of them being personally identified. The service is also very convenient and available 24/7 via an app (both iPhone and Android) or desktop use. You click connect and within seconds you are chatting with a caring listener. Finally, the service is free.

Cost is a huge barrier to mental health care for many people. Other important points include:

- 7 Cups graduated from Y Combinator incubator in Silicon Valley in 2013.
- >90,000 people from 158 countries (in 130 different languages) use the platform each week. We have helped >1,000,000 people.
- 7 Cups has partnered with Tumbr, Secret, and other companies/non-profits.
- We provide psychological assessments (DASS-21) and growth plans to help people overcome challenges. Growth plans include self-help guides that focus on the biggest problems students face. They are all based on CBT, ACT or DBT therapy protocols.
- We are starting to work with campuses to increase student support and retention.

Our goal is to support 7 million people by the end of 2015. We'd love to work with you to support more students and to help make colleges more open and accepting environments.

Developed by the American Foundation for Suicide Prevention, the Interactive Screening Program (ISP) is a web-based method of identifying and encouraging college students who are not utilizing available mental health services to seek help. From the outset, the core aim of ISP was to encourage treatment engagement and reduce barriers to care. To achieve this, ISP is built on an online platform that provides students with significant barriers to help-seeking a safe and secure way to anonymously connect to a mental health professional on campus. This innovative approach is based on the premise that those who need help the most are often the least likely to utilize available services. Students engage in ISP via an email invitation from a designated campus official. The email contains a link to the school’s customized ISP website where students sign-up with a user ID and password and take a brief, confidential Stress & Depression Questionnaire. Within 24 hours, students receive an email notification containing a link to the ISP website. Once logged on, students can access a personalized response posted by a campus counselor who has reviewed the students’ questionnaire. Students may “dialogue” with the counselor online while maintaining their anonymity, schedule a telephone or in-person meeting, or request a referral for services.

With NIMH funding for an R34 intervention development grant, we developed, pilot-tested and iteratively refined a theoretically-driven intervention, Students’ eBridge to Mental Health (eBridge), which identifies students at elevated suicide risk and facilitates their linkage to mental health (MH) services. eBridge is designed to work on computers, tablets and smartphones (iOS, Android) and is easily adaptable to evolving technologies in the future. It incorporates motivational interviewing (MI) principles and draws from health behavior models that emphasize autonomy and self-determination. Following a web-based screen using standardized scales to identify students at elevated risk (positive screens on two or more of: lifetime suicide attempt, current suicidal ideation, alcohol abuse, depression), eBridge offers students options for personalized feedback (provided online in a conversational MI-adherent format) and corresponding online with professionals trained in MI and knowledgeable about university and community resources. In our R34 pilot randomized trial, students in the control condition received personalized feedback only (provided automatically in graphic format). At 2-month follow-up, students assigned to eBridge reported (a) significantly higher levels of readiness to seek MH services; (b) significantly lower levels of stigma related to MH services; and (c) a higher likelihood of linking to MH services. In our current NIMH-funded multi-university trial, we are conducting a larger-scale, fully-powered randomized controlled intervention trial to address the following specific aims: (1) determine the impact of eBridge on linkage to MH services, MH outcomes (suicidal thoughts and behaviors, depression, alcohol/substance use), and academic outcomes (GPA, retention) at 4-week and 6-month follow-up; and (2) examine possible moderators (gender, baseline functioning, baseline recognition of problem, borderline traits of impulsivity, affective stability) and mediators (engagement in online counseling, linkage to MH services) of eBridge effectiveness.
Therapist Assisted Online (TAO)
Sherry Benton, PhD
Founder & President

How can time spent conducting individual psychotherapy go farther? How can psychotherapy make effective use of ubiquitous smart phones, tablets, and laptop computers? Traditional hour-long, face-to-face therapy is effective, but cannot meet the demand in many mental health sectors and fails to capitalize on emergent communication tools. There is a need for new treatments that are effective but more efficient. Individual treatment that uses online components to reduce, not eliminate, direct contact with the psychotherapist were first used and proven effective in several other countries. It now is being implemented and researched in the U.S. The prototype, Therapist Assisted Online (TAO) psychotherapy, a 7-week individual treatment for anxiety that uses online tools to keep client engagement and therapeutic intensity high, with a fraction of the therapist time of conventional therapy. TAO treatment pairs on-line educational materials with brief therapist contact through phone or video-conferencing. This treatment combines four tools associated with improved outcomes: text-message reminders, homework on mobile devices, video conference sessions, and weekly progress measures completed by and reviewed with the client. In research conducted at a large university counseling center, TAO clients had greater reductions in anxiety, and greater improvement in global mental health, life functioning, and their sense of well-being than treatment-as-usual (TAU) clients. Although not all anxiety clients are suitable candidates, TAO can be used to treat many clients for whom TAU, without fear that client welfare or therapy effectiveness are affected. Treatment with TAO could expand therapy capacity to 3 patients per hour, increase access for patients who have few or no treatment options now, all with improved patient outcomes.

Kognito
Cyrille Adam, EdM
Research & Development

Kognito is a leader in immersive learning experiences that drive positive changes in health behaviors. Kognito’s award-winning online and mobile simulations utilize virtual humans to prepare individuals and professionals to effectively manage challenging conversations about health, behavioral health, and social issues. Kognito designs simulations using its proprietary Kognito Conversation Platform, which is based on research in neuroscience, social cognition, and applied game mechanics. Kognito currently has more than 450 clients in education, government and healthcare settings. To date, Kognito has addressed topics ranging from chronic disease, childhood obesity, childhood development, mental health, PTSD, veteran resilience, underage drinking, and LGBTQ bullying. Kognito has been recognized for its research-proven programs, and is the only company with digital simulations listed in the National Registry of Evidence-Based Programs and Practices.

- **At-Risk for University Faculty and Students** are a pair of online, interactive gatekeeper training programs that use virtual role-play to help faculty and students identify at-risk students. Through simulations of conversations with potentially at-risk students, the programs examine common indicators of psychological distress and methods for approaching an at-risk student for referral to the counseling center.

- **Veterans on Campus for Faculty, Staff and Peers** are two online, interactive training programs that help faculty, staff, and peers learn about the needs and experiences of student veterans, including (1) the unique value they bring to campus, (2) obstacles they may face in pursuit of a college degree, (3) effective techniques for managing classroom discussions of topics that may be sensitive to veterans, and (4) best practices for connecting veterans with support.

- **LGBTQ on Campus for Faculty, Staff and Peers** are two 30-minute online, interactive learning experiences that assist campuses in creating a safe and supportive campus community by (1) increasing awareness and empathy for the challenges faced by LGBTQ students, and 2) building the skills of faculty and staff to model respectful behavior, including managing classroom discussions that may include bias comments or attitudes or handling an LGBTQ-related issue. LGBTQ on Campus is a collaboration with the Trevor Project and Campus Pride.

Learn more at www.kognito.com.
Discussion Topics:

- People’s experience/thoughts/ideas for collaborations with Health IT companies

Take-Aways/Conclusions:

- What are the outcomes of apps? Hard to sort through all that’s out there.
  - Best ones made by the Department of Defense.
  - NDOD apps are very good
- Once a clinician is recommending the app it’s already too late because they are in their office – what do we wish students had at their fingertips in that instance?
  - A lot of students who weren’t making it to our office (TAO) were looking at our website, which was useful.
  - Tumblr does a cool thing where if someone writes “I’m depressed”, the system will pop up a thing that says “People care about you”.
    - We need to make mental health community based, and we need to make it something people want to share and tell their community about
- There is a lot to be careful with when working with Health IT.
  - Need to be careful with who you contract with. If the system goes down, how’s it backed up?
  - So many issues to ask Health IT provider to make sure they are going to be a good partner
- Analogy of predictive advertisements online: “Clark’s shoes” advertisement shows up because you are searching for Clark’s shoes – how can we replicate this with mental health? How can we catch mental health issues early and predict them for certain students?
  - Need to be careful to not invade privacy
- Ethics and Health IT? How are we educating people on Health IT?
  - It’s new territory - it takes a long time in science to get the outcomes that you can confidently say your program will work.
- Idea of Evidence Based Practice vs. Practice Based Evidence – always something out there that is published that says something about a program you are using, but you may not be using it right
  - The modules for developing new interventions have changed – working with both ways and with both kinds of evidence is good because they inform each other
- Idea of G-mail advertisement (going off the Clark’s shoe advertisement idea) – finding something that students see all the time (gmail), and putting something on there that might be useful (i.e., mental health resource)
  - Put a button on gmail that allowed client to pick what would be ideal to have in order to help (therapist, app, etc.)
- Is there going to be one type of Health IT program that universities will get behind? Where does the counseling center sit with liability?
  - There are reasons why campuses and counseling centers are cautious about programs – there have been crazy things that have happened
  - It really helps to have someone on student side for their input (about university policy and procedures). To have someone who would be that link (liaison) would be helpful.
  - Any contract made with any program has to go through the counseling office. If we’re intervening with mental health on a mobile device, there is liability there.
- To implement something like an app, there has to be certification tests and trainings
- Training could be computer based
  - Zuri Institute – example of online therapy training
Discussion Topics:

- Mental Health Monologues – how do you filter their content shared?
  - Erasing the Distance – Nonprofit
  - Rebecca’s Dream – curate monologues – people share their stories, have actors share other people’s stories
  - Workshop development, important to have student performers
- Often reach out to student leaders vs. not necessarily students who are not willing to reach out – how to engage less involved students?
  - Offer student employee positions – criteria is to not have a health interest or background
  - Pay students to produce content for us
  - Offer content contribution not necessarily related to health
  - Promote free stuff
  - Smaller venues
- Way to track which students are seeing YouTube videos?
  - Be in tune to what students are doing and catching them where they are
  - Extract learning from what students are interested in
- How to make distinction available between engaging students vs. providing them with help when needed?
  - Act of advocating and encouraging others to seek help translates back to them
  - Create a culture of caring with student groups – promote the highs and lows exercise
- Developing interdisciplinary courses
  - Mobile app development course about stress and wellness
  - Entrepreneurship course about mental health
  - Film course about mental health
- Negatives of working with students
  - Time intensive to manage students, inconsistencies of showing up, cyclical nature of academics and balancing programming, reviewing their work
    - How to combat these negatives:
      - Messaging, getting feedback, create safe-reporting guidelines, media guidelines – focus on “what not to say” or “what’s harmful”
- How to tailor research to Student Engagement
  - Consider timing and academic calendars
  - Consider incentives and what students are interested in/what they need
  - Class credit for involving students in research
  - Ask student groups to evaluate research
  - Volunteer Research Fairs, UROP
    - Find creative opportunities to get involved in other studies and understand the big picture – make them feel important to want to get involved
- Examples of students involved in advocacy?
  - Active Minds – advocacy for increasing resources for counseling / mental health promotion efforts (including counseling center hotline number on back of IDs, etc.)
    - Form of advocacy?
      - Range from student body effort, start petition, student government working closely with faculty, staff, and administrators to system level
  - Issue of training/advising students who don’t have advocacy skills but are passionate about the cause?
    - Difference between encouraging students to advocate vs. manipulating them for our needs
      - SAIC: developed student support network – engage students and create a caring culture
        - Mental Health Support Network – constructive dialogues about peer support
        - Having permanent student avenues to engage them for advocacy = sustainability
    - Challenge of student: need to be paid vs. student orgs
      - Recruiting new members is difficult

Take-Aways/Conclusions:

- Be in tune with what students are doing – extract learning from what students are already interested in
- Be data driven and share that information to students to help them understand key issues
- Educate students on topic of stigma – show value of student organizations, how it goes beyond college education
Discussion Topics:

- Funding out there for NIMH?
  - There is funding out there – trick is to tailor your work to interests of funding agencies
  - Center for Disease Control – good funding source
  - You can sign up for COS Pivot for grant funding opportunities
- Need to not only match ideas with funding agencies, but they have to know they can trust you
  - Bringing in stakeholders is key to make it seem bigger than just “our small team”
  - Key to getting big grants is showing you can make things happen “on the street”
  - Important to hold meetings with funders, go to lunch with them, and ask for little grant first.
    - Not going to give you much without knowing you can do something productive with small fund
- Problem with funding:
  - It’s hard to compete with other fields/programs for funding – mental health just isn’t on the radar like other health issues
  - Most students aren’t costing the federal government the same as other people with problems. Not as much of a need to address students
- It’s helpful to encourage board of Regents to gather funding (e.g., UT Austin)
- We need to be getting this issue out in public and it needs to be accurate
  - Need to educate our own universities of these problems – there should always be a leveraging strategy
- Partnering with businesses for SPIR and STTR grants – someone got large investment from Blue Cross and NSF
- We have residential counselors, police, etc. for students to make sure the development of students in college is positive, yet we lack mental health resources – huge mistake
- National College Depression Partnership – best practice of mental health treatment taken to 42 universities
  - Universities are key!
  - AFSP started field advocacy program – nationwide program
- Other fields, such as cancer treatment, is excelling and we’re not. There is a reason for that – we need to create partnerships with new treatments
  - Even pharmaceutical business gotten out of developing medicines for mental health illnesses – why? Too risky.
- Power of students is crucial to attaining grant money
  - Scholarship will get student to school, not through school – mental health wrap-around will help get them through school
  - Potential argument to make with wrapping mental health care and student financial aid bargain – could be great opportunity
- Wording of mental health is also very important
- Would be worthwhile to build a collective data base of some sort – would be a great resource for us all
  - Important to have statistics for funders, but also need to be better story tellers
- While dealing with college students is typically dealing with privileged population, it’s crucial to address those students who aren’t privileged (i.e., minorities, different SES, etc.)
  - Mental health has a PR problem – everyone thinks we’re talking about the same image
- SAIC: started Parents Council – have connected affluent parents who might be interested in these issues.
  - Worked to engage that group in health and wellbeing, and it turns out they are very interested because they have kids who are struggling.
  - It’s been successful – it’s a partnership with the development office
Concurrent Sessions #3: Gatekeeper-Training Programs  
Facilitator: Marian Trattner

Take-Aways/Conclusions:

- UW-Milwaukee – Campus Connect: gatekeeper training
  - Has been received very well – question is how do we provide something to campus community that gets message across in shorter time frame
  - The training is very experiential, but very long. (Might be partnering with residence halls for QPR training).
    - Length can steer people away
    - Short training (20 min) for staff – also a video in it that has been well received
- Apprehensive to make these trainings suicide focused – it raises the stakes, and it frightens the potential users
  - Downside: can steer people away
- Perk of QPR training: not so much doing things in the right order, but when confronted with the situation you now have the skills that you can use to connect people to get help.
  - Doesn’t scare people away (suicide actually not talked about at all) – talk about reaching out to students who are distressed.
- Not just campus focused – it’s a life skill
- BU program: “Tell someone: BU listens”
- UT-Austin – implemented a bystander intervention-training program – teaching students about suicide prevention, hate speech, etc.
  - Regents say that everyone should have this on their campus
- Getting students to think about application of training is breathtaking – it’s a good way of increasing mental health literacy on campus
  - The more natural we can make the trainings, the better – it should be a community culture
  - Words like “compassion” and “listening” has been very helpful for 7cupsoftea
  - Tried incorporating empathy in videos (Brene Brown empathy video) – job is not to be a counselor in this position, it’s to be a human being and have a presence
  - Emotional gas tank: parents, friends, homework, etc. – all these things drain you. But if you have compassion towards you, and if people listen, it fills your tank back up.
- “Haven” (bystander intervention, sexual assault component) – and “Alcohol EDU” – taking these modules were very helpful
- Might be useful to partner with HR programs
- Gatekeeper Behavior Scale (Albright et al.)—see Appendix to this document
Discussion Topics:

- Types of mentorships/contributions
  - How many mentors one would need
  - How to deal with unhelpful mentors
- Career options involving various degrees of research activity
- Productivity
  - Strategies allowing higher productivity
- Career opportunities
  - Teaching versus research
  - Career paths
- How to find postdocs opportunities
- How to determine best research interest to pursue and how to identify potential collaborators
Discussion Topics:

- Personal feedback to students important
  - Social norming of feedback
  - How would custom feedback compare to corporate health assessment feedback reports?
- “Campus Climate” as a module
  - Have student work with administrators/HMS funding department to further analyze data
  - Publishing on student websites
  - Student support network and gaining support for future fielding
  - Student forum to present data to community
- Publishing results of school comparing to rate of the study overall
- Jed/Clinton endorsement of “commitment to address issues”
- Module ideas:
  - Sexual assault
  - Adverse Childhood Events (ACE) scores – reduces causal connection of mental health from the institution
    - See NLSF – Princeton
  - Cognitive skill functioning
  - Resilience skills compare to mindsets
  - Meaning/purpose/career goals
  - Greek life?
    - Do communities (e.g. Greek, athletics)
    - Ministry
    - View of these communities as support structures
  - Predictors of retention
  - Add basic medical health modules to compete more directly with NCHA
  - Deeper questions related to experiences of depression and micro-aggression
    - LGBTQ
    - Racial/ethnic minorities
  - Connectednesss (such as Greek life above)
  - Resource suggestions based on responses
    - Technology > papers (apps are better than reading a paper)
  - Working with Alcohol.edu
  - Interface with school insurance negotiators to reduce premium / work with specific insurance companies to negotiate Alcohol.edu-like discounts on insurance
Distinguishing features of the Healthy Minds Study:

- Comprehensive survey of student mental health (with special emphasis on help-seeking)
- Use of validated screening tools (e.g., PHQ-9, GAD-7)
- Extensive research-to-practice efforts (e.g., customized data reports, interactive data interface, consultation)

Major enhancements:

- Survey consists of modules
  - Colleges/universities participate in ~6 modules (survey will remain the same length, 15-20 minutes)
    - 3 core modules (at all campuses): demographics, mental health screens, and mental health service utilization/help-seeking
    - ~3 elective modules (campuses select from menu): knowledge and attitudes; eating and body image; sleep habits; sexual health and sexual assault; violence/aggression; substance use; technology use; social networks; resilience/coping; upstander/bystander; campus climate/culture (including diversity); persistence and retention; financial stress; transition from school to career
  - Students receive tailored feedback
    - Upon completing the survey, students will see how their scores on the mental health screens (e.g., PHQ-9, GAD-7) compare to their peers (based on HMS national averages)
  - Students are offered relevant resources
    - Upon completing the survey, students will be offered relevant resources based on their symptoms/needs, as revealed in the survey.
      - Potential options include: evidence-based, accessible articles; tailored campus resources (e.g., sexual assault prevention on campus); Healthy Body Image Program (based on results of eating and body image module); SleepRate (based on results of sleep habits module); Kognito/other Gatekeeper Training Program (based on results of Upstander/bystander module); eBridge (based on results of mental health screens and substance use module)
- Systematic efforts to conduct return on investment (ROI) calculations

Questions for consideration:

- For the end of survey feedback delivered to students, how should “peer” be determined? In other words, should students see how their scores compare to all other students? To students of their gender? To students of their degree level? How specific should the tailoring become to increase relevancy for students?
- When referring students to relevant resources, how should we deal with comorbidity?
- What are issues that colleges might have with the resources linkage component of the proposed study?
- Are there other resources we might offer to students?
- Are there other modules/topics you would like to see included?
- How could the data be more relevant to your work?
- Are there opportunities to address faculty/staff mental health?
Discussion Topics:

- Important to propose mental health models to Regents of universities – need to have them on board
- Administrators care about student retention – if you can frame funding requests under that light it could create some leverage
- We need to be out there talking about mental health, but we need to be careful about how we craft our messages
  - Find ways to promote positive messages around mental health
  - Create positive partnerships
  - Hard to have mental health be news worthy if it’s not negative – we need mental health to be news worthy no matter what!
    - Beneficial to have students run social media
    - Important to do work with / through students
- Strategic Primer on College Mental Health – talks about behavioral health problems and learning problems
  - To have better learning in life, you need better behavioral health practices
  - Behavioral health issues are learning problems
    - This would be easy for Student Affairs to see
- This symposium group would be the ideal group to figure out what are the key unanswered questions surrounding college mental health
  - Important to create small groups, and help those groups find the funding they need
  - Important to gather public and private institutions to tackle these issues
  - Important to make sure we stick to these collaborations and working groups – it’s one thing to say we’re going to make these groups, but to do it and stick to it is another
    - Maybe have monthly conference calls? (Could be hectic though)
    - One idea is to have a Facebook group that keeps us all connected
    - Some sort of social media could keep everyone connected (easy and effective)
- Forming a task force on validated measures – seems to be a good idea to for several task forces on different content areas
  - Task force on social media, outreach, etc. – then you have some basis of shared knowledge in the next meeting
Sara Abelson, MPH  
*Senior Director of Programs, Active Minds, Inc.*

**Bio:** Sara earned her masters in Public Health in Health Behavior and Health Education from the University of Michigan. She graduated Magna Cum Laude from Cornell University with a Bachelor of Arts in a self-designed, interdisciplinary major (Human Social Behavior: Biological and Psychological Perspectives). Prior to joining Active Minds, Sara gained experience in program planning, development and coordination and worked to address mental health awareness among young people, a lifelong passion of hers, through a variety of positions and organizations. At the University of Michigan, Sara served as Project Coordinator for a research program on health disparities, as a consultant for the Jed Foundation and as a member of a Community Experts Advisory Panel for a project on Depression Awareness and Stigma Reduction in African American Youth. She conducted research on the promise of targeting peers to increase mental health help-seeking among adolescents and worked on LGBTQ advocacy efforts within the School of Public Health. Outside of work, Sara is most alive when connecting deeply with friends, family and individuals from all walks of life, adventuring outdoors or laughing healthily at herself in a hip hop dance class.

**Current projects:** Active Minds works closely with the Healthy Minds Network to bridge research to practice in college mental health through a diverse array of strategies, from creating and sharing infographics with thousands of students nationally to collaborating and consulting on grant initiatives. In addition to Active Minds’ ongoing work training student mental health advocates and helping our student chapters lead innovative, best-practice programming on over 400 campuses, three current, relevant initiatives include: The Active Minds Award of Excellence (www.ActiveMinds.org/Award) recognizes and celebrates U.S. campuses that are prioritizing and making great progress towards creating a campus that promotes mental health, physical health, and student well-being. The Active Minds Emerging Scholars Fellowship provides funding, mentorship and networking to undergraduate and graduate students conducting research on young adult mental health. We have a new, named scholar focused on mental health among students of color on campus. The Active Minds Transform Your Campus program trains and prepares student leaders to advocate for policy changes, campus-wide initiatives, and universal prevention strategies to better serve student mental health. We’re currently piloting the initiative at several campuses in Ohio and will be sharing the program with our full network in Fall 2015. Through the program we connect students to leading research in the field and prepare them to effectively use data to support their advocacy efforts on campus.

Cyrille Adam, EdM  
*Research & Development, Kognito*

**Bio:** Cyrille brings 10 years of experience in instructional theory, design, and research to Kognito’s health and wellness simulations.

**Current projects:** Cyrille works with Kognito’s research and instructional design teams to continuously improve product development and evaluation. His doctoral research at Columbia University focuses on the application of virtual humans to improve health behaviors among college students. Prior to joining Kognito, Cyrille developed health and technology projects at the Columbia Center for New media Teaching and Learning and within the Global Polio Eradication Initiative at UNICEF.
**Glenn Albright, PhD**  
Co-Founder & Director of Research, Kognito  

Bio: Dr. Albright is a clinical psychologist who received his Ph.D. from City University of New York in the area of Experimental Cognition with concentrations in neuropsychology and applied psychophysiology. He is a former chair of the Department of Psychology at Baruch College and the Co-Founder and Director of Research at Kognito.  

Current projects: His research involves examining the efficacy of Kognito’s simulations. Additionally, he is involved in facilitating the integration of empirically-based findings drawn from neuroscience in the areas of emotional regulation, mentalizing and empathy, as well as components of social cognitive learning models such as motivational interviewing and adult learning theory, into Kognito’s platform.

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**Katie Beck**  
Program Assistant, Wolverine Wellness, University of Michigan  

Bio: Katie is pursuing a Master is Public Health from the University of Michigan School of Public Health and is expected to graduate this April. She received a Bachelor of Science in psychology with honors from the University of Michigan.  

Current projects: Katie works with Wolverine Wellness, the health promotion office out of University Health Service. As a program assistant, she assists with programming and prevention efforts around alcohol and other drugs, body image and eating disorders, sexual health, and general student wellness. Currently, she is working on a social marketing campaign addressing the intersection of alcohol use and sexual assault on University of Michigan’s campus. Prior to her work at Wolverine Wellness, Katie served as the Healthy Minds Network's research study coordinator.

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**Joseph Behen, PhD**  
Executive Director of Counseling, Health & Disability Services, School of the Art Institute of Chicago  

Bio: Joseph Behen is the Executive Director of Counseling, Health & Disability Services at the School of the Art Institute of Chicago (SAIC) and has been on staff since 1994. He was project director for SAIC CARES, a three year suicide prevention effort at SAIC funded by a SAMHSA suicide prevention grant. He has guided SAIC’s participation in several national, collaborative efforts addressing college student mental health, including the Bringing Theory to Practice Project, the National College Depression Partnership, the Healthy Minds Study, and a NIMH-funded study of Mental Health First Aid. He is on the advisory board of the American College Health Association - National College Depression Partnership Quality Improvement Collaborative. He received his MS and PhD in Clinical Psychology, with a subspecialty in Medical Psychology, from the University of Florida and a BA in Psychology from the University of Michigan. He completed his internship at the Northwestern University Medical School. His professional interests include the unique mental health needs of art students, the role mental illness plays in attrition from college, public health approaches to mental health on college campuses, mental health consultation, and crisis intervention.

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**Sherry Benton, PhD**  
Founder & President, TAO Connect  

Bio: Sherry Benton has over 25 years experience as a psychologist and mental health service administrator in college student mental health. She is Board Certified in Counseling Psychology by the American Board of Professional Psychology and she is a Fellow in the American Psychological Association. Dr. Benton has many professional publications and presentations, particularly related to college student mental health. She served as President of the American Academy of Counseling Psychology and President of the Association of Counseling Center Training Agencies. She is co-editor of the book, “College Student Mental Health: Services and Strategies,” published by the National Association of Student Personnel Administrators. She received the Distinguished Service Award for Extraordinary Leadership in Counseling Psychology from the American Academy of Counseling Psychology in 2011. In 2006 she received the educational Advocacy Distinguished Service Award from the American
Jan Collins-Eaglin, PhD  
**Associate Dean of Students for Wellness and Personal Success, Pomona College**

**Bio:** I am a psychologist who specializes in collegiate mental health issues and depression among African American women. I currently am the Associate Dean of Students for Wellness and Personal Success at Pomona College. I was the Director of the Michigan State University Counseling Center, Student Support Services - which includes Counseling and Psychological Services, Disability Services and the Academic Success Center. As a psychologist my focus has been in the area of developing programs that promote psychological wellness and supports academic success. I completed my PhD, EdS, and MA degrees in the Combined Program of Education and Psychology at the University of Michigan. I am active nationally in professional organizations such as the American Psychological Association, and was chair of the Section for College and University Counseling Center in Division 17 and contributed on a national report about college student mental health. I served on the accreditation board of the International Association of Counseling Centers. I held national leadership roles in African American women’s organizations. In The Links, Inc. I was the Dean of the Scott Hawkins Leadership Institute, and chapter president of the Ann Arbor Chapter of The Links, Incorporated. I currently am the chair an initiative on Mental Health for the international organization. As a member of Alpha Kappa Alpha Sorority, Incorporated, I chaired the mental health initiative as part of the international program committee from 2006-2010, and was chapter president of the East Lansing chapter of the sorority.

**Current projects:** The NCHA data indicated that Pomona students endorsed the following issues significantly more than the national population: sadness, loneliness and feeling overwhelmed. Pomona was interested in exploring the data more thoroughly and assess students of color, first generation, DACA, and LGBTQ mental health indicators. We administered the Healthy Minds Study last spring term. Over 60% of students participated. From the data we are doing the following research: (1) Secondary analysis on all students groups such as low income, first generation, Latino, Asian, international, API, LGBTQ and African American students; (2) Exploring the dynamics of stigma on Pomona’s campus. 23% of students received counseling or therapy. Yet among students with positive depression or anxiety screens in the past year (approximately 50% of respondents), only 40% received counseling. We are looking at first year and second year student’s responses to develop targeted wellness messages; (3) Students who are financially struggling and identify as low income exhibit higher levels of depression and anxiety. Even though Pomona works very hard to provide financial and social support, these students are still struggling. This is an area of continued research and program development; and (4) Latino students exhibit higher levels of depression than Asian, African American, multiracial or white students. We are examining the kind of support is needed to effectively reach out to Latino students.

John Paul (J.P.) DeWitt  
**Project Manager, Healthy Minds Network; Project Manager, Social Science Data Analysis Network, University of Michigan**

**Bio:** JP manages the Social Science Data Analysis Network within the Population Studies Center at the University of Michigan’s Institute for Social Research. Focused on social demography, he investigates demographic trends in the United States including changing patterns of residential segregation, internal migration, and the surging diversity at the younger end of the population. In addition, JP trains faculty in methods for incorporating quantitative data analysis into the undergraduate curriculum. He has co-authored two social science textbooks and the Census Bureau publication, *A Compass for Understanding and Using Psychological Association. She is the founder of TAO Connect, Inc. a software company providing online tools for psychologists and counselors.

**Current projects:** We are in production of a treatment for substance abuse recovery: mindfulness; and depression. All of these are focused on college mental health clients. Plans for 2015 include treatments for non-student adults for anxiety and depression.
**American Community Survey Data: What the Media Need to Know**

In addition to contributing to numerous other reports, textbooks, and briefs, JP joined the Healthy Minds Network helping to manage and coordinate the survey studies. This opportunity connects his experience analyzing large surveys to his interests in disability and mental health policy. He has organized sessions on mental health and disability at the American Sociological Association’s 2011 Annual Meeting, belongs to the Disability and Society section and the ASA Committee on the Status of Persons with Disabilities in Sociology. He has also presented on cultural misrepresentations of Electroconvulsive Therapy (ECT) creating a barrier to treatment. In the coming years, he intends to study law in order to practice and to improve policies related to mental health and disabilities.

| Thom Craig |
| Director, Mental Health Programs, Margaret Clark Morgan Foundation |

**Bio:** Mr. Craig received his bachelor's in psychology and philosophy from Borromeo College Seminary in Cleveland and holds a master's in public administration from University of Akron. He works closely with mental health leaders and individuals with lived experience of mental illness to promote recovery and healing and promote and empower systems to use impactful methods. Over the past 30 years, Mr. Craig has worked with people diagnosed with both developmental disabilities and mental illness. Some of these positions include, service and support administrator, group home manager, therapeutic foster home recruiter/trainer, children’s psychiatric hospital worker, mental health case manager and sheltered workshop behavioral specialist. Mr. Craig was appointed to his hometown school board in Tallmadge in 1998 and was elected to serve for ten years, eight of them as president. Mr. Craig’s hobbies include bicycle riding and travel to explore historical towns and sites.

**Current projects:** Thom Craig is the Director of Mental Health Program for the Margaret Clark Morgan Foundation of Hudson, Ohio. The foundation has a primary purpose of supporting the mental health field, and secondary purpose of supporting education and arts fields. The Margaret Clark Morgan Foundation’s mission is to improve the lives of people with serious mental illness by investing in innovative projects in Northeast Ohio having national transformational impact.

| Vicky Desensi, PhD |
| Assistant Professor of Psychology, Wilmington College |

**Bio:** I earned my bachelor’s degree in Psychology from Miami University and my doctoral degree in Social Psychology from Indiana University. I am now an assistant professor of psychology at Wilmington College. My primary research interests have included attitudes and social cognition, persuasion, metacognition and impression formation. Currently, I am investigating students’ attitudes about issues surrounding mental health. Relevant to this line of work, I took the lead to establish a chapter of Active Minds on our Wilmington College campus. I also introduced a Psychology of Stigma course into our curriculum.

**Current projects:** The current work is exploratory in nature and was intended to assess the level of stigma toward mental illness in a sample of first-year college freshmen. Two-hundred and forty-two undergraduates at a small, private, liberal-arts college enrolled in a required first-semester freshmen Global Issues course completed the survey. A slight majority of participants was female (57%, n=105), with most of the sample aged less than 20 (85%, n = 207). We conducted a qualitative analysis of comments pertaining to personal comfort level in interactions with individuals clinically diagnosed with depression, anxiety, bipolar disorder, eating disorders, and substance abuse. Comments were coded for valence and categorized by content. Due to the subjective nature of qualitative coding, interrater reliability was established across 3 trained raters.

| Bobby Dishell |

**Bio:** Bobby is a senior at University of Michigan, pursuing a BA in Public
Policy with a focus on education. Before taking office as Michigan's Central Student Government President, Bobby served terms as Vice President and as an Assembly representative. Bobby also served as the Vice President of Recruitment - Internal for the Interfraternity Council. After graduation he plans to continue his education at Johns Hopkins University, working towards his Masters of Education, while teaching secondary English through Teach For America Corps in Baltimore.

Current projects: We've launched a peer-to-peer mental health initiative called the Wolverine Support Network on campus consisting of a board of directors, 46 group leaders and 200 members. The members are divided into groups of 10-15 students and each group meets once weekly for 60-90 minutes. Every other Friday there is a network-wide event where all 200 members, leaders and directors are encouraged to participate in an activity to bolster mental wellness through stress-busting activities, meditation practice, as well as hosting speakers. We've also begun to investigate the effectiveness of peer-to-peer support in mental wellness by implementing a survey, and hope to make this a longitudinal study following our participants, the success of the program and what we as a community can do to improve mental wellness on campus.

Sonia Doshi
Research Study Coordinator,
Healthy Minds Network
University of Michigan

Bio: Sonia is the Research Study Coordinator for the Healthy Minds Network, a mental health research team focused on adolescents and young adults. She has conducted several studies focused on reducing the barrier to help-seeking through video interventions for college students at the University of Michigan including the Athletes Connected and Depression Center studies. In addition, she has established and led the Healthy Minds Student Leadership Coalition on campus, which brings together students from across campus to engage in conversation related to research at the Healthy Minds Network and increases programming on mental health awareness on campus. In keeping with the intersection of technology and mental health under the foundation of the Healthy Minds Network, she had coordinated the Tinyshifts National Film Competition for college students to create short films about coping with stress and is overseeing the design of an online forum for young adults to discuss and resolve stressful problems together.

Current projects: Sonia is currently an undergraduate junior at the University of Michigan School of Information. She is a James B. Angell Scholar in the Bachelor of Science in Information program focusing in User Experience Design. In addition to the Healthy Minds Network, Sonia is the President-Elect of Kappa Theta Pi, the Professional Technology Co-Ed Fraternity on campus and is the Project Leader for BLUELab Hagley Gap, an international engineering team that develops and implements projects in Hagley Gap, Jamaica. She is also the Director of Technology and Social Media for rEDesign, an entrepreneurial organization focused on education reform. After completing her undergraduate degree, Sonia plans to pursue a graduate degree and career in Education Technology.

Daniel Eisenberg, PhD
Director,
Healthy Minds Network
Associate Professor of Health Management and Policy,
University of Michigan

Bio: Daniel Eisenberg is an Associate Professor of Health Management and Policy at the University of Michigan School of Public Health and a Faculty Associate at the Population Studies Center at the Institute for Social Research. His educational background is in economics (BA, PhD, Stanford University) and mental health services research (NIMH postdoctoral fellowship, UC-Berkeley). Most of his research focuses on mental health and help-seeking behavior among college students. As an economist, he was drawn to this area of research by the intriguing possibilities to identify and quantify “investments” in young people with large returns in terms of health, wellbeing, and productivity.

Current projects: His current work is a mix of descriptive survey data collection (e.g., the Healthy Minds Study) and interventions. Several of the
intervention studies use brief videos (and mobile apps) to encourage help-seeking or promote coping skills. Examples of these videos can be seen at www.athletesconnected.umich.edu and at “Tinyshifts” on YouTube. He is also working with colleagues to develop an intervention to motivate help-seeking in college populations through academic advising. As Director of the Healthy Minds Network, he is trying to help bring together the creativity and energy of students, researchers, administrators, health providers, advocates, and others in a collaborative effort to promote mental health for adolescent and young adult populations.

**Todd Favorite, PhD**  
*Director,*  
*University of Michigan Psychological Clinic*  
*Other affiliations: University of Michigan Medical School, Rackham Graduate School, and Behavioral Sleep Medicine Clinic, Ann Arbor VA Healthcare System*

**Bio:** Todd K. Favorite has been the director of the University Psychological Clinic since 2010. He holds a clinical faculty position in the U-M Department of Psychiatry and is an attending clinical psychologist on the PTSD Clinical Team at the Ann Arbor VA Healthcare System in Ann Arbor, Michigan. His interests in clinical research are in the area of the co-occurring symptoms of PTSD, chronic depression, and insomnia. From a psychological training perspective, Dr. Favorite has a background in psychodynamic as well as cognitive-behavioral methods and views the psychotherapy integration as an important evolution in the practice of psychosocial treatments. He is internationally certified as an advanced trainer for the Cognitive Behavioral Analysis System for Psychotherapy (CBASP) and has conducted research and published on the use of this integrative system of treatment for co-existing psychological symptoms.

**Current projects:** We have been working in collaboration with Blake Wagner at School of Public Health, UM School of Social Work, Dept of Art and Design, Information and Technology to develop a website and mobile app that provides vignettes of several types of problems facing students traveling abroad for extended study, research and/or field placements. These narratives are linked to coping strategies and practices that mediate psychological distress. This website will be available to in March 2015 and the University Psychological Clinic will begin offering brief workshops to assist students in tailoring these strategies and skills to their needs prior to departure. Additionally, the University Psychological Clinic has been funded by the Flinn Foundation for a 2 year study using myStrength.com (web-based CBT interventions for mild to moderate anxiety and depression) and telephone assist to reach nonhelp seeking students at UM. We are exploring the accessibility and acceptance of online mental health service delivery methods for this population who endorse symptoms but do not seek treatment from traditional resources.

**Wendy Fisher**  
*Research Assistant,*  
*Wilmington College*

**Bio:** I graduated from Wilmington College in 2014 with a Bachelor’s of Science in Psychology and Social Work and I am currently applying for graduate school in Social Psychology. At Wilmington College I received the student recognition award in Social Work and Psychology B.S., was a member of the Green Key Honor Society, and Who's Who Among American College and Universities.

**Current projects:** Over the last several years I have been involved with a research study about the stigma of mental illness. This particular study focuses on first year students and their beliefs and opinions about different mental health issues. The first part of the study was more of an exploratory, qualitative study that developed into a quantitative study based on what we found from the participants responses. At Wilmington College I was involved with the start-up of Active Minds on campus and acted as the research liaison for the 2013-2014 school year.

**Paul Furtaw**  
*Associate Director,*
Counseling Center,
Drexel University

Psychology from the Graduate School of Applied and Professional Psychology at Rutgers - The State University of New Jersey, with additional training in program planning/evaluation and organizational/systems consultation. He has worked in a broad range of clinical and organizational settings throughout his career, including campus counseling centers, inpatient psychiatric facilities and community programs for individuals with developmental disorders. He is increasingly preoccupied with notions of successful adaptation, character strengths, self-efficacy and social capital, having been inspired by his student clientele’s ability to consistently overcome seemingly insurmountable obstacles to successful adult development.

Current projects: As Associate Director at Drexel University’s Counseling Center, Dr. Furtaw is responsible for program development in response to student mental health needs, including suicide prevention and mental resilience. Since arriving one year ago, he has established platforms for student and faculty/staff gatekeeper training, expanded mental health self-screening, improved suicide risk assessment practices and enhanced utilization of a pre-existing electronic health records database. At present, he is partnering with the Scattergood Foundation, the City of Philadelphia and Screening for Mental Health, Inc. to bring a novel mental health screening kiosk to campus for use by students, faculty and staff. In addition, he is currently consulting to several departments on campus to bolster students’ coping in response to personal and academic challenges and/or setbacks by drawing on relevant concepts from sports/performance psychology.

Elizabeth Gong-Guy, PhD
Director,
Student Psychological Services,
University of California, Los Angeles

Bio: Elizabeth Gong-Guy is Director of UCLA’s Counseling and Psychological Services and an Associate Clinical Professor in the UCLA Psychology Department. She is a psychologist with expertise in mood disorders, post-traumatic stress, evidence-based treatments, multicultural and diversity issues, refugee and immigrant mental health, and training and supervision. Her experiences in community psychology, program evaluation and suicide prevention programming have highlighted innovative models of service delivery to traditionally underserved populations. In addition to her work within the UCLA campus community, she currently serves on the boards of the Organization of Counseling Center Directors in Higher Education and the California Psychological Association Training Division, and she is a past co-chair of the L.A. County Department of Education Suicide Prevention Task Force. Dr. Gong-Guy previously served as Commissioner on the California Board of Medical Quality Assurance Psychology Examining Committee, site-visitor for the American Psychological Association Committee on Accreditation, and consultant to the National Center for Asian American Mental Health. Dr. Gong-Guy received her Ph.D. in Psychology at UCLA and her B.A. at Stanford University.

John Greden, MD
Founder and Executive Director,
Depression Center
Rachel Upjohn Professor of Psychiatry and Clinical Neurosciences,
University of Michigan

Bio: Dr. John F. Greden is the Rachel Upjohn Professor of Psychiatry and Clinical Neurosciences in the Department of Psychiatry, Founder and Executive Director of the University of Michigan Depression Center, Founding Chair, National Network of Depression Centers (NNDC), and Research Professor in the Molecular and Behavioral Neuroscience Institute. He joined the faculty at the University of Michigan Medical School in 1974 and served as Chair of Michigan’s Department of Psychiatry from 1985 to 2007 when he stepped down to focus on directing the Depression Center and developing the NNDC. Dr. Greden earned his B.S. and M.D. at the University of Minnesota, completed his internship at Harbor/UCLA, and his psychiatry residency at the University of Minnesota Hospitals and Walter Reed Army Medical Center in Washington, DC. He has authored or co-authored more than 400 articles, refereed abstracts, books, book chapters, and presented approximately 335 invited lectures. He has almost three decades of NIH funding as investigator, co-investigator and consultant.
Major research themes have focused upon studying biomarkers and developing treatment strategies to prevent recurrences of depression and bipolar disorders.

**Farrah Greene-Palmer, PhD**  
*Suicide Prevention Grant Manager, Western Washington University*

**Bio:** Greene-Palmer received her master’s and doctorate degrees in Psychology from the University of Hawaii at Manoa, where her doctoral thesis centered on interrelations among suicidal ideation, negative affect and anxiety and depressive symptoms. Since then, she has taught at the college level, worked with grants, and conducted research on suicide. She spent two years in a post-doctoral fellowship at the Laboratory for the Treatment of Suicide-Related Ideation and Behavior at the Uniformed Health Services University.

**Current projects:** We have been working on various suicide prevention activities including awareness events, trainings, and seminars. Specifically, we are working on several local evaluations of the online suicide prevention gatekeeper training program, Kognito on our campus. We have completed a small RCT (n =65) on RA’s and peer health educators, which indicates a significant difference between the control and training group on self-rated knowledge and confidence (p<.0001). We are also conducting pre post analyses on other groups including staff and faculty, and are planning follow-up analyses. Additionally, we are planning focus groups and other evaluations on how to promote "upstream" suicide prevention on our campus. Other activities we have completed or are working on include: an art show on Recovery, a walk of hope, a mental health fair, and various events following the "Movember" theme, such as a lecture and workshops by suicide prevention speaker, and former NFL quarterback, Eric Hipple. The focus of our program is to encourage upstream suicide prevention.

**Will Heininger**  
*Program Coordinator of Athletes Connected, Depression Center, Athletic Department, University of Michigan*

**Bio:** Will grew up in Ann Arbor, Michigan. His lifelong dream of playing football at the University of Michigan came to fruition in 2007 under Hall of Fame Coach Lloyd Carr. At U of M, he was a 4-time letterman in football, a 4-time Academic All-Big Ten award recipient, and a two time Big Ten Distinguished Scholar. In his senior season of 2011, he was Michigan’s male nominee for the Wayne Dukes Outstanding Big Ten Scholar Award, and started every game at Defensive Tackle for Team 132, which finished the season 11-2 as Sugar Bowl Champions. After graduation, Will moved to Chicago to work in finance for Morningstar, Inc. In May 2014, he returned to Ann Arbor, MI, to pursue his passions of mental health and wellness, young people’s development, and athletics.

**Current projects:** Will currently works jointly with the University of Michigan Athletic Department and the Depression Center in Outreach and Education. He helps lead the Athletes Connected project (www.athletesconnected.umich.edu).

**Justin Heinze, PhD**  
*Research Investigator, School of Public Health, University of Michigan*

**Bio:** Dr Heinze's research interests include developmental transitions, social exclusion/ostracism, issues of gender and sexuality and longitudinal data methodology. Current projects examine the social determinants of health and risk behavior in adolescence and emerging adulthood, including substance use, anxiety, and youth violence. He completed his PhD in educational psychology from the University of Illinois-Chicago.

**Current projects:** Recently, my work has focused on young adult resiliency, particularly in the face of earlier community level risk factors. For example, I examine the mental health trajectories of young adults who were
exposed to violence in their homes or neighborhoods as adolescents. I am also interested in the transition to college life and have examined risk and protective factors associated with college adjustment.

**Joseph Himle, PhD**
Associate Professor and Director of the Curtis Research Center, School of Social Work, University of Michigan

**Bio:** Joseph Himle is Associate Professor and Director of the Curtis Research Center at the University of Michigan School of Social Work. His research interests focus on mental health intervention research with adults and youth. He has been the Principal or Co-Investigator on a total of 11 research grants funded by the National Institutes of Health. Dr. Himle has a special interest in social anxiety and obsessive-compulsive disorder. Dr. Himle also holds a joint appointment with the University of Michigan Department of Psychiatry. Other areas of research/scholarly interest: the relationship between psychosocial interventions and neurobiological factors, mental disorders, social work practice in mental health, and sustainable interventions for anxious college students.

**Current projects:** His current work includes treatment development projects focused on bringing cognitive behavioral therapy to underserved populations. Dr. Himle is the Principal Investigator of a recently funded National Institute of Mental Health multi-site RO-I grant; “A multi-site systems intervention for unemployed persons with social anxiety.”

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**Dori Hutchinson, ScD, CPRP**
Director of Services Division
Associate Clinical Professor, Sargent College of Health and Rehabilitation Services
Founder of the NITEO Program
Boston University

**Bio:** Dori S. Hutchinson has worked at the Center for Psychiatric Rehabilitation at Boston University since 1984. She currently serves as the Director of Services Division that assist people who live with mental health challenges assume their rightful roles as students, employees, residents and members of their communities. In addition, she is an Associate Clinical Professor at Sargent College of Health and Rehabilitation Services at Boston University. Dr. Hutchinson is currently the chairwoman of the Board of Directors of the global Psychiatric Rehabilitation Association. She provides training nationally to organizations and providers who wish to deliver recovery-oriented services and conduct relevant program evaluations. Dr. Hutchinson is deeply committed to supported education, suicide prevention and the development of empathy and resiliency as wellness tools. A recipient of a Garrett Lee Smith Suicide Prevention grant in 2009 for Boston University, Dr. Hutchinson has since then developed several college mental health programs to promote wellbeing, prevent suicide and assist students to remain in college through individual coaching services. Dr. Hutchinson launched the NITEO program in fall of 2014, which is a university-based program for students on medical leave for psychiatric reasons. This program is designed to develop wellness and resiliency so students can re-engage at their Universities with success.

**Current projects:** We were funded by a private foundation to provide a mental health service on our campus that is open to all students on medical leave for psychiatric reasons who live in our geographical area. This program (NITEO) is designed to assist students with serious mental health challenges to develop the health, resiliency skills, and supports they need to successfully reengage at college and complete their education. Students work with coaches who provide intensive coordination and planning to assist students. The program focuses on cognitive remediation, mindfulness, stress-hardiness, wellness management, writing skills, academic management and social connections. After a successful pilot with 10 students in the fall of 2014, we are underway this semester with another group. In helping the students prepare to return, we have been alarmed at the growing attitude that students with mental health concerns “should not be on campus” and how schools are finding passive and quiet ways to make
it difficult for students to return. We would love to join in discussion around these issues.

**James Jackson**  
**Director,**  
**Institute for Social Research,**  
**Professor,**  
**School of Public Health**  
**University of Michigan**

**Bio:** James S. Jackson is the Daniel Katz Distinguished University Professor of Psychology, Professor of Health Behavior and Health Education, School of Public Health, and Director of the Institute for Social Research, at the University of Michigan. His research focuses on issues of racial and ethnic influences on life course development, attitude change, reciprocity, social support, and coping and health among blacks in the Diaspora. He is past Director of the Center for Afroamerican and African Studies and past national president of the Black Students Psychological Association and Association of Black Psychologists. He is the recipient of the Distinguished Career Contributions to Research Award, Society for the Psychological Study of Ethnic Minority Issues, American Psychological Association, and recently received the James McKeen Cattell Fellow Award for Distinguished Career Contributions in Applied Psychology from the Association for Psychological Sciences. He is an elected a member of the Institute of Medicine of the National Academies of Sciences.

**Current projects:** He is currently directing the most extensive social, political behavior, and mental and physical health surveys on the African American and Black Caribbean populations ever conducted, “The National Survey of American Life” and the “The Family Survey across Generations and Nations”, and the National Science Foundation and Carnegie Corporation supported “National Study of Ethnic Pluralism and Politics”. Recent publications include "African Americans in a Diversifying Nation," and "Age cohort, ancestry, and immigration status influences on family relations and psychological well-being among three generation Caribbean black families”. *Journal of Social Issues, 63* (4), 729-743, 2007. He serves on several Boards for the National Research Council and the National Academies of Science and is a founding member of the new “Aging Society Research Network” of the MacArthur Foundation.

**Courtney Joly-Lowdermilk, MSEd**  
**Co-Coordinator,**  
**Niteo Program**  
**Center for Psychiatric Rehabilitation,**  
**Boston University**

**Bio:** Courtney Joly-Lowdermilk has worked in disability services for over ten years teaching and advising in secondary and post-secondary settings, and the body of her work is focused on transition-to-college programming. She's presented this work at various higher education conferences, including the Association on Higher Education and Disability and the Postsecondary Disability Training Institute. Courtney currently coordinates disability services at Montserrat College of Art and a transition program for college students on a mental health-related medical leave of absence, the Niteo Program, at the Center for Psychiatric Rehabilitation at Boston University.

**Current projects:** With my colleagues, Dori Hutchinson and Larry Kohn, I'm coordinating the Niteo Program at Boston University. Niteo provides college students living with serious mental health challenges to develop the health, resiliency, academic skills, and support they need to successfully re-enter and complete college. Coursework in Niteo focuses on cognitive remediation, mindfulness, wellness management and building social and academic skills.
**Adam Kern**  
*Study Coordinator, Healthy Minds Network, Research Assistant, Athletes Connected, University of Michigan*

**Bio:** Adam Kern received his BA in Psychology with honors at the University of Michigan. He currently works as a study coordinator for the Healthy Minds Network (HMN) at the University of Michigan. Along with the work he does in social research, Adam is fascinated with clinical work as well. He hopes to find a balance between research and clinical work, and eventually pursue a Master’s degree in Public Health and/or Social Work, and/or a PhD in Clinical Psychology.

**Current projects:** He assists the HMN team with survey distribution, data analysis, event coordination, and communications. Adam is also involved with an initiative called Athletes Connected, which Dr. Eisenberg leads in partnership with the School of Public Health, the Athletic Department, and the Depression Center. This project finds ways to encourage student-athletes to seek help for mental health issues since there is a low help-seeking rate due to its stigma. Adam has a special interest in this project since he was an athlete at the University of Michigan as an undergraduate (track and cross-country).

**Cheryl King, PhD**  
*Director, Mary A. Rackham Institute, Professor, Departments of Psychiatry and Psychology, University of Michigan*

**Bio:** Cheryl King is a Professor in the Departments of Psychiatry and Psychology, and Director of the Mary A. Rackham Institute at the University of Michigan. As Director of the Youth Depression and Suicide Research Program, she has provided leadership for multiple federally funded research initiatives focused on developing evidence-based strategies for adolescent and young adult suicide risk screening, assessment, and intervention. Dr. King has published widely on youth suicide prevention and has conducted workshops worldwide on best practices in suicide risk assessment and intervention. She is the lead author of the recently published book, *Teen Suicide Risk: A Practitioner Guide to Screening, Assessment, and Management*. In addition, Dr. King has provided testimony in the U.S. Senate on youth suicide prevention and is a Past President of the American Association of Suicidology, the Association of Psychologists in Academic Health Centers, and the Society for Clinical Child and Adolescent Psychology.

**Current projects:** My research program focuses on improving screening, risk assessment, and intervention strategies for adolescents and young adults at elevated risk for suicide. I completed a 5-year NIMH Midcareer award focused on the development of new interventions guided by health behavior models. This award also supported and facilitated my expanded involvement in the mentorship of emerging intervention researchers. I have been actively involved with several intervention development projects, including one titled “Electronic Bridge to Mental Health for College Students (eBridge).” In this initiative we expanded upon the foundational work of the American Foundation for Suicide Prevention in developing an online platform for suicide risk screening and brief online counseling with college students. In a pilot randomized controlled trial, eBridge, which incorporates a motivational interviewing approach, yielded promising findings regarding readiness for treatment and actual treatment seeking. We are currently conducting a NIMH-Funded multi-site study involving four universities to examine the effectiveness of this approach in a more definitive manner.

**Dan Kirsch, MD**  
*Clinical Associate Professor of Psychiatry, University of Massachusetts Medical School*

**Bio:** Dan Kirsch is Clinical Associate Professor of Psychiatry at the University of Massachusetts Medical School/UMass Memorial Medical Center where he served as Director of Ambulatory Psychiatry Services for 15 years. He is founder and director of his department’s College Consultation Service. He is co-chair of the National Network of Depression Center’s College Mental Health Task Group. He has 30 years clinical experience working with emerging adults and college students. His clinical research focuses on understanding characteristics of college students referred for psychiatric consultation and developing standardized assessment and treatment methodologies.
Current projects: I’ve been working in several areas. 1) Developing a pedagogy to teach adult psychiatry residents how to care for Young Adults (using the IOM definition of 10-25 yrs). This requires a skill set that child and adolescent psychiatrists are familiar with but adult psychiatrists generally not. With the exception of adult psychiatrists practicing in CMH. Themes include a developmental perspective, working with families and larger systems, and appreciation of diagnostic uncertainty as psychiatric illnesses are evolving and the final condition may not be clear. 2) A department strategic initiative to develop an integrated Transition Age Youth/Young Adult program consisting of clinical, training, and research components. 3) Establishing a community of practice that brings invested regional stakeholders together to concentrate on improving behavioral health care to the region’s 33,000 students. Participants thus far include counseling center directors and staff, researchers in early psychosis and TAY from the medical school. We plan to broaden the membership to include academics from the community, other faculty and administrators, students, and parents. This has diffused into the local Division of Public Health, as behavioral health needs of youth is a domain of their Community Health Improvement Plan.

Bio: Sarah is a joint degree doctoral candidate at University of Michigan, studying health management and policy at the School of Public Health and higher education at the School of Education. She is also Assistant Director of The Healthy Minds Network for Research on Adolescent and Young Adult Mental Health, an international research-to-practice initiative. Sarah’s research focuses primarily on college student mental health. She is particularly interested in epidemiological research and campus-based interventions to address eating disorders, depression, anxiety, and help-seeking. Sarah is co-Principal Investigator of the Healthy Bodies Study, a comprehensive survey of eating and body image issues among college and university student populations. Sarah received her bachelor’s degree from Tufts University where she was awarded best honors thesis of the year and graduated with honors. She holds a master’s in higher education from Harvard University and received the School of Education’s Student Leadership Award. Sarah was also a Fulbright scholar before beginning her doctoral training. In 2014, Sarah was awarded the Ruth L. Kirschstein National Research Service Award from the National Institutes of Health to conduct her doctoral dissertation research.

Current projects: In addition to running the Healthy Bodies Study, which has grown nationally since fall 2013, and working on several other projects through the Healthy Minds Network, Sarah is conducting research for her doctoral dissertation at four colleges and university this winter/spring. Her NIMH-funded study is designed to promote help-seeking for students with untreated eating disorders. Drawing from behavioral economics, the intervention delivers weekly emails to students addressing specific cognitive biases and encouraging use of available campus services. Sarah is also involved in on-going research using data from the Healthy Minds Study, including papers on: co-morbid depression and heavy episodic drinking; relationships between academic competition and student well-being; and variations in mental health and help-seeking across institutional characteristics and academic disciplines.

Becca Lindsay
Research Program Coordinator,
Youth and Young Adult Depression and Suicide Prevention Program,
University of Michigan

Bio: Rebecca Lindsay is a graduate from the University of Michigan School of Public Health in Health Behavior and Health Education. After graduating in 2011, she supported several school-based mental health education programs in West Michigan and launched a successful anti-bullying campaign called be nice.

Current projects: Rebecca is the research study coordinator for the Youth and Young Adult Depression and Suicide Prevention Program at the
University of Michigan, Department of Psychiatry. Her interests include youth suicide prevention, community-based participatory research, and mindfulness-based approaches to promote positive mental health and help-seeking behaviors among young adults and adolescents.

Emily Lustig  
Central Student Government Vice President,  
University of Michigan

Bio: Emily Lustig is an LSA senior studying Biopsychology, Cognition and Neuroscience. She's in the midst of completing an Honors Thesis investigating experienced wellbeing and cognition in the aging population. Emily is currently the Central Student Government Vice President as well as the Beyond the Diag Program Assistant. She has also served as the Safety and Security Commission Chair. Emily's interests lie in cognitive psychology research and will be pursuing a Ph.D from the Georgia Institute of Technology in Cognitive Aging next year.

Current projects: We've launched a peer-to-peer mental health initiative called the Wolverine Support Network on campus consisting of a board of directors, 46 group leaders and 200 members. Members are divided into groups of 10-15 students and each group meets weekly. Every other Friday there is a network-wide event where all 200 members, leaders and directors are encouraged to participate in an activity to bolster mental wellness through stress-busting physical activities, meditation practice, as well as hosting speakers. We've also begun to investigate the effectiveness of peer-to-peer support in mental wellness by implementing a survey during year one, and hope to continue to make this a longitudinal study following our participants, the success of the program and what we as a community can do to improve mental wellness on campus.

Sean Ma, PhD  
Co-Founder,  
Change of Mind,  
University of Michigan

Bio: Sean received his PhD in Neuroscience at the University of Texas at Austin and came to Michigan to continue his postdoc work in Biopsychology and Psychiatry. He has received an Undergraduate Research Opportunity Program (UROP) Best Mentor Award for mentoring students that engage in undergraduate research.

Current projects: Sean applies mHealth techniques to engage with patients suffering from mental health disorders in his research and entrepreneurial work. One current study uses a gamified mobile app to modify the attention bias in anxiety disorder patients. In addition, he is also a co-founder of a mental health startup, Change of Mind, currently based at the student incubator, TechArb. Change of Mind provides a community based mobile toolkit for individuals suffering from anxiety. By supplementing clinician’s psychotherapy, we help individuals to embrace, engage and manage their stressful moments in life.

John MacPhee, MBA, MPH  
CEO,  
The Jed Foundation

Bio: John MacPhee brings 20 years of leadership and management experience from the business and nonprofit settings to his role as CEO of The Jed Foundation. Prior to The Jed Foundation, he served as executive vice president of Par Pharmaceutical, and president of the company’s Strativa Pharmaceuticals division, where he oversaw commercial operations, clinical development, medical affairs, alliance management and business development. Previously, he worked at Forest Laboratories, where he led the launches of treatments for depression, anxiety and Alzheimer’s disease. Well versed in the challenges faced by college students, John serves as a board member for Bottom Line, a nonprofit organization that provides guidance counseling to disadvantaged urban youth to help them get into college and graduate. John also serves on the boards of HIVHero.org, Trek Medics International and Adamas Pharmaceuticals. He earned a BA and MPH from Columbia University and an MBA from New York University.
Current projects: This past year, The Jed Foundation and The Clinton Foundation Health Matters Initiative have announced that over 75 colleges and universities have joined The Jed & Clinton Health Matters Campus Program (The Campus Program) in support of student wellbeing and mental health. The Campus Program, which launched in June 2014, is designed to help colleges and universities assess and enhance mental health, substance abuse, and suicide prevention programming. Participating schools make a four-year commitment to work with The Campus Program to evaluate and identify opportunities to augment these activities on campus. The Campus Program provides schools with a framework for supporting student mental health, as well as assessment tools, feedback reports and ongoing technical assistance from The Campus Program team. The Jed Foundation and Clinton Health Matters Initiative are honored to work with these schools in their efforts to promote the emotional wellbeing and mental health of their students. You can learn more at www.thecampusprogram.org.

Alison Malmon
Founder and Executive Director,
Active Minds, Inc.

Bio: Alison Malmon is the founder and Executive Director of Active Minds, Inc., the leading national organization that uses students as the driving force to change the perception about mental health on college campuses. Alison formed the organization following the suicide of her only sibling, 22-year-old brother Brian. Since 2003, she has served as Executive Director of the non-profit, leading the organization as it engages tens of thousands of students nationwide and promotes a unified national voice for young adults in the mental health awareness movement. For her efforts, Alison has been named one of the "Top 15 Global Emerging Social Innovators" by Ashoka Changemakers and American Express, Washingtonian of the Year by Washingtonian Magazine, and a Woman of Distinction by the American Association of University Women. She has also received the Destigmatization Award from the National Council of Behavioral Healthcare, Tipper Gore Remember the Children Award from Mental Health America, inaugural Young Leadership Award from the National Mental Health Research Association (NARSAD), and more. Alison has been profiled as a "Person you Should Know" on CNN, and in stories in the New York Times, Washington Post, Inside Higher Ed, and Glamour Magazine. In addition to her work at Active Minds, Alison sits on the National Suicide Prevention Lifeline Consumer/Survivor Subcommittee, Suicide Prevention Resource Center Steering Committee, and Crisis Text Line Advisory Committee. She is the mother of two young girls and, in her spare time, Alison enjoys teaching flying trapeze at the Trapeze School in Washington, DC.

Hara Marano
Editor at Large,
Psychology Today

Bio: Hara Estroff Marano is an author, journalist and editor who, although not a trained psychologist herself has been Editor-at-Large of Psychology Today for the past 15 years, in addition to writing for many other publications such as The New York Times and The Smithsonian. She writes a regular advice column for Psychology Today called "Unconventional Wisdom" and is the author of A Nation of Wimps and two previous books, the most recent on the social development of children, Why Doesn’t Anybody Like Me?: A Guide to Raising Socially Confident Kids. In 2001, she created Psychology Today’s "Blues Buster", a print newsletter that was the first publication to identify and document the mental health crisis on America’s college campuses. As a result of her reporting she was invited to join the groundbreaking Bringing Theory to Practice Project. Funded by the Engelhard Foundation, it seeks to advance student engagement in learning and civic service as natural means of countering depression and other disorders of disconnection so widespread on American college campuses today. She is also a member of the Board of Governors of the University of Haifa in Israel.

Current projects: I have been reporting on the topic of student mental health since 2002 for Psychology Today and an allied publication, and have helped bring national attention to the issue.
Roula Markoulakis, PhD  
Post-Doctoral Researcher,  
The Centre for Addiction and Mental Health in Toronto

Current projects: A few months ago I defended my dissertation, which explored the ways university students with mental health problems access services and accommodations in the university setting. In this work, I developed a map of the complex process a student must unknowingly navigate to obtain needed assistance, often while unwell. I highlighted the various roles staff take in the accommodation process, such as the coordination of resources, obtaining funding, direct support, etc. and the ways institutional policies influence these roles. I also presented student accounts of their experiences undergoing the diagnostic process required for eligibility to access needed resources (and the implications of justifying their 'need' in this way) and their difficulties in accessing and utilizing the help provided by the university. At the institutional level, I explored the tensions between academic integrity and accommodation and the implications of a process of accommodation rather than inclusive instructional design, with links made to institutional and provincial policies in this realm. The University of Toronto also recently developed a Student Mental Health Strategy, for which I was able to contribute through committee work. My current post-doctoral research at the Centre for Addiction and Mental Health in Toronto explores how to support individuals with mental illnesses in transitioning to higher education. Through working with two local first-episode recovery clinics and a college supported education program, I am interviewing individuals with mental illness and service providers around educational goals, barriers/facilitators, supports needed, etc. in order to better inform transition programming in mental health services and education settings.

Ashley Miller  
Study Coordinator,  
Healthy Minds Network  
Research Assistant,  
SSDAN,  
University of Michigan

Bio: Ashley is a master’s student at the University of Michigan studying Epidemiology Methods and Applications. She came to Michigan after graduating from Grand Valley State University with a degree in Health Communications and Applied Statistics. Ashley has previously worked on a research project using ACS data and ArcGIS to develop community health indicators using census-tract level data. Her focus within the Healthy Minds Network is survey customization and distribution for community colleges. After graduating with her MPH she hopes to work in applied epidemiology for a few years before returning to obtain her PhD.

Current projects: Within public health, she has a wide variety of interests including applied epidemiology, the influence of the built environment and geographic location on health, substance abuse, and policy/program evaluation. Underlying all of these interests is the influence of social factors on health with the ultimate goal of health equity.

Glen Moriarty, PsyD  
Founder,  
7 Cups of Tea

Bio: Glen Moriarty is a licensed psychologist and the founder of 7 Cups of Tea. 7 Cups of Tea is a web and apps based peer-to-peer emotional support platform. The service helps 80,000 people a week; the vast majority are students.

Current projects: 7 Cups is just starting to work more directly with colleges. Moriarty is here to collaborate and learn from other participants.

Maggie Mortali, MPH  
Director,  
Interactive Screening Program,  
American Foundation for Suicide Prevention

Bio: Ms. Mortali has worked in suicide prevention for over seven years since founding a chapter of Active Minds at the University of North Carolina Wilmington. As a national leader of that organization, she worked with chapters across the country to develop programs to encourage help-seeking behavior and promote counseling center outreach to at-risk students. In 2010, she joined the staff of the American Foundation for Suicide Prevention.
Prevention (AFSP), where she currently serves as Director of the Interactive Screening Program (ISP), AFSP’s groundbreaking intervention program that makes mental health a priority on campus and in the workplace.

**Current projects:** The ISP is an upstream suicide prevention initiative that provides a simple and effective way to reach out to at-risk students and connect them to a campus-based counselor who can encourage them to get help. The ISP provides a safe and secure platform for treatment engagement and serves those who have the greatest barriers to help-seeking, such as stigma and shame, confidentiality concerns or fear of sanctions against them for accessing treatment. By proactively engaging those in need, the ISP supports student mental health and helps create a culture that recognizes that stress and depression are common and treatable problems in today’s world.

**Barbara Moser, MD**  
*Director, Norris Health Center’s Quality Improvement Program and AAAHC accreditation, UW-Milwaukee*

**Bio:** Barbara Moser is a board-certified family practice physician with twenty-six years of experience working in college health, having spent the past 21+ years on the UW-Milwaukee campus. Dr. Moser actively treats college students for depression, anxiety disorders and other mental health issues in her practice at UWM’s Norris Health Center, and is also an advocate for the mental well-being of students on the UW-Milwaukee campus. She presently serves as the co-principal investigator on a SAMHSA GLS Campus Suicide Prevention grant for the UWM Suicide Prevention Project. As Director of Norris Health Center’s Quality Improvement Program and AAAHC accreditation, Dr. Moser provides guidance in making data-driven decisions to improve care and process outcomes. In the Milwaukee community, she is a member of the Prevent Suicide Greater Milwaukee (PSGM) Coalition’s Steering Committee, and is an active QPR suicide prevention trainer for both adults and youth. Dr. Moser received her MD from Northwestern University in Chicago, and completed a family practice residency at the University of Massachusetts Medical Center in Worcester, Massachusetts.

**Current projects:** Currently, Dr. Moser is involved in three relevant projects: (1) Screening for Depression and Suicidal Ideation in a College Health Center Medical Clinic; (2) Campus Assessment of Project Impacts, the USPPAKS (UWM Suicide Prevention Project Awareness and Knowledge Survey); and (3) Reaching out to Students in Distress: Engage and empower Faculty and Staff to take action.

**Paola Pedrelli, PhD**  
*Assistant Professor, Harvard Medical School*

**Bio:** Dr. Pedrelli is a licensed Clinical Psychologist, an Assistant Professor at Harvard Medical School and an Assistant in psychology and Massachusetts General Hospital. Her research focuses on investigating the etiology and treatment of mood disorders in conjunction with alcohol use disorders. She has been awarded funding from the National Institute of Alcohol Abuse and Alcoholism and the ABMRF/The Foundation for Alcohol Research. She has been actively involved in raising awareness on the association between depressive symptoms and heavy drinking and published extensively on this topic. She has also developed several treatment manuals for patients with co-occurring disorders.

**Current projects:** I continue to conduct a study evaluating the effectiveness of a treatment for college students with depressive symptoms and heavy episodic drinking. The approach combines an effective intervention for depression (cognitive behavioral therapy) with an effective intervention for heavy drinking (brief motivation interviewing). Preliminary data will be presented at the Depression on College Campuses Conference. I have submitted an RO1 proposing to adapt the treatment program that I developed for college students with depressive symptoms and heavy episodic drinking to be delivered online by an avatar (relational agent). I am the principal investigator of a project examining the association between heavy episodic drinking and emotion regulation (distress tolerance) and
reward-based behaviors responsiveness in college students. I am working on a paper showing that students with MDD drink heavily more often and more that their non-depressed peers.

**Julie Posselt, PhD**  
**Assistant Professor, Higher Education, University of Michigan**

**Bio:** Julie Posselt is Assistant Professor of higher education at University of Michigan. She conducts interdisciplinary research into gatekeeping in higher education and its implications for both equitable access to educational opportunities and the wellbeing and degree attainment of those who do enroll. Her recent research on graduate school admissions has been published in the Chronicle of Higher Education and the American Journal of Education, and will be released as a book this year by Harvard University Press. She is a member of the editorial review board of the Journal of Higher Education and received a 2012 Outstanding Reviewer Award from the American Educational Research Journal. Posselt received the BS in Secondary Education, History, and Political Science summa cum laude, an MA in Educational Policy Studies from the University of Wisconsin-Madison, and her PhD in Higher Education from University of Michigan.

**Current projects:** I am currently engaged in research on the relationship between academic competitiveness and mental health (e.g., anxiety, depression, and flourishing) in college and graduate students. One paper examines how this relationship varies by academic performance, field of study, and social identities for undergraduates; this work uses data from the Healthy Minds Study (HMS) and is the focus of our presentation this week. Another study examines competitiveness and mental health in STEM graduate education using a combination of HMS data and interviews and focus groups with graduate students from historically underrepresented backgrounds. This research is aimed at understanding both what faculty can do to a) develop skills for coping with competitiveness and b) create less competitive, more supportive learning environments. This study is supported by a faculty seed grant from the Institute for Research on Women and Gender.

**Yiqing Qian**  
**MPH candidate, University of Michigan**

**Bio:** Yiqing Qian is a first-year MPH student in University of Michigan School of Public Health. Majoring in Global Health Epidemiology, Yiqing is interested in global mental health and modeling of chronic diseases. This summer, she will participate in a research project in Chile and study mental health in disaster management. Before coming to U-M, Yiqing received her B.S. degree in Biological Science from Nanjing University in June 2014. In Nanjing University, Yiqing received the Second-class People’s Scholarship Award twice. Interested in neuroscience, she attended 2012 Summer School at the Institute of Neuroscience in China. When Yiqing is not working on SAS or R, she enjoys running, reading, traveling and baking.

**Kathryn Redd, MPH, MSW, CHES**  
**Interim Program Director for Prevention, Assessment and Communication, Counseling and Mental Health Center Lecturer, Department of Kinesiology and Health Education, University of Texas at Austin**

**Bio:** Katy started UT-Austin’s first mental health promotion program--an innovative approach that uses public health methods to inform the campus environment about mental health. She is currently the Interim Program Director for Prevention, Assessment and Communication for the Counseling and Mental Health Center at UT-Austin and a Lecturer in the Department of Kinesiology and Health Education. Katy served as a Peace Corps Volunteer in Belize before obtaining an MSW and MPH from New Mexico State University. She has worked for over seven years in public health on initiatives in sexual health, childhood obesity prevention, and mental health. In her spare time Katy enjoys cooking, road biking, enjoying Austin’s parks, and spending time with her young daughter.

**Current projects:** I’ve currently been working on “upstream” approaches to promoting college student mental health at the population level. This is a public health approach to engaging students in taking care of their own and others’ mental health. We have determined that our projects and initiatives will focus on one of the following (as research supports these for promoting
mental health): mindfulness, resilience, avoiding social comparisons, social connectedness, gratitude, creativity and play, and life purpose. Among the highlights so far: 1-an Unplug Campaign, encouraging students to unplug for a period of time to reconnect to the people in things in their lives that they sometimes miss out on; 2-Taking our Mind Body Lab mobile—taking these elements of relaxation out to students where they are; 3-starting a new course for academic credit for students to be trained as peer mental health educators—these students will subsequently deliver workshops on resilience and failure to their fellow students.

**Erin Reynolds**  
*Undergraduate student, Wilmington College*

**Bio:** I am currently a senior at Wilmington College set to graduate this coming May 2015 with a Bachelor's of Science in Psychology. I am a member of the Green Key Honor Society, and this fall was selected for Who’s Who Among American Colleges and Universities. I am also a student member of the Association for Psychological Sciences (APS). I am in the process of applying to graduate programs in Clinical Psychology.

**Current projects:** During the spring of 2014 I became involved in our local chapter of Active Minds. Concurrently, I have been serving as a research assistant on Dr. Victoria DeSensi’s study examining the stigma of mental illness. This exploratory study intends to examine the attitudes and perceptions about mental illness amongst freshman at Wilmington College. Findings from preliminary data were used in the development of a second survey instrument, which measured the response categories found in preliminary analysis.

**Michelle Riba, MD, MS, DFAPA, FAPM**  
*Professor and Associate Chair for Integrated Medicine and Psychiatric Services  
Associate Director of Comprehensive Depression Center  
Director of the PsychOncology Program, University of Michigan*

**Bio:** Michelle Riba is Professor and Associate Chair for Integrated Medicine and Psychiatric Services and Associate Director of the University of Michigan Comprehensive Depression Center, Director of the PsychOncology Program at the University of Michigan Comprehensive Cancer Center and Director, Psychosomatic Fellowship Program. She has served on numerous editorial boards and is the author or editor of over 200 scientific articles, books, chapters and scientific abstracts. Dr. Riba is Past President of the American Psychiatric Association, the Association for Academic Psychiatry and American Association of Directors of Psychiatric Residency Training. Dr. Riba has served as the representative to the World Psychiatric Association from the APA and is currently WPA Secretary for Scientific Publications. As a psychosomatic medicine psychiatrist, Dr. Riba’s clinical and research interests include collaborative care, psychoneurology, depression and cardiovascular disease, and screening for distress in patients with medical illness. Dr. Riba is an active teacher at the University of Michigan. As a psychosomatic medicine psychiatrist, she lectures on primary care psychiatry, depression and medical illness, depression and cancer; cardiovascular disease and psychiatric issues. She directs regular psychooncology rounds at the U-M Comprehensive Cancer Center. For many years, Dr. Riba was course co-director of two annual events at U-M: Advances in Psychiatry and Psychopharmacology Update, and is a national and international speaker at major scientific meetings. She has been recognized with numerous teaching honors at the University of Connecticut School of Medicine and the University of Michigan. At the University of Michigan, she was elected to the Medical School's Clinical Appointments and Promotions Committee and served as chair, and the University of Michigan Health System's Executive Committee on Clinical Affairs. Dr. Riba co-chairs, with Daniel Kirsch, the National Network of Depression Center College Mental Health Task Force. There will be a special edition of the journal, Academic Psychiatry, on the topic of College Mental Health.

**Holly Rider-Milkovich**  
*Director, Sexual Assault Prevention and Awareness Center, University of Michigan*

**Bio:** Holly Rider-Milkovich currently serves as the Director of the Sexual Assault Prevention and Awareness Center, the nationally recognized sexual and intimate partner violence response and prevention program at the University of Michigan. As the Director of SAPAC, Ms. Rider-Milkovich provides direction and leadership to the University’s sexual and intimate
partner violence response, education and prevention efforts across campus. Ms. Rider-Milkovich co-authored University of Michigan’s newly revised sexual misconduct policy and is providing institutional leadership in implementing the undergraduate and graduate student education efforts related to this policy institution-wide. Ms. Rider-Milkovich also co-chairs the Abuse Hurts Initiative, a cross-campus effort to address the effects of domestic violence in the workplace and connect survivors to appropriate campus and community-based resources.

Ms. Rider-Milkovich is the former Executive Director of a three-county domestic violence prevention and services program and emergency shelter in southeast Georgia and provided state-level leadership while serving on Executive Board of the Georgia Coalition Against Sexual and Domestic Violence. She has worked in teams with law enforcement as a Police Response Advocate and has experience as an Emergency Room Advocate for an urban SANE program. Ms. Rider-Milkovich has taught women’s studies courses at the college level and has expertise in curriculum development and evaluation as well as program development, implementation and evaluation. She brings two decades of experience in sexual and intimate partner violence prevention and response and in higher education to her role at SAPAC.

**Nance Roy, MS, EdD**

*Clinical Director,*

*The Jed Foundation*

*Assistant Clinical Professor,*

*Department of Psychiatry,*

*Yale School of Medicine*

**Bio:** Dr. Roy serves as the Clinical Director of The Jed Foundation and is an Assistant Clinical Professor at the Yale School of Medicine, Dept. of Psychiatry. She has over 20 years of experience as a psychologist working in college mental health. She was Director of the Health and Counseling Center at Sarah Lawrence College before becoming the Assistant Dean of Health and Wellness at Sarah Lawrence, and more recently was the Associate Dean of Health and Wellness at Rhode Island School of Design. She is a senior advisor for the National College Depression Partnership and publications have focused on effective strategies for treatment and management of at-risk students on college campuses. She has been actively involved in college strategic planning initiatives focusing on a holistic approach to education, crisis management and a public health model for delivery of care on college campuses. She earned a BS degree from the University of Rhode Island, an MS from the University of North Carolina and an EdD from Harvard University.

**Current projects:** The Jed/Clinton Health Matters Campus Program is designed to help campuses promote emotional well-being, reduce substance abuse and prevent suicide. This is a 4-year program, which starts with the campus forming a multi-disciplinary, campus-wide task force to work on this initiative and ultimately to develop a strategic plan for addressing these issues on campus. Schools take a comprehensive survey to assess their policies and programs at 3 points over the 4-year commitment – at the outset, midway through the second year, and midway through year four in order to assess progress over time. Schools receive a detailed feedback report for each survey, and on-site campus visits are scheduled to review the feedback reports with the mental health task force, assist in developing goals and strategic plans, provide resources and ongoing technical assistance, both on site and via email, and develop a learning community among campus partners to share challenges and successes via webinars, newsletters, on-line resource library, etc.
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<th>Name</th>
<th>Title</th>
<th>Current projects</th>
<th>Bio</th>
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<tr>
<td>Sara Sarkey, PhD</td>
<td>Associate Director for Medical Strategy, CNS, Takeda Pharmaceuticals</td>
<td>I currently work as the Associate Director for Medical Strategy, CNS, at Takeda Pharmaceuticals. My focus is on Major Depressive Disorder and I am working with the Medical Affairs team at Takeda to better understand depression from the patient perspective and how to improve the access to quality care.</td>
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<tr>
<td>Vic Schwartz, MD</td>
<td>Medical Director, The Jed Foundation</td>
<td></td>
<td>Dr. Victor Schwartz is medical director of The Jed Foundation. Previously, he was university dean of students for six years after establishing and serving as director of the Counseling Center at Yeshiva University. He is a clinical associate professor of psychiatry at NYU School of Medicine. Dr. Schwartz was medical director and chief psychiatrist at the NYU Counseling Service. He has also served as assistant director of residency training in psychiatry at NYU Medical Center. He is a Distinguished Fellow, was a member of the Presidential Task Force on College Mental Health, and co-chair of the working group on law and college mental health all of the American Psychiatric Association. He was also a co-chair of the Committee on the College Student of the Group for the Advancement of Psychiatry. He has written and lectured extensively on college mental health; particularly concerning the management of mental health crises in colleges and legal issues in college mental health. He serves as an advisor to the NFL, NCAA, Gun Free Kids and has consulted at numerous colleges and universities. Dr. Schwartz co-edited (with Dr. Kay) the text, Mental Health Care in the College Community.</td>
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<tr>
<td>Micky Sharma, PsyD</td>
<td>Director, Counseling and Consultation Service, Ohio State University President, AUCCD</td>
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<td>Dr. Sharma is the Director of the Counseling and Consultation Service at The Ohio State University where he specializes in the treatment of mental health issues of college and university students. Dr. Sharma has also spoken professionally regarding the mental health needs of students and assisting a community through trauma at several conferences and forums. His career has spanned service in seven university counseling centers where he has worked as a clinician as well as an operations and training administrator. Currently, Dr. Sharma is The President Elect of the Association for University and College Counseling Center Directors (AUCCD). In addition, Dr. Sharma has previously served as a Board member for the Association of Counseling Center Training Agencies (ACCTA) and in the Council Position of the Disaster Response Network for the Illinois Psychological Association. His special areas of interest include: trauma, multiculturalism and diversity, professional consultation and collaboration, eating disorders, training and supervision. In 2008, Dr. Sharma received the Distinguished Alumni award</td>
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AUCCCD conducts an annual survey of counseling center directors. The 2014 survey had a record 499 respondents, representing a total enrollment of 5,319,218 students, and 537,736 counseling center clients. The 499 schools represent a diverse range of higher learning institutions, from traditional colleges/universities, to community/technical colleges and art and design schools. The survey captures a voluminous amount of counseling center structure, policy, and service consensus data, including, but not limited to staffing, span of services, utilization rates, prevention efforts, and budget trends.

Mark Slomp, PhD  
Manager, Counseling Services, University of Lethbridge

Bio: I am a Registered Psychologist with a PhD in Education from University of Calgary. I was awarded the Rob Shea Research Award from the Canadian Association of Career Educators and Employers for research in the area of career practice. I am currently the Manager of Counseling Services at University of Lethbridge (Alberta, Canada).

Current projects: Recently our provincial government provided post-secondary institutions in our province with significant mental health grant funding in recognition of the growing utilization of mental health services on university campuses. We have used the funds to enhance mental health service provision (expand services). As well, we created a mental health steering committee as well as a number of task forces on campus to enhance services. We also used funds to implement the Healthy Minds and Healthy Bodies surveys. I’m interested in other such institution wide approaches to enhancing student mental health. As well, I am interested in knowing what other institutions are doing to creatively address the emotional wellbeing of students in proactive, cost-effective ways. My own particular area of interest is career counseling and the role it can play in helping students develop a sense of meaning and purpose in life (as a protective factor for emotional health).

Allison Smith, MPA  
Manager of Public Health Initiatives and Assessment, New York University

Bio: Allison Smith is the Manager of Public Health Initiatives and Assessment at New York University. She holds a Bachelor of Arts in Psychology and Master of Public Administration in Health Policy and Management, both from New York University. Her focus is implementing population-level health interventions and developing new strategies to activate young people to be engaged in their health. Her leadership to create an innovative campus-wide public health model, LiveWellNYU, resulted in the 2010 Gallagher Koster Innovative Practices in College Health Award from the American College Health Association (ACHA), a 2013 NASPA Excellence Award, and a SAMHSA funded grant, “LiveWellNYU: The Development and Evaluation of a Holistic Approach to Improving Wellness, Building Resilience, and Preventing Suicide”. Additionally, Allison serves as Chair of the ACHA Healthy Campus 2020 Coalition, Co-investigator/Assistant Director for the National College Depression Partnership, and on the ACHA-National College Health Assessment Advisory Committee.

Current projects: The fourth cohort of the National College Depression Partnership (ncdp.nyu.edu) concluded its formal Breakthrough Series participation in January 2015. Between September 2013-December 2014, over 73,000 students were screened in primary care, and 2576 students were tracked in the NCDP registry. Nearly 900,000 students are currently attending forty-two colleges or universities that have participated in an NCDP Collaborative. We are currently exploring models for a sustainable Learning Network to support the 42 partner schools and spread key learnings across higher education.
Launched in 2012, LiveWellNYU serves as a university-wide, multi-dimensional framework that leverages evidence-based, population-level public health interventions combined with innovative strategies for engagement. The name LiveWellNYU, and its distinct visual identity, serve as a brand for mobilizing the campus community. Framed as a for-students-by-students grassroots movement, LiveWellNYU is built around opportunities, information, and experiences that NYU students view as enriching their quality of life. This year, we launched the LiveWellNYU Network which now includes nearly 70 student organizations that have pledged to: 1) connect with students who are not already connected with campus life; and 2) look for opportunities to help their members reduce stress, build new social connections, and support their overall well-being. We also launched a new online Action Center (livewellnyu.com/get-involved) to support student leaders in maximizing their positive impact on their members. Over the last year, there were 30,413 unique users and 143,000 hits to LiveWellNYU.com, and 75 new pieces of content were produced. We also launched an online Faculty Action Center, nyu.edu/live-well-nyu, to help faculty make simple choices in their classroom that can impact their students’ mental health and wellbeing.

Michael Sonnleitner, PhD  
Regional Associate Director in the Medical Affairs Department, CNS, Takeda Pharmaceuticals

Bio: Michael Sonnleitner, PhD is a Regional Associate Director (Medical Science Liaisons) in the Medical Affairs department at Takeda Pharmaceuticals. In this role, he manages a team of MSLs and is responsible for the field-based execution of scientific and medical strategies within the CNS therapeutic area. Mike holds a PhD in Clinical Psychology from Nova Southeastern University.

Kelley Tipton, MPH  
Assistant Coordinator for the Suicide Prevention Project, University of Wisconsin-Milwaukee

Bio: Kelley Tipton is the Assistant Coordinator for University of Wisconsin-Milwaukee’s (UWM) Suicide Prevention Project. In this role, she provides leadership for project evaluation activities, coordinates development of educational materials, administers the Campus Connect Suicide Prevention training program, and provides primary supervision for student coordinators. Ms. Tipton received her B.S. from Kentucky State University (Frankfort, KY) and earned her MPH from West Chester University (West Chester, PA). Prior to joining UWM, she spent 9 years working with ECRI Institute (Plymouth Meeting, PA) as a healthcare technology analyst. She provided procurement advice to member hospitals, conducted comparative effectiveness reviews, and collaborated on manuscripts for the Annals of Internal Medicine and Journal of Clinical Epidemiology. In 2013, Ms. Tipton returned to her hometown of Milwaukee, WI where she spends time with family and friends, volunteers with a local food pantry, and participates in mental and physical health initiatives in the community.

Current projects: Currently, Tipton is involved in three relevant projects: (1) Screening for Depression and Suicidal Ideation in a College Health Center Medical Clinic; (2) Campus Assessment of Project Impacts, the USPPAKS (UWM Suicide Prevention Project Awareness and Knowledge Survey); and (3) Reaching out to Students in Distress: Engage and empower Faculty and Staff to take action.
Dapo Tomori, MD, MBA
Director,
CNS, Takeda Pharmaceuticals

Bio: He has an MBA degree from the Massachusetts Institute of Technology, Sloan School of Management. He also studied International Health Policy at The London School of Economics. He trained in Adult Psychiatry at the University of Michigan and obtained his M.D. degree from the University of Ibadan, in Nigeria. Dapo currently leads the neuroscience therapeutic area in the US Medical Affairs Division at Takeda Pharmaceuticals. His career integrates broad experience across Clinical Medicine, Health Policy and the Biopharmaceutical industry. Prior to joining Takeda in 2013, he led the Clinical Innovation group at Medco Health Solutions, where he focused on developing clinical decision support tools for healthcare providers, population-based interventions for large employer clients and personalized health solutions for patients. Previously, he worked in research and development in the neuroscience therapeutic area at Eli Lilly. Dapo previously served on the medical school faculty and clinical staff at the University of Michigan and the University of New Mexico, where he continues as an adjunct faculty member.

Marian Trattner, MSW
Coordinator,
Be That One Suicide Prevention Program,
University of Texas at Austin

Bio: Marian Trattner serves as the Coordinator for the Be That One Suicide Prevention Program, a program of the Counseling and Mental Health Center at The University of Texas at Austin (UT). The program utilizes a public health approach to implement suicide prevention strategies by peer outreach, education, and support. Ms. Trattner represents UT in the larger community and state of Texas through her membership with the Austin/Central Texas Suicide Prevention Coalition and through her service as the University Liaison for the state of Texas’s Suicide Prevention Council. Ms. Trattner is also the founder and moderator of the National College Student Suicide Prevention Listserv. In her free time, she enjoys spending time outside, trying new local coffee shops, volunteering in her local community, and travel.

Current projects: The Counseling and Mental Health Center’s Be That One Suicide Prevention Program at The University of Texas at Austin, has been developing programs that examine how to reach out to students and discuss mental health before they experience thoughts of suicide. This is being done through a new highly interactive program called, “Real Talk: How to Help Friends in Distress,” in which we use interactive facilitation and role-plays with students to discuss this important topic. We have also been working with our campus wide multi-issue bystander intervention initiative, BeVocal, to infuse suicide prevention into the work. From an environmental management and means reduction standpoint, we put crisis counseling lines on all of our campus parking garages and put important 24-hour services on all of our ID Cards.

Blake Wagner III
Creative Director,
Tinyshifts & Inkblots,
University of Michigan

Bio: Blake Wagner III is a recent graduate of The Ohio State University with a BA in Psychology. He has been active in designing student outreach programs and motivational speaking. The inkblots (“Tiny shifts can lead to big changes”) short film series grew out of his passion to merge often esoteric yet helpful evidence-based coping skills with a hip and digestible 2-to-4 minute film format. “It's like turning a pair of bellbottoms into skinny jeans -- same material, just re-crafted in a chic and student-friendly fashion.” The overarching goal is to promote a culture of positive coping, resiliency and appropriate help-seeking.
### Marcia Valenstein, MD, MS  
**Professor of Psychiatry, University of Michigan**  
**Research Scientist, VA Ann Arbor Healthcare System**

**Bio:** Marcia Valenstein is a Professor of Psychiatry at University of Michigan, and Research Scientist in the Department of Veterans Affairs Health Services Research and Development Service and the Serious Mental Illness Treatment Research and Evaluation Center, VA Ann Arbor Healthcare System. Dr. Valenstein has worked extensively in assessing the quality of mental health care for patients with depression and serious mental illness. She has also been instrumental in implementing innovative programs to improve the care of patients with depression and other disorders within healthcare systems and to identify and connecting community residents with need to appropriate treatment resources.

**Current projects:** One of her recent projects has involved peer linkage to care for newly returning National Guard Soldiers. Along with co-I, Dr. Eisenberg, she currently is working on a newly funded foundation grant to develop a Peer Support Intervention for College Student Veterans. She also has a VA funded study assessing mental health and academic achievement among a representative sample of College Student Veterans.

### Leigh White, MD  
**Director of Psychiatry, Student Health Services, Michigan State University**

**Bio:** Leigh White directs psychiatry at Michigan State University’s Student Health Services. She received her MD at the College of Human Medicine at MSU and completed internship and residency in General Psychiatry at the University of Colorado’s Health Science Center. She has worked in college health for about 20 years, first at the University of Colorado, and for the last fifteen years at Michigan State University.

**Current projects:** She currently serves as co-chair of the American Psychiatric Association’s College Mental Health Caucus, on the Advisory Board of the National College Depression Partnership and as the American Psychiatric Association’s representative to the Higher Education Mental Health Alliance (HEMHA). Interests include finding ways to meet the myriad of mental health needs that arise in the university community through optimizing collaboration of campus partners and innovative use of technology. Currently preparing to trial electronic Problem Solving Treatment in the health center (presented at last year’s symposium).
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<th><strong>Affiliation</strong></th>
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<tr>
<td>Sara</td>
<td>Active Minds</td>
<td><a href="mailto:sara@activeminds.org">sara@activeminds.org</a></td>
</tr>
<tr>
<td>Cyrille</td>
<td>Kognito</td>
<td><a href="mailto:cyrille@kognito.com">cyrille@kognito.com</a></td>
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<tr>
<td>Glenn</td>
<td>Kognito</td>
<td><a href="mailto:glenn@kognito.com">glenn@kognito.com</a></td>
</tr>
<tr>
<td>Katie</td>
<td>University of Michigan</td>
<td><a href="mailto:ktbeck@umich.edu">ktbeck@umich.edu</a></td>
</tr>
<tr>
<td>Joseph</td>
<td>School of the Art Institute of Chicago</td>
<td><a href="mailto:jbehen@saic.edu">jbehen@saic.edu</a></td>
</tr>
<tr>
<td>Stephanie</td>
<td>TIAA-CREF</td>
<td><a href="mailto:stephbr3@gmail.com">stephbr3@gmail.com</a></td>
</tr>
<tr>
<td>Sherry</td>
<td>University of Florida</td>
<td><a href="mailto:shbenton@ufl.edu">shbenton@ufl.edu</a></td>
</tr>
<tr>
<td>Jan</td>
<td>Pomona</td>
<td><a href="mailto:Jan.Collins-Eaglin@pomona.edu">Jan.Collins-Eaglin@pomona.edu</a></td>
</tr>
<tr>
<td>Thom</td>
<td>Margaret Clark Morgan Foundation</td>
<td>t <a href="mailto:craig@mcmfdn.org">craig@mcmfdn.org</a></td>
</tr>
<tr>
<td>Vicky</td>
<td>Wilmington College</td>
<td><a href="mailto:vicky_desensi@wilmington.edu">vicky_desensi@wilmington.edu</a></td>
</tr>
<tr>
<td>John Paul</td>
<td>University of Michigan</td>
<td><a href="mailto:jpdewitt@umich.edu">jpdewitt@umich.edu</a></td>
</tr>
<tr>
<td>Bobby</td>
<td>University of Michigan</td>
<td><a href="mailto:bdishell@umich.edu">bdishell@umich.edu</a></td>
</tr>
<tr>
<td>Sonia</td>
<td>University of Michigan</td>
<td><a href="mailto:doshisd@umich.edu">doshisd@umich.edu</a></td>
</tr>
<tr>
<td>Jon</td>
<td>Western Washington University</td>
<td><a href="mailto:Jon.Dukes@wwu.edu">Jon.Dukes@wwu.edu</a></td>
</tr>
<tr>
<td>Daniel</td>
<td>University of Michigan</td>
<td><a href="mailto:daneis@umich.edu">daneis@umich.edu</a></td>
</tr>
<tr>
<td>Todd</td>
<td>University of Michigan</td>
<td><a href="mailto:tfavor@umich.edu">tfavor@umich.edu</a></td>
</tr>
<tr>
<td>Wendy</td>
<td>Wilmington College</td>
<td><a href="mailto:wendyfisher8@yahoo.com">wendyfisher8@yahoo.com</a></td>
</tr>
<tr>
<td>Paul</td>
<td>Drexel University</td>
<td><a href="mailto:pcf36@drexel.edu">pcf36@drexel.edu</a></td>
</tr>
<tr>
<td>Elizabeth</td>
<td>University of California – Los Angeles</td>
<td><a href="mailto:egongguy@caps.ucla.edu">egongguy@caps.ucla.edu</a></td>
</tr>
<tr>
<td>John</td>
<td>University of Michigan</td>
<td><a href="mailto:gredenj@med.umich.edu">gredenj@med.umich.edu</a></td>
</tr>
<tr>
<td>Farrah</td>
<td>Western Washington University</td>
<td><a href="mailto:Farrah.Greene-Palmer@wwu.edu">Farrah.Greene-Palmer@wwu.edu</a></td>
</tr>
<tr>
<td>Will</td>
<td>University of Michigan</td>
<td><a href="mailto:wjsh@umich.edu">wjsh@umich.edu</a></td>
</tr>
<tr>
<td>Justin</td>
<td>University of Michigan</td>
<td><a href="mailto:jheinze@umich.edu">jheinze@umich.edu</a></td>
</tr>
<tr>
<td>Joseph</td>
<td>University of Michigan</td>
<td><a href="mailto:himlej@med.umich.edu">himlej@med.umich.edu</a></td>
</tr>
<tr>
<td>Shaun</td>
<td>University of Michigan</td>
<td><a href="mailto:hosh@umich.edu">hosh@umich.edu</a></td>
</tr>
<tr>
<td>Dori</td>
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<td><a href="mailto:dorih@bu.edu">dorih@bu.edu</a></td>
</tr>
<tr>
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<td>University of Michigan</td>
<td><a href="mailto:jamessj@umich.edu">jamessj@umich.edu</a></td>
</tr>
<tr>
<td>Courtney</td>
<td>Boston University</td>
<td><a href="mailto:cjoly@bu.edu">cjoly@bu.edu</a></td>
</tr>
<tr>
<td>Adam</td>
<td>University of Michigan</td>
<td><a href="mailto:adamkern@umich.edu">adamkern@umich.edu</a></td>
</tr>
<tr>
<td>Cheryl</td>
<td>University of Michigan</td>
<td><a href="mailto:kingca@med.umich.edu">kingca@med.umich.edu</a></td>
</tr>
<tr>
<td>Dan</td>
<td>University of Massachusetts Memorial Hospital</td>
<td><a href="mailto:Daniel.Kirsch@umassmemorial.org">Daniel.Kirsch@umassmemorial.org</a></td>
</tr>
<tr>
<td>Becca</td>
<td>Youth and Young Adult Depression and Suicide Prevention Program (YDSP)</td>
<td><a href="mailto:reblin@med.umich.edu">reblin@med.umich.edu</a></td>
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<td>Lipson</td>
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</tr>
<tr>
<td>Emily</td>
<td>Lustig</td>
<td><a href="mailto:elustig@umich.edu">elustig@umich.edu</a></td>
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<tr>
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<td>Ma</td>
<td><a href="mailto:tehsheng@umich.edu">tehsheng@umich.edu</a></td>
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<tr>
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<td>MacPhee</td>
<td><a href="mailto:jmacphee@jedfoundation.org">jmacphee@jedfoundation.org</a></td>
</tr>
<tr>
<td>Alison</td>
<td>Malmon</td>
<td><a href="mailto:alison@activeminds.org">alison@activeminds.org</a></td>
</tr>
<tr>
<td>Hara</td>
<td>Marano</td>
<td><a href="mailto:hmarano@psychologytoday.com">hmarano@psychologytoday.com</a></td>
</tr>
<tr>
<td>Roula</td>
<td>Markoulakis</td>
<td><a href="mailto:roula.markoulakis@mail.utoronto.ca">roula.markoulakis@mail.utoronto.ca</a></td>
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<td>Meyer</td>
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<td><a href="mailto:araemill@umich.edu">araemill@umich.edu</a></td>
</tr>
<tr>
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<td><a href="mailto:glen.moriarty@7cupsoftea.com">glen.moriarty@7cupsoftea.com</a></td>
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<td>Maggie</td>
<td>Mortali</td>
<td><a href="mailto:mmortali@afsp.org">mmortali@afsp.org</a></td>
</tr>
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<td><a href="mailto:barbaram@uwm.edu">barbaram@uwm.edu</a></td>
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<td><a href="mailto:parikhsa@umich.edu">parikhsa@umich.edu</a></td>
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<td>Patrick</td>
<td><a href="mailto:meganpat@umich.edu">meganpat@umich.edu</a></td>
</tr>
<tr>
<td>Paola</td>
<td>Pedrelli</td>
<td><a href="mailto:PPEDRELLI@mgh.harvard.edu">PPEDRELLI@mgh.harvard.edu</a></td>
</tr>
<tr>
<td>Julie</td>
<td>Posselt</td>
<td><a href="mailto:jrposselt@gmail.com">jrposselt@gmail.com</a></td>
</tr>
<tr>
<td>Yiqing</td>
<td>Qian</td>
<td><a href="mailto:yqq@umich.edu">yqq@umich.edu</a></td>
</tr>
<tr>
<td>Kathryn</td>
<td>Redd</td>
<td><a href="mailto:kredd@austin.utexas.edu">kredd@austin.utexas.edu</a></td>
</tr>
<tr>
<td>Erin</td>
<td>Reynolds</td>
<td><a href="mailto:ereynolds@athenian.wilmington.edu">ereynolds@athenian.wilmington.edu</a></td>
</tr>
<tr>
<td>Michelle</td>
<td>Riba</td>
<td><a href="mailto:mriba@umich.edu">mriba@umich.edu</a></td>
</tr>
<tr>
<td>Holly</td>
<td>Rider-Milkovich</td>
<td><a href="mailto:hburmeis@umich.edu">hburmeis@umich.edu</a></td>
</tr>
<tr>
<td>Karin</td>
<td>Roszell</td>
<td><a href="mailto:karoszel@umich.edu">karoszel@umich.edu</a></td>
</tr>
<tr>
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</tr>
<tr>
<td>Sara</td>
<td>Sarkey</td>
<td><a href="mailto:sara.sarkey@takeda.com">sara.sarkey@takeda.com</a></td>
</tr>
<tr>
<td>Vic</td>
<td>Schwartz</td>
<td><a href="mailto:vschwartz@jedfoundation.org">vschwartz@jedfoundation.org</a></td>
</tr>
<tr>
<td>Micky</td>
<td>Sharma</td>
<td><a href="mailto:sharma.369@osu.edu">sharma.369@osu.edu</a></td>
</tr>
<tr>
<td>Mark</td>
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<td><a href="mailto:mark.slomp@uleth.ca">mark.slomp@uleth.ca</a></td>
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<td><a href="mailto:allison.smith@nyu.edu">allison.smith@nyu.edu</a></td>
</tr>
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<td>Michael</td>
<td>Sonnleitner</td>
<td><a href="mailto:michael.sonnleitner@takeda.com">michael.sonnleitner@takeda.com</a></td>
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</tr>
<tr>
<td>Marian</td>
<td>Trattner</td>
<td><a href="mailto:mtrattner@austin.utexas.edu">mtrattner@austin.utexas.edu</a></td>
</tr>
<tr>
<td>Marcia</td>
<td>Valenstein</td>
<td><a href="mailto:valensteinmarcia@gmail.com">valensteinmarcia@gmail.com</a></td>
</tr>
<tr>
<td>Blake</td>
<td>Wagner III</td>
<td><a href="mailto:inkblots@umich.edu">inkblots@umich.edu</a></td>
</tr>
<tr>
<td>Leigh</td>
<td>White</td>
<td><a href="mailto:Leigh.White@hc.msu.edu">Leigh.White@hc.msu.edu</a></td>
</tr>
</tbody>
</table>
Additional Resources and References

Resources Mentioned During Discussions:

1. Gatekeeper Behavior Scale (see 1 and 2 in Appendix)
2. A Strategic Primer on College Student Mental Health:
3. SAMSHA Suicide Prevention app
   http://store.samhsa.gov/product/Suicide-Assessment-Five-Step-Evaluation-and-Triage-SAFE-T-/SMA09-4432
4. RAINN: phone and on-line 24 hr helplines as well as zipcode searcher for local confidential resources
   www.rainn.org/get-help
5. National Domestic Violence Hotline: Also has chat and phone crisis lines: www.thehotline.org
6. Love Is Respect: resources for support and hotlines (chat, text, phone) specifically for late adolescents
   www.loveisrespect.org/get-help/get-help
7. White House survey (notalone.gov)
8. The Hunting Ground (Trailer: www.thehuntinggroundfilm.com): shows relationship between victims and administration
13. COS Pivot: pivot.cos.com/funding_main
14. Center for Collegiate Mental Health: ccmh.psu.edu
15. Veterans Crisis Line Chat Training Program: www.veteranscrisisline.net/about/faqs.aspx
1. Validity Abstract


Learning Objective: At the end of this presentation the participant will be able to: summarize the components of a new validated scale designed to measure the impact of gatekeeper training programs and how to integrate the assessment tool into their work and research studies.

Currently, there are no validated measures to assess gatekeeper skills. This presentation overviews the first validated scale to measure the impact of gatekeeper training programs. The 11-item Gatekeeper Intentions Scale (GIS) measures learner’s behavioral intent and skill to aid people in psychological distress, including those at risk for suicide, and assist them in finding appropriate mental health services. The GIS’s items measure changes in attitudes and intentions by assessing three dimensions: learner preparedness and likelihood to engage in gatekeeper behaviors and gatekeeper efficacy. These components were derived by drawing from two prevailing motivation theories. Specifically, Social Cognitive Theory which states that preparedness acts as a belief variable that influences one’s self-efficacy, which in turn influences ability to complete a task. Reasoned Action Theory, which incorporates behavioral intentions and preparedness stating that an individuals’ self-reported level of intended preparedness acts as a measure of their perceived behavioral control, which, in turn, influences their intentions to perform an action. As an individual’s intention to perform an action increases, their likelihood of engaging in the behavior increases. To validate the scale, 8,931 users completed pre-training, post-training, and 3 to 12 month follow-up GIS surveys. All learners took one of five of Kognito Interactive At-Risk training simulations for university faculty/staff or students, high school educators, or middle school educators from 2010 to 2013. The GIS’s construct and content validity was assessed via confirmatory factor analysis (CFA). Criterion-validity was examined via correlations with behavioral measures, and convergent validity was assessed via correlations with similar but distinct constructs. Compared to a one, two, and four factor models, the three factor CFA model based on the subscales of preparedness, likelihood and self-efficacy fit the data best. Factor loadings showed all items correlated highly with theoretical constructs from which the items were derived (r ≥ 0.84, p < .001). The full 11-item GIS was found to have high internal consistency (α = .93). Criterion-related validity was established for likelihood to discuss concerns (measured in the post-training survey) significantly related to actually approaching people that they believe are in psychological distress (r = .219, p < .001; measured in the follow-up survey). Likelihood to refer someone to psychological services significantly correlated with the actual number of people referred (r = .235, p < .001). Convergent validity was established via a robust correlation between self-efficacy in motivating someone to seek help and general self-efficacy (r = .519, p < .001). The GIS appears to be a valid tool in measuring the impact of online gatekeeper training simulations and holds promise for assessing the efficacy of other delivery methods.
# 2. Gatekeeper Behavior Scale

Gatekeeper Behavior Scale  
*This tool is freely available for noncommercial use and dissemination. See current citation at bottom of page.* 
Please select the number that corresponds to the label that most represents you.

<table>
<thead>
<tr>
<th>Subscale</th>
<th>Number</th>
<th>Item</th>
<th>Response Scale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preparedness</td>
<td>1</td>
<td>How would you rate your preparedness to:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Recognize when a student’s behavior is a sign of psychological distress</td>
<td>1-Very Low</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Recognize when a student’s physical appearance is a sign of psychological distress</td>
<td>2-Low</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>Discuss with a student your concern about the signs of psychological distress they are exhibiting</td>
<td>3-Medium</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>Motivate students exhibiting signs of psychological stress to seek help</td>
<td>4-High</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>Recommend mental health support services (such as the counseling center) to a student exhibiting signs of psychological distress</td>
<td>5-Very High</td>
</tr>
<tr>
<td>Likelihood</td>
<td>6</td>
<td>How likely are you to discuss your concerns with a student exhibiting signs of psychological distress?</td>
<td>1-Very Unlikely</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>How likely are you to recommend mental health/support services (such as the counseling center) to a student exhibiting signs of psychological distress?</td>
<td>2-Unlikely</td>
</tr>
<tr>
<td>Self-Efficacy</td>
<td>8</td>
<td>Please rate how much you agree/disagree with the following statements:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>I feel confident in my ability to discuss my concern with a student exhibiting signs of psychological distress</td>
<td>3-Agree</td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>I feel confident in my ability to recommend mental health support services to a student exhibiting signs of psychological distress</td>
<td>4-Strongly Agree</td>
</tr>
<tr>
<td></td>
<td>11</td>
<td>I feel confident that I know where to refer a student for mental health support</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>I feel confident in my ability to help a suicidal student seek help</td>
<td></td>
</tr>
</tbody>
</table>

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