

College Mental Health Research Symposium

Sunday, March 19 & Monday, March 20, 2017

Institute for Social Research

University of Michigan, Ann Arbor

Welcome and Overview

- 7th annual symposium
- Unique opportunity for researchers, clinicians, administrators, advocates, and others to meet, discuss, and collaborate
- Diverse audience brought together by a shared goal to improve college student mental health
- Special acknowledgments:
 - UM Depression Center
 - UM Institute for Social Research

Motivation

*How can we invest most efficiently in the mental health of college students?
What are the returns from potential interventions?*

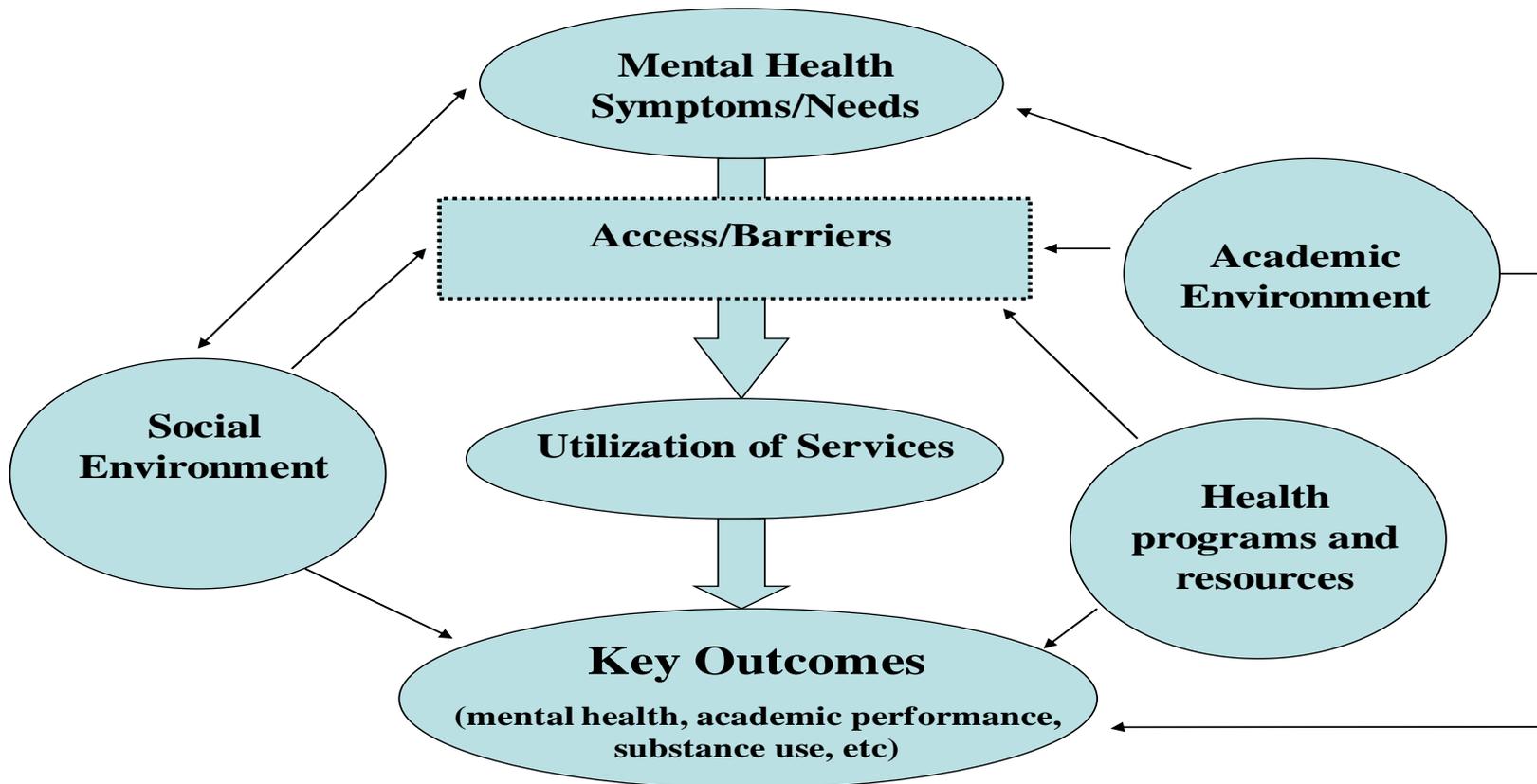


Design and evaluate programs
and interventions



Collect descriptive data

Opportunity at Colleges



Overarching Questions for Research Symposium

- What new research and data are most needed?
- How can we share research and data more effectively with practitioners?
- What are new opportunities for collaboration?
- Other suggested questions?

Symposium Participants

- >20 colleges/universities
- ~15 organizations
- Advocates
- Campus practitioners
- Clinicians
- Faculty/researchers
- Health IT
- Graduate and undergraduate students
- Others?

Symposium Format

- Two full group sessions (Sunday)
 - Introductory presentation(s)
 - Full group discussion
- “Innovation Tournament” (Monday)

Guidelines for Discussion

- Interactive and inclusive
- When sharing information, be concise and refer to resources for learning more
- Notes will be taken and shared later

Today

- The State of Campus Mental Health
- Full Group Session #1
 - *Student Mental Health in Today's Climates (political, national, campus)*
- Break
- Full Group Session #2
 - *Technology to Support Student Mental Health*
- Reception and Dinner

Monday

- Breakfast and Day 2 Overview
- Innovation Tournament

How might we create an ideal campus mental health system, given the increasing demand for mental health services and the emerging technologies and programs available? What additional data and research do we need most urgently to answer this question more confidently?

- Wrap-Up

PAUSE...

- Questions or comments?
- Next up: The State of Campus Mental Health

The State of Campus Mental Health

Daniel Eisenberg & Sarah Ketchen Lipson (Healthy Minds Network)

Laura Horne (Active Minds, Inc.)

Mary Hoban (American College Health Association)

Center for Collegiate Mental Health

Nance Roy (JED Campus Program)

Guiding Questions

- *What's new with your organization?* (key updates, new developments, initiatives, collaborations, etc.)
- *What interesting things are you seeing in your work?* (key findings, take-aways, trends, progress made, needs identified, etc.)
- *What are the biggest challenges your organization is facing now and moving forward?*

The Healthy Minds Network

The Healthy Minds Network for Research on Adolescent and Young Adult Mental Health

Taking a public health approach, HMN focuses on 3 main objectives:

1. producing knowledge (research)
2. distributing knowledge (dissemination)
3. using knowledge (practice)

Website: healthymindsnetwork.org

HMS 2015-2016 National Data Report

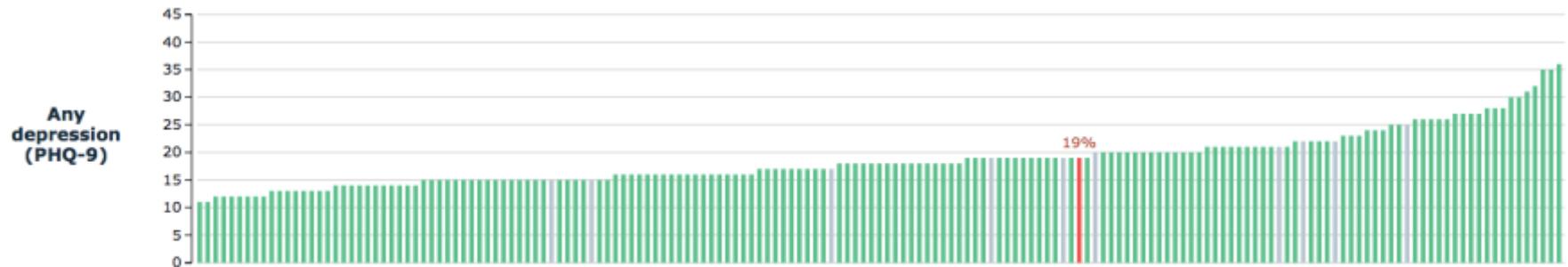


HMS 2015-16—Overall Findings (N=34,217)

Estimated values of selected measures	Percentage of students
Major depression (positive PHQ-9 screen)	10%
Depression overall, including major and moderate (positive PHQ-9 screen)	25%
Anxiety disorder (positive GAD-7screen)	21%
Eating disorder (positive SCOFF screen)	8%
Non-suicidal self-injury (past year)	20%
Suicidal ideation (past year)	10%
Lifetime diagnoses of mental disorders	30%
Psychiatric medication (past year)	18%
Mental health therapy/counseling (past year)	23%
Any mental health therapy/counseling and/or psychiatric medication among students with positive depression or anxiety screens (past year)	49%

HMS—Variations across Schools

University of Michigan (2016)

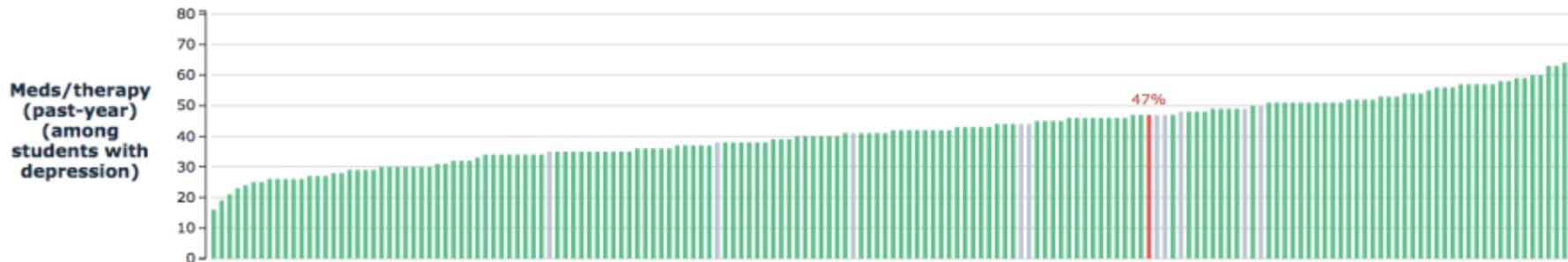


COMPARE TO OTHER SCHOOLS

Percentage of students from all schools to date in the Healthy Minds Study (University of Michigan in red) who screened positive for any depression (PHQ-9) in all survey years.

- Other institutions
- Peer institutions ?
- University of Michigan

University of Michigan (2016)



HMN—New Findings and Progress Made

- HMS 2015-2016 National Data Report
- Selected findings from new HMS ‘elective’ modules
Substance use, sleep, eating/body image, sexual assault, overall health, knowledge and attitudes, upstander/bystander, campus climate, competition, resilience and coping, persistence and retention, financial stress
- Sexual assault in past year: 2.8%
- Insomnia severity index ≥ 11 (range 0-28): 23.4%
- AUDIT ≥ 8 (range 0-40): 39.6%

HMN—What's New?

- AY 2016-17 biggest year for HMS to date (>50 participating campuses)
- HMS JED Campus Program partnership
- HMS CCMH partnership
- Writing Lab at University of Michigan
- “Harnessing mobile technology to reduce mental health disorders in college populations” (NIMH R01 application)

HMN—Biggest Challenges

- Expansion of HMS (particularly to new “types” of institutions)
- Communicating importance of this research to high-level campus administrators (economic case)
- Pairing HMS with online resources

Active Minds

Active Minds: changing the perception about mental health on college campuses.

Active Minds is a nonprofit organization that empowers students to speak openly about mental health in order to educate others and encourage help-seeking.

Website: <http://www.activeminds.org/index.php>



400+
CAMPUS CHAPTERS

12,400
STUDENT MEMBERS

5.4 million
PEERS ON CAMPUS

18 HBCUs

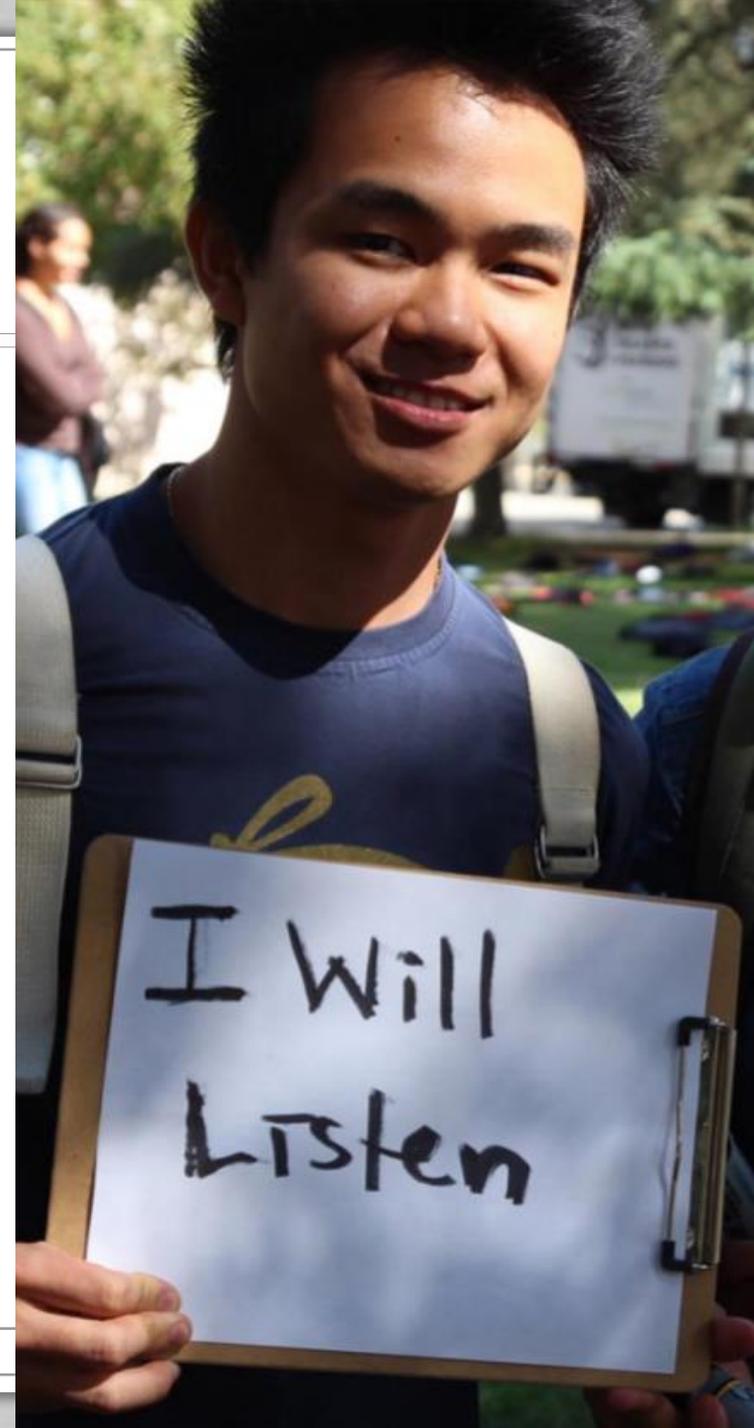
35 Community
Colleges

63 Hispanic Serving
Institutions



Reaching Diverse Populations

- Part of California initiative called Each Mind Matters: California's Mental Health Movement.
- Piloting a training to help student leaders identify and reach underserved, diverse student populations on campus.
- Partnering with RAND to conduct a longitudinal study on 12 college campuses. More than 1,000 students enrolled.
- Will quantify Active Minds' impact on mental health stigma, mental health knowledge, and help-seeking behaviors.



2017 Emerging Scholars Fellowship Projects

- **Social Media Communication about Bipolar Disorder: Implications for Stigma and Social Support**
- **Bridging the Gap on the Trigger Warning Debate**
- **Mental Health and Sexual Assault on University Campuses**



- **Transgenerational Perceptions of Mental Health Among South Asians** **Stephen C. Rose Legacy Scholar, supported by The Steve Fund*
- **Building Resilience and Emotional Regulation through Interactive Journaling**
- **Dear Emory: Exploring Student Narratives through Performance**

How to Help a Friend

- **Kognito Challenge**

- For 10 weeks, Active Minds and Kognito offered *At Risk for Students* to campuses with Active Minds chapters.
- 7,000 students from 205 colleges completed it
- 89% of participants said they're now better prepared to provide help.

- **Be a Friend Resources**

- From listening to supporting a friend in help-seeking and recovery to self-care
- www.activeminds.org/BeAFriend



Policy and Institutional Advocacy

FEATURED CAMPAIGNS

- **Transform Your Campus** supports student-led policy advocacy through campaign-specific resources and technical assistance.
- 119 chapters participating; 30 completed initiatives since December 2015.
- Student interest in *leave of absence policies, adding counseling center staff, and student fees* to support mental health.

ID Card Campaign

These resources will support your efforts to have mental health crisis numbers printed on the backs of ID cards.

Orientation/FYE Campaign

These resources will support your efforts to incorporate mental health education into new student orientation or a first year experience course.

Leave of Absence

Specialized resources to help you advocate for equity in leave of absence and petition to return policies.

Means Reduction

Specialized resources to minimize risk of suicide in campus environment.

Coming Soon!

The Margaret Clark Morgan Foundation

www.activeminds.org/transform

Mental Health Story-Sharing

- **Our Stories, Our Strength** – virtual and in-person workshops that train participants to tell their mental health stories in safe and empowering ways.
- 4 weeks in length, 2-3 hours per week
- Features videos, audio clips, discussion questions, activities, and polls

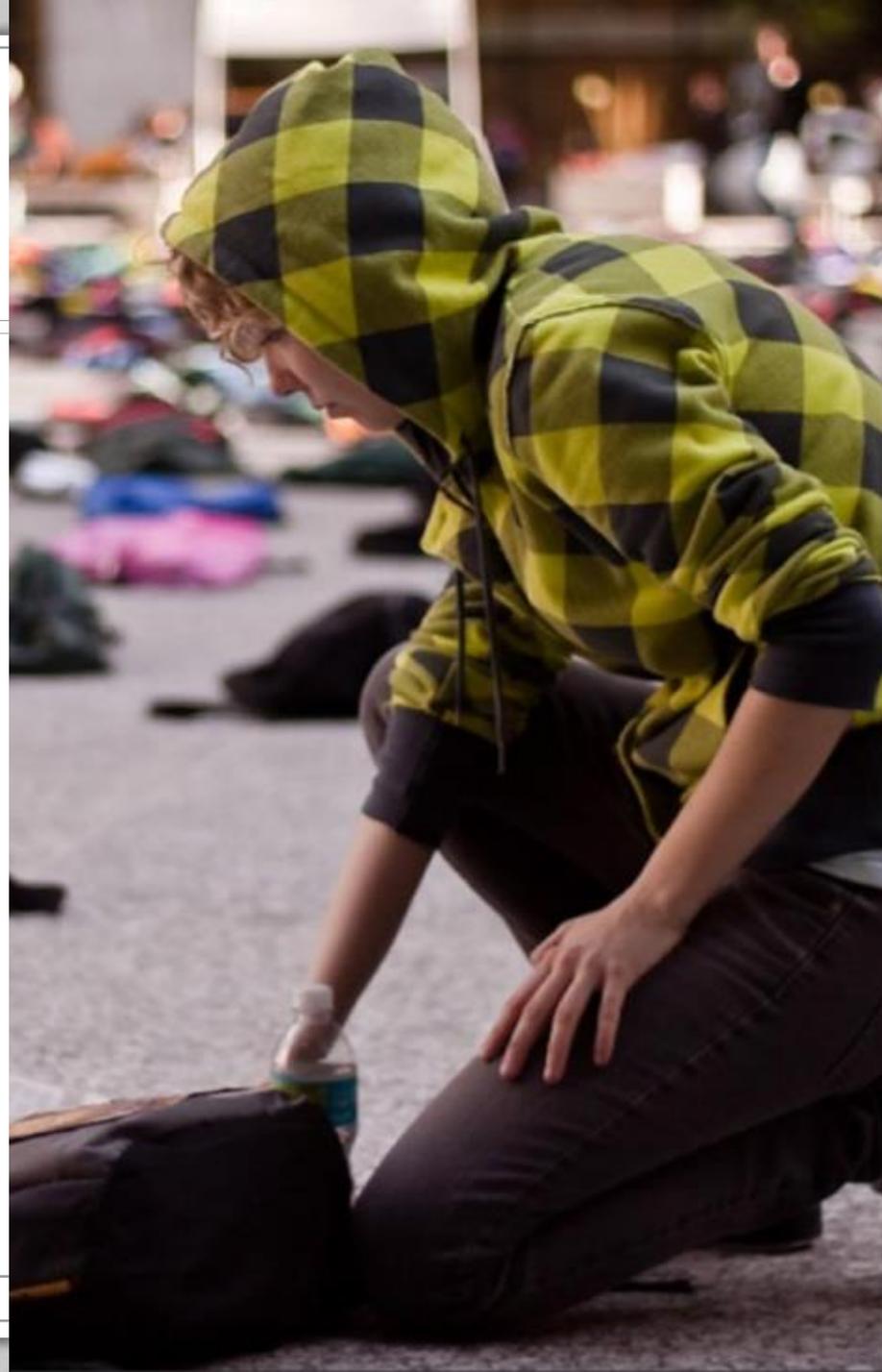
“

This workshop was the single most invaluable experience I have had to help me tell my story. It provides important tools that all storytellers should have.

JARED MOSKOWITZ, TUFTS UNIVERSITY

Suicide Prevention and Postvention

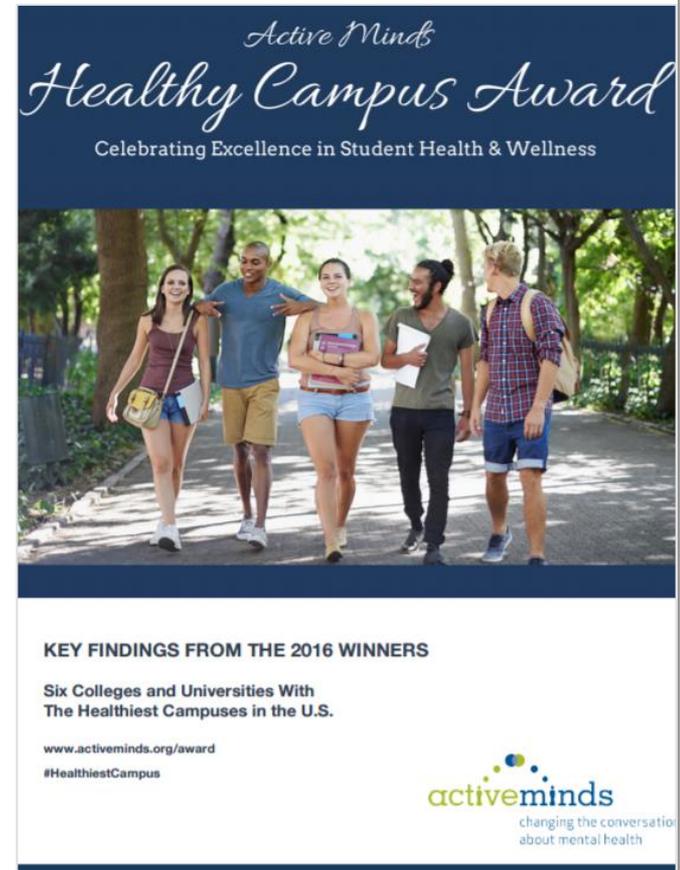
- **Send Silence Packing**
 - Current tour (March – May) through South/SW and West/NW
 - Fall 2016 tour – Midwest to California
 - Distributed 45,000 materials at 27 stops in 2015-2016
- ***A Student's Guide to Suicide Postvention on Campus*** – available in April



Active Minds Healthy Campus Award

- Recognizes and celebrates U.S. colleges and universities that demonstrate excellence in prioritizing and promoting the health and well-being of students.
- Institutions assessed across eight award criteria, with winners chosen by a review panel made up of prominent researchers, students, and health and higher education experts.
- Applications open in October 2017.
- www.activeminds.org/award

The
Margaret Clark Morgan
Foundation



Active Minds
Healthy Campus Award
Celebrating Excellence in Student Health & Wellness



KEY FINDINGS FROM THE 2016 WINNERS

Six Colleges and Universities With
The Healthiest Campuses in the U.S.

www.activeminds.org/award
#HealthiestCampus

activeminds
changing the conversation
about mental health

Other Key Initiatives and Collaborations

- Student Leadership Development/Training
- Mental Health Awareness Campaigns
- Collaborations with Student Athletes, Greek Life Community, Honors Societies, Student Government, and the Collegiate Recovery Community

Looking Ahead

Diversify

Ensure diversity and inclusion in membership and program offerings.

Evaluate

Implement new measures and tools for evaluating programs.

Partner

Strategically partner with peers in the mental health community.

Questions for Future Research & Funding

- Diversity and inclusion
 - How is mental health discussed and coped with among students of color, male-identifying students, first-generation students, etc.?
 - How to make campus mental health programs/activities more inclusive?
 - Two-year and minority-serving institutions
- Intersectionality of student mental health and retention, substance abuse, sexual assault, identities, etc.
- Minimizing campus trauma related to current events and hate crimes (i.e. safe spaces, trigger warnings)
- Transitions before and after college
- College-aged students not attending college (i.e. mental health in the workplace for young adults)



ACHA Updates

Advocacy Updates

Affordable Care Act/American Health Care Act

- **Mental Health Parity**
- **High Quality Coverage Minimums**
- **Eligibility for a Parent's Plan until Age 26**
- **Student Health Insurance Benefit Plans in lieu of government funded care**
- **Tax Credits for SHIBPs**

Mental Health on Campus Improvement Act

Medical Records Privacy

Education Updates

ACHA 2017

Austin, TX May 30 - June 3

IGNITING INNOVATION

ACHA 2017 Annual Meeting:

- Keynote speaker: **William McRaven**, chancellor of the University of Texas system and a retired U.S. Navy four-star admiral.
- Closing Presidential Session speaker will be **Eric Deggan** from National Public Radio.
- This year's Dorosin Memorial Lecture "Discovering Bias: Challenges and Opportunities for Organizational Diversity," will be presented by **Keith Maddox**, PhD from Tufts University.
- More than a dozen **pre-conference workshops** will be offered in addition to more than 140 general sessions.

Integration of Counseling and Health Services

Research Updates

ACHA National College Health Assessment III

- **Expected 2018 (pilot testing in Fall 2017)**
- **Added measures on:**
 - **Psychological distress**
 - **Resiliency**
 - **Psychological well-being**



Connected College Health Exchange (AKA Data Warehouse)

Data Sources

- **Institution Generated:**
 - Clinical EHR data (ICD-10, CPT)
 - Student demographic data
 - Claims data
 - CCAPS data
- **ACHA Generated:**
 - NCHA
 - Clinical Benchmarks
 - Institutional Profile Data
- **Government Generated:**
 - IPEDS



American College Health Association
National College Health Assessment



Connected College Health Exchange (AKA Data Warehouse)

Impact Student Success:

- Create a system to measure health outcomes and academic success
- Build a national health and wellness surveillance network across universities
- Enhance student health outcomes through peer learning
- Benchmark college health and wellness services nationally
- Improve our ability to inform and influence national health care policy

Status & Next Steps

- A number of workgroups have been formed to provide guidance over various aspects of the project. Approximately 35 universities are currently involved in the workgroups.
- Face-to-face leadership meeting was held in January and teams continue their work to create the initial functional requirements. Next leadership meeting to be held in June
- Contractors are being added this spring to help provide dedicated project management and fundraising capabilities
- Currently targeting late Fall 2018 for testing and Late 2019 / Early 2020 for roll-out
- If your institution is interested in serving in the pilot, please contact Mary Hoban at mhoban@acha.org

Overall Project Lead: Sarah Van Orman, MD, MMM, University of Wisconsin-Madison

Administrative Team: Ralph Manchester, MD, University of Rochester

Clinical Team: Chris Holstege, MD, University of Virginia

Medical Sub-Team: Giang Nguyen, MD, MPH, University of Pennsylvania

Mental Health Sub-Team: David Reetz, PhD, Rochester Institute of Technology

Population Health Team: Susan Hochman, MPH, University of Texas at Austin

Technology Team: Laura Barnes, PhD, University of Virginia

Epidemiology Sub-team: Craig Roberts, MS, PA-C, University of Wisconsin-Madison

Research Update

National Faculty & Staff Health Assessment
(NFSHA)

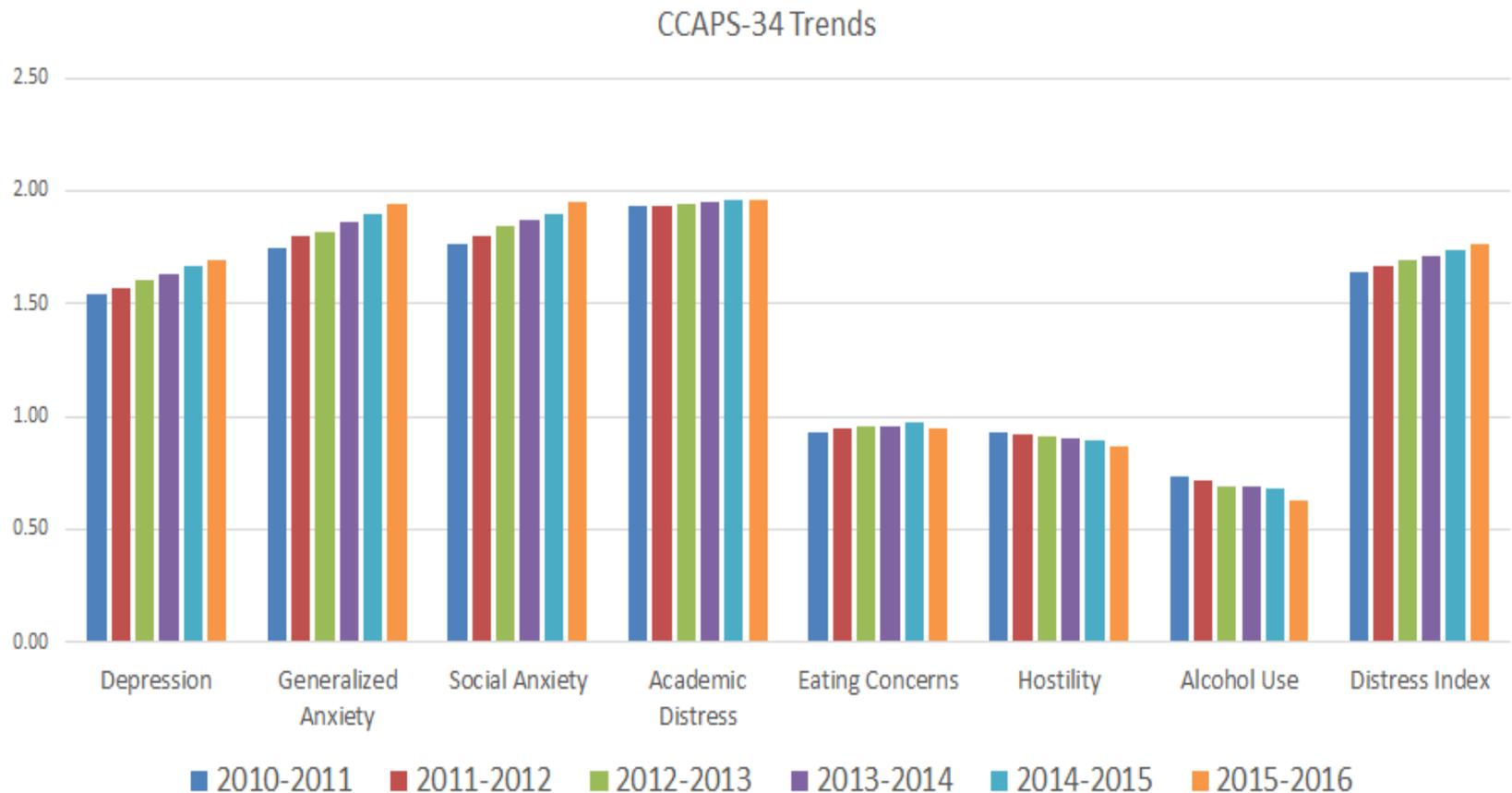


Clinical Benchmarking

Center for Collegiate Mental Health (CCMH)

- Largest practice research network of counseling centers
 - 420+ centers participating nationwide
 - 150,000+ student clients contributing data each year
 - Standardized data collected through routine practice in counseling centers
- Goal:
 - To expand the knowledge of work being done in a clinical setting using research as a vehicle for expansion
 - Generate better outcomes reporting, standardized assessment tools, therapeutic models, and ascertain what services are needed within a university community
- Website: ccmh.psu.edu

Trends Over Time: Distress



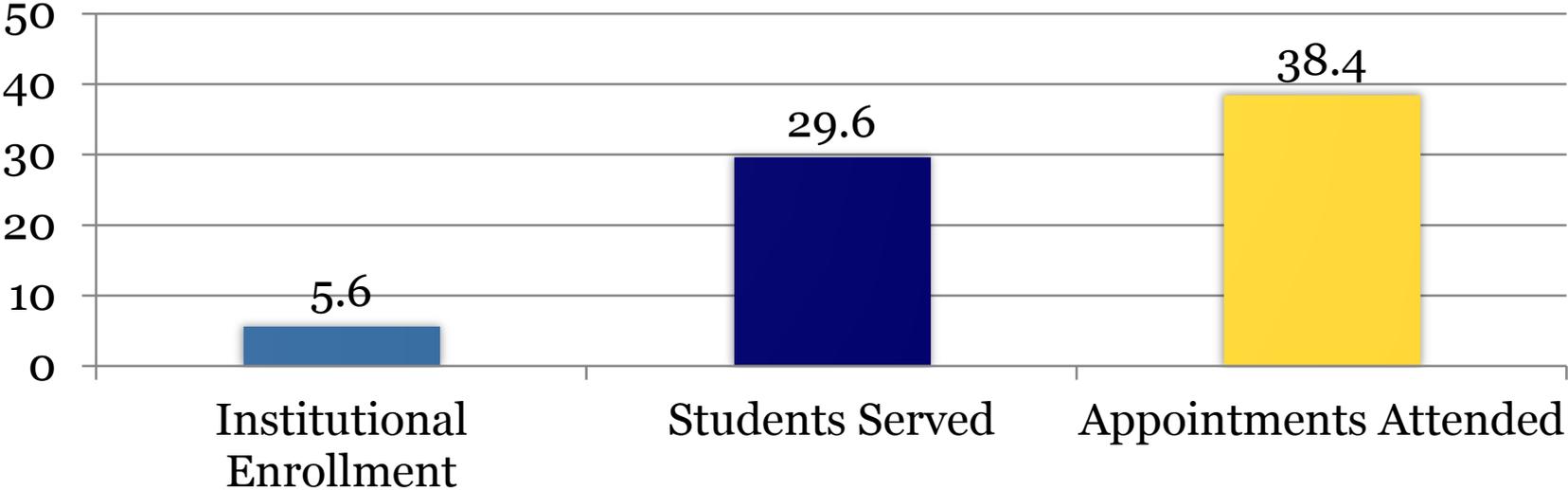
Trends Over Time: Chronicity

- Prior treatment rates remained stable:
 - prior counseling: 50%
 - psychiatric medications 33%
 - hospitalizations 10%
 - Implication: chronicity, as measured by prior treatment, is NOT getting worse

Trends Over Time: Threat to Self

- Increases in lifetime prevalence of “threat to self” behaviors with low base rate
 - Non-suicidal self-injury
 - Suicidal ideation
 - Suicide attempts

Counseling Center Utilization and Enrollment



Percent increases from 2009 to 2015

Counseling Center Utilization

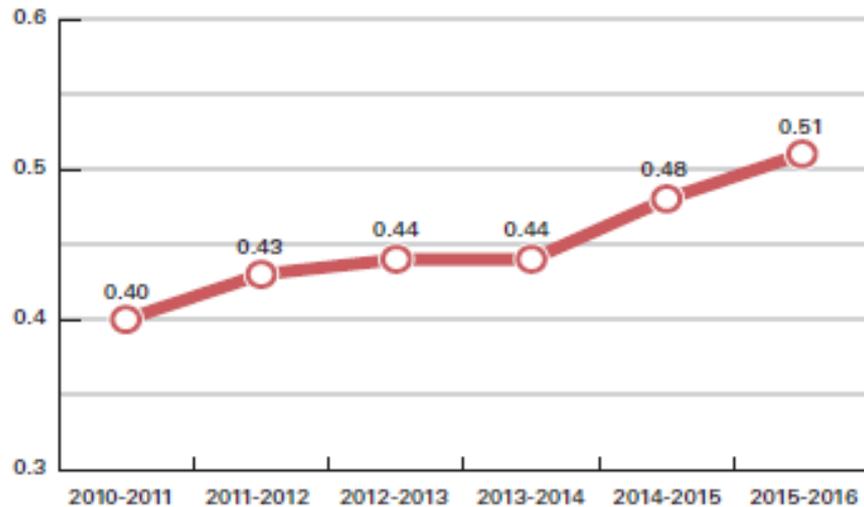
- Most common number of appointments is 1
- Average of ~6 appointments
- 20% of clients utilize 56% of all sessions
- 5% of clients utilize 23% of all sessions
- Students with threat-to-self characteristics utilize 20-30% more services

Impact of Increasing Demand by High Risk Clients

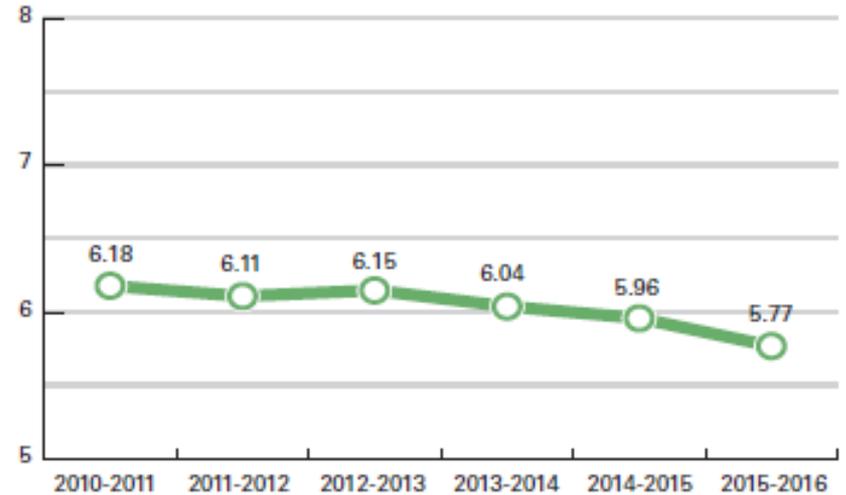
- Rapid access- services available within a 5 day window
 - e.g. crisis, triage, screening
- Routine- all other services without guaranteed availability within 5 days

Impact of Increasing Demand by High Risk Clients

Annual Rapid-Access Hours per Client



Annual Routine Hours per Client



Current Work

- Reports
 - National comparison report
 - Change report
- American Foundation for Suicide Prevention grant
- Characterization of utilization



Program Overview



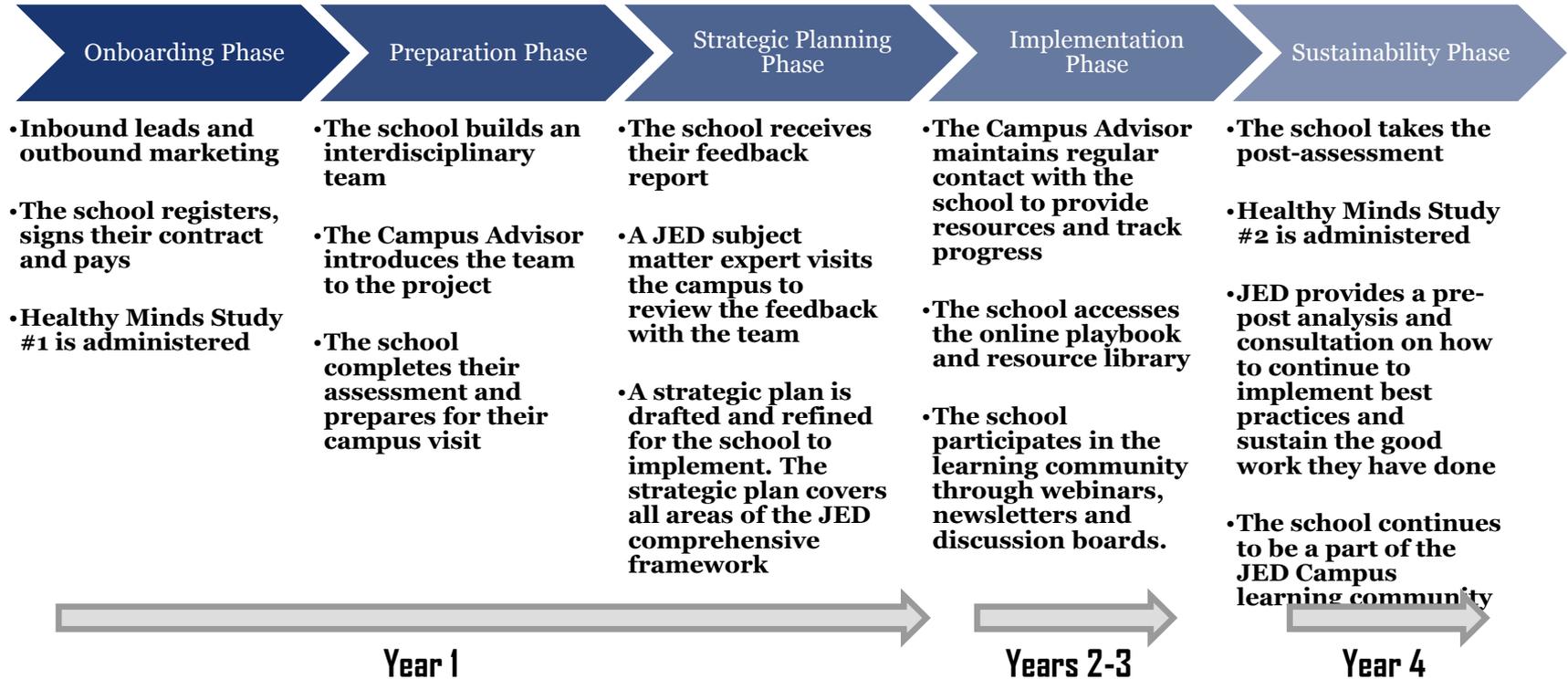
CAMPUS

Making a difference

Through their work with JED Campus, schools are actively working on strategic plans aimed at implementing appropriate policies and programs to best support their students' emotional well-being and help to prevent suicide and serious substance abuse.



JED Campus Journey





Program Updates



CAMPUS

Program Updates

- 165 schools representing over 1.9 million students are spread across 35 states

- Current Cohorts:

Washington (13), Virginia (6), Claremont (7), Ohio (10), Hillman(5) & Michigan (15)

- Additional cohorts in process:

OK (6), NJ (3) and CO (3)

- Potential cohort interest:

Utah and Indiana



Making an Impact



CAMPUS

Why we exist

- Nearly 40% of schools did not have a task force or committee working on campus wide strategy and planning related to emotional health and substance abuse prevention.
- Of schools that did have a Task Force, 71% said they had not gone through a formal strategic planning process.
- 69% of schools have not conducted an environmental scan for potential access to lethal means.
- 25% of schools do not offer any gatekeeper training, and of those that do, only a small percentage of faculty, staff and students are actually trained.

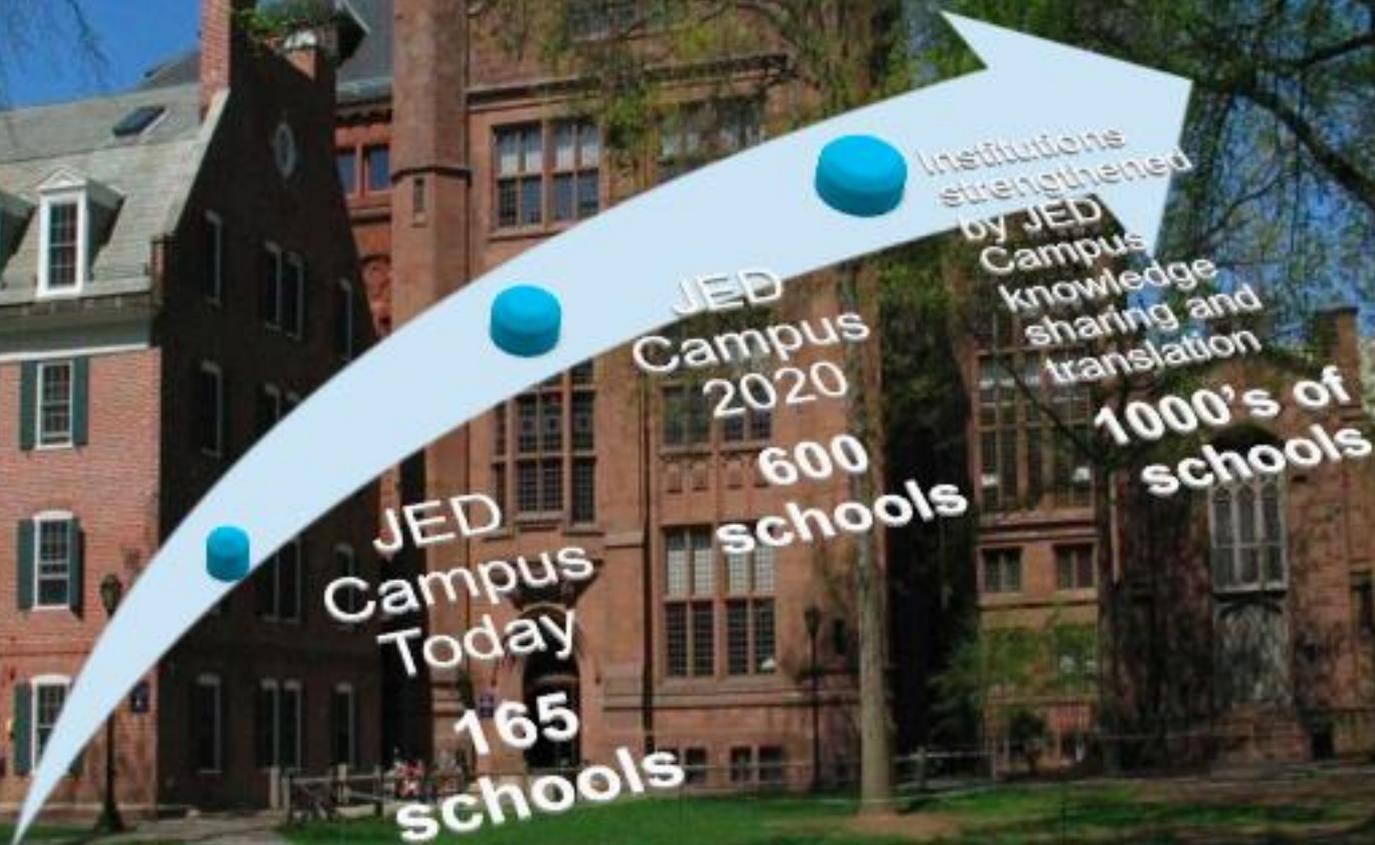
Why we exist

- 92% of schools do not make naloxone available to students at high risk for opiate overdose.
- 46% of health services do not screen for mental health or substance use, thereby missing the opportunity to identify many students who may otherwise fall through the cracks.
- 33% of schools lack a medical amnesty policy allowing students to request care for a substance-related medical emergency without being subject to disciplinary action.

Why we exist

- 81% of schools do not talk to students about the risks and dangers of opiate misuse – especially when used in non-pill form and/or combined with alcohol or other substances.
- 42% of schools do not have a policy requiring a student who overdoses to be evaluated for serious substance use.
- 79% do not have a prescription drug collection programs to reduce the risk of prescription drug misuse.
- 25% of schools lack programming to educate students, faculty and staff about the link between good physical and emotional health and academic success.

JED is creating a movement in higher ed



Thank You!

For more information, please visit www.thecampusprogram.org

Dr. Nance Roy
Clinical Director
nroy@jedfoundation.org

Lee Swain
Assistant Director, JED Campus
lswain@jedfoundation.org

Student Mental Health in Today's Climates

Full Group Session #1

Introductory presentation:

Alfiee M. Breland-Noble (The Steve Fund)



Break



Technology to Support Student Mental Health

Full Group Session #2

Introductory presentations:

Emily Lattie (CBITS)

Holly Rider-Milkovich (EverFi)

Bruce Skoletsky (Kognito)

Matthew McEvoy & Stephanie Walker (Morneau Shepell)

Using Behavioral Intervention Technologies

Emily G. Lattie, Ph.D.



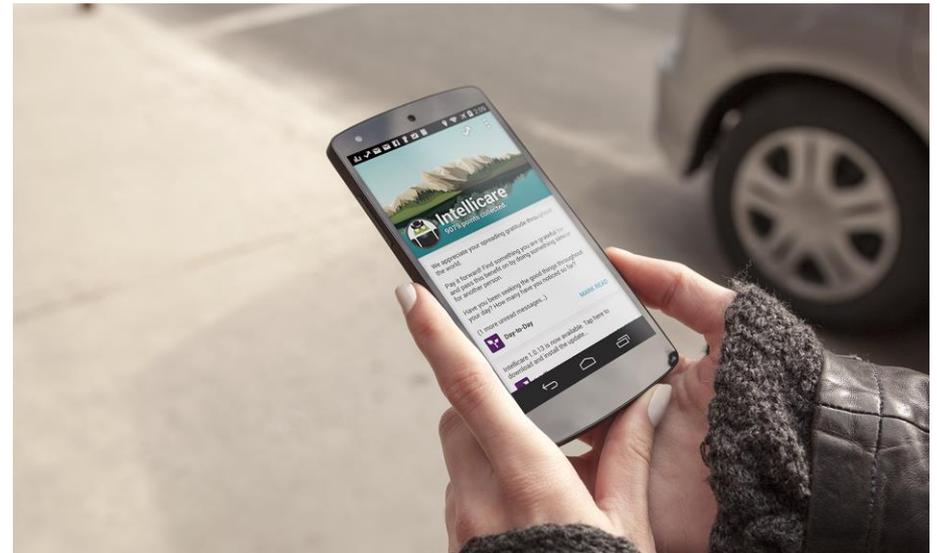
M Northwestern Medicine[®]
Feinberg School of Medicine



**Most college students
are digital natives**

IntelliCare

Suite of **12 mobile applications** that contain **interactive tools** based in **eclectic treatment techniques** for depression and anxiety



<https://intellicare.cbits.northwestern.edu/>

Mobile App Suite

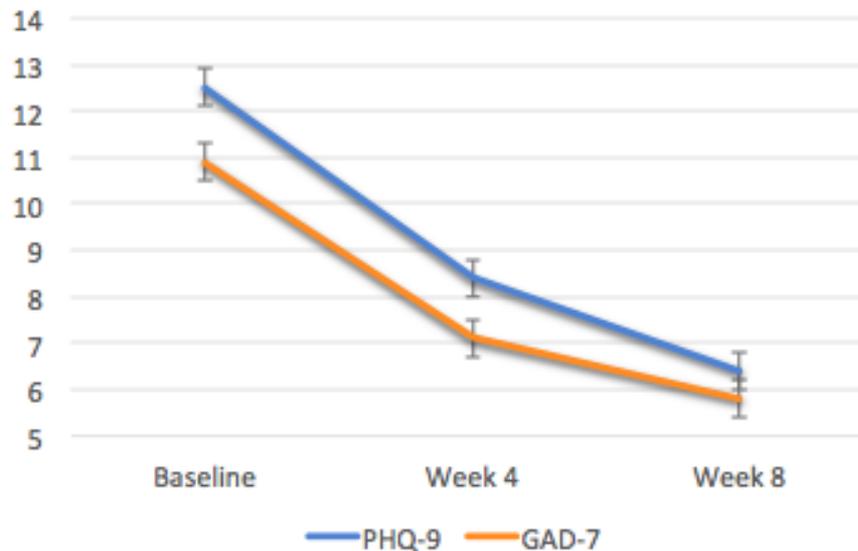


- Thought Challenger** practice cognitive restructuring
- Daily Feats** check off instrumental/activities of daily living
- Purple Chill** audio and visual exercise for relaxation
- My Mantra** create positive self-statements w/ pictures
- Aspire** identify values, track value-driven activities
- Slumber Time** monitor sleep, track sleep hygiene behaviors
- Day to Day** daily tips to practice CBT & positive psych skills
- Social Force** ID key supports & increase connectedness
- Worry Knot** decrease responsiveness to worry w/ exposure
- iCope** create and schedule coping cards
- Boost Me** link activity & mood, schedule positive activities
- Move Me** links exercise & mood, schedule exercise
- IntelliCare Hub** organizes IntelliCare apps and notifications

<https://intelligcare.cbits.northwestern.edu/>

IntelliCare: 8-Week Coached Trial

(99 adult participants with PHQ-9 or GAD-7 > 10)



ThinkFeelDo

The screenshot shows a web browser window with the URL <https://steppedcare-staging.cb.its.northwestern.edu>. The page title is "Think Feel Do". The navigation bar includes links for THINK, FEEL, DO, LEARN (with a badge of 16), RELAX, MESSAGES (with a badge of 1), and SUPPORT. The user is signed in as emily.lattie@northwestern.edu and has a "Sign Out" option.

A green notification bar at the top states "Signed in successfully." with a close button (X).

HOME » Welcome To ThinkFeelDo

Your present circumstances don't determine where you can go; they merely determine where you start. -Nido Qubein

THINK

helps you track and examine your thoughts and change them for the better

FEEL

helps you to identify your Mood and Emotions and track them over time

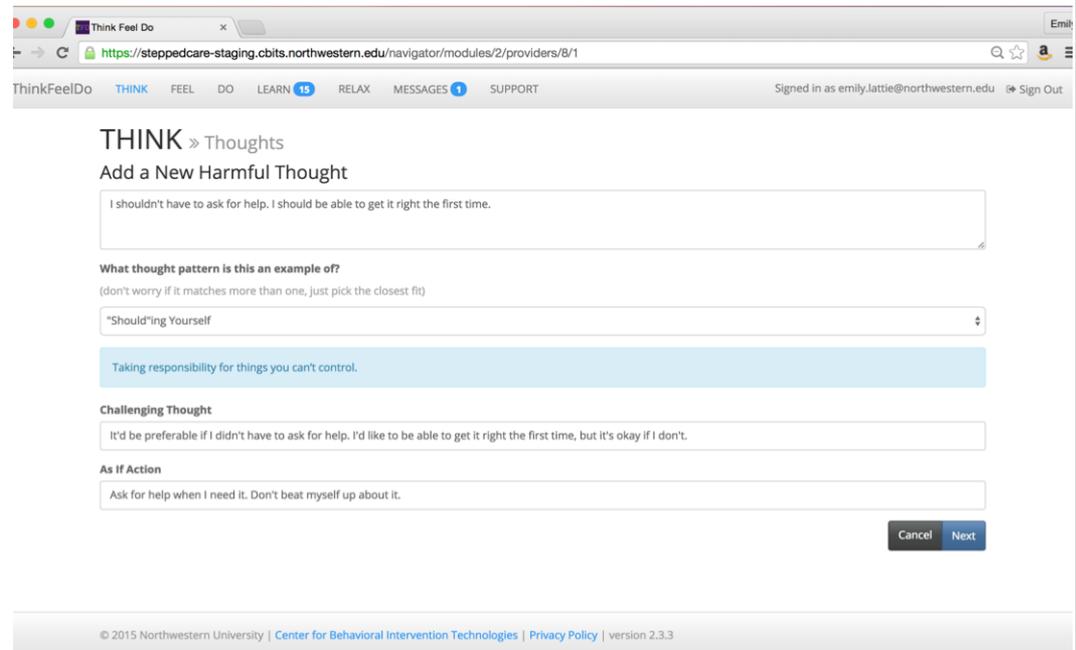
DO

helps you become more aware of your activities, patterns in your activities, and how they can impact your Mood and Emotions

© 2015 Northwestern University | [Center for Behavioral Intervention Technologies](#) | [Privacy Policy](#) | version 2.3.3

Web-based Program

- Didactic lessons
 - Managing anxiety
 - Combating guilt and shame
 - Improving communication skills
- Interactive tools
 - Activity Tracking
 - Thought Tool
 - Goal Setting
 - Relaxation
 - Mood Tracking



The screenshot shows a web browser window with the URL <https://steppedcare-staging.cb.its.northwestern.edu/navigator/modules/2/providers/8/1>. The page title is "Think Feel Do" and the user is signed in as "emily.lattie@northwestern.edu". The main content area is titled "THINK » Thoughts" and "Add a New Harmful Thought". A text input field contains the text "I shouldn't have to ask for help. I should be able to get it right the first time." Below this is a dropdown menu for "What thought pattern is this an example of?" with the selected option "Shoulding Yourself". A blue highlighted box contains the text "Taking responsibility for things you can't control." Below this is a section for "Challenging Thought" with the text "It'd be preferable if I didn't have to ask for help. I'd like to be able to get it right the first time, but it's okay if I don't." and a section for "As If Action" with the text "Ask for help when I need it. Don't beat myself up about it." At the bottom right are "Cancel" and "Next" buttons. The footer contains the text "© 2015 Northwestern University | Center for Behavioral Intervention Technologies | Privacy Policy | version 2.3.3".

ThinkFeelDo: 6-Week Medical Student Trial

User Feedback:

Participants noted ways in which the lessons directly related to their future clinical practice

Requests for tying in anxiety management techniques to stressful student-specific situations, such as

- taking tests,
- delivering presentations,
- interviewing, and
- Networking.

	Baseline	End of program
	M (SD)	M (SD)
Perceived Stress Scale	32.00 (5.88)	28.75 (6.70)
Cognitive and Behavioral Response to Stress Scale		
Frequency of skills	33.73 (7.75)	41.45 (8.86)
Usefulness of skills	43.36 (8.19)	45.45 (11.93)
Med Student Well-being Index	n (%)	n (%)
Do you feel burned out from medical school?	7 (63.64%)	2 (18.18%)



2017 Annual College Mental Health Research Symposium

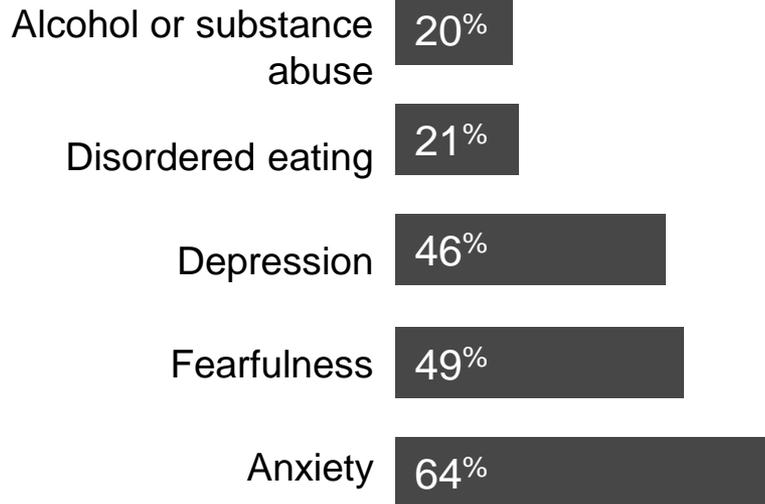
How to Leverage Technology to Move the Prevention Needle On Campus

Holly Rider-Milkovich, Senior Director of
Prevention Education

Are We Doing Right by Our Students?

Sexual Assault

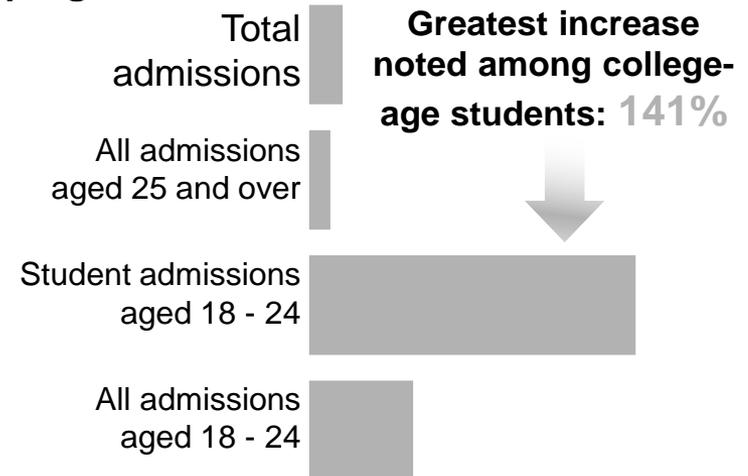
Among survivors of sexual assault:



4x MORE LIKELY TO CONTEMPLATE SUICIDE THAN NON-CRIME VICTIMS

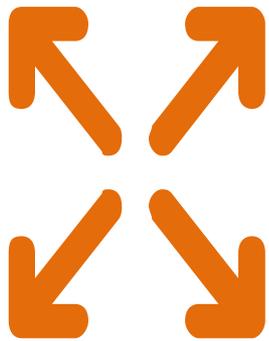
Alcohol Use

Increase between 1999 and 2009 of admissions to addiction recovery programs in the U.S.



ABOUT **20%** OF COLLEGE STUDENTS MEET THE CRITERIA FOR AN ALCOHOL USE DISORDER (AUD).

The Pain Points of Prevention Programming



Reaching students at
scale



Engaging learning
experience



Measuring key
outcomes

Maximizing Technology for Prevention Impact

Reaching students at scale

Timing of deployment

Digital Communications

Training Mandates

SSO/LMS Integration

Engaging learning experience

ADA Compliance

Multi-Modal Content

Adaptive Pathing

Curricular Fidelity

Customization

Risk Management

Annual Updates

Measuring key outcomes

Rigorous Instruments

Custom Questions

Student Engagement

Real-Time Data

Analysis Tools



Designing and delivering effective population-level prevention programs

Synthesizing and sharing best practices for prevention and compliance

Assessing and benchmarking campus prevention initiatives

Creating a community of shared commitment to campus health and safety

CAMPUS PREVENTION NETWORK

Committed to creating safer, healthier campus communities

[Learn More](#)

Learn more about our upcoming Annual Summit

> Click Here

Don't miss valuable resources and exciting updates!

[Newsletter Signup >](#)

Our Focus



Conversations that change lives.

Introduction

March 2017

Kognito's simulations **prepare people to effectively lead real-life conversations** that drive measurable improvements in social, emotional, and physical health.

Our simulations allow individuals to **engage in role-play conversations with emotionally-responsive virtual humans.**

Our approach combines the **science of learning, the art of conversation,** and the power of **gaming technology.**



Kognito's Virtual Humans

Developed using 30 years of industry research, and 10+ years of commercial experience

Main Features:

- Adjustable appearance and level of realism
- Human voice to infuse emotions and personality
- Supports multiple languages
- Behaviors (verbal and non-verbal) reflect individual personality* and medical and behavioral health condition
- Adapt responses to user's decisions (algorithm-based)
- Easy to update ("virtual humans don't age") resulting in lower cost of ownership and longer shelf life

Emotionally responsive virtual humans create safe, non-confrontational engagement while promoting meaningful and effective behavior change



*based on the Five Factor Theory of Personality

Higher Ed Mental Health/Suicide Prevention

A suite of simulations to educate faculty, staff, and students about mental health and prepare them to recognize, approach, and refer students to support.

Usage: Purchased by 400+ schools

Studies Show:

- Statistically significant changes in gatekeeper skills that remained significant at 3-month follow up.
- Statistically significant changes in the number of students educators identify, approach, and refer to support
- Increase in likelihood to self-refer
- 95%+ satisfaction rates with experience and in the whether they would recommend it to colleagues/friends



At-Risk for College Students

STUDENT EDUCATION SIMULATION

An interactive role-play simulation for students that builds awareness, knowledge, and skills about mental health and suicide prevention, and prepares users to lead real-life conversations with fellow students in distress and connect them with support.

<p>TOPICS Mental health & wellness, suicide prevention</p>	<p>USERS Students and student leaders</p>	<p>SETTINGS Universities and colleges</p>	<p>DURATION 30 minutes</p>
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Widely adopted by more than 350 universities and colleges nationally, this evidence-based online solution cost-effectively drives sustainable changes in behaviors that support academic performance, student retention, and campus safety.

BUILD REAL-LIFE SKILLS ON A VIRTUAL CAMPUS

Assume the role of a student and learn about mental health by interacting with four virtual students and talk with one virtual student in distress. Try different approaches to see what works best.



Learn more at kognito.com



This simulation is listed in SAMHSA's National Registry of Evidence-based Programs and Practices (NREPP).

Harnessing the power of conversation to improve student wellness, academic performance, and campus safety.

Students are subject to a variety of stressful experiences including increased academic pressures and responsibilities. National studies show that 30% of all college students report feeling so depressed it's difficult for them to function and 7% indicate they seriously considered suicide in the previous 12 months.

LEARNING OBJECTIVES

- Increase knowledge and awareness about mental health and suicide
- Identify warning signs of psychological distress, including verbal, behavioral, and situational clues
- Build skills in how to approach a peer in a manner to motivate them to access support
- Recognize when they themselves need support
- Understand the school's specific process for student referral and counseling services
- Know how to help a friend if they are uncomfortable talking with them about their concern

FEATURES

- Fully-hosted solution deployed to users in less than one week
- Technical assistance and outreach templates to drive adoption
- Usage reports and customizable online surveys to support program evaluation
- Customizable list of local and campus-specific mental health resources
- Discussion guides to support blended delivery with in-person workshops

RESEARCH PROVEN

The simulation is listed in SAMHSA's National Registry of Evidence-based Programs and Practices (NREPP). Studies show that it results in (1) statistically significant increases in mental health skills that remain significant at a 3-month follow-up point, and (2) statistically significant increases in the number of peers that students connect with, discuss concerns, and if necessary, refer to support.

HOW TO BUY

Organizations can purchase yearly subscriptions to the simulation that include hosting, technical assistance, program evaluation, and usage reports. For details, contact sales@kognito.com or **212.675.9234**. To purchase 1-50 individual licenses, please go to store.kognito.com.

Engaging International Students using Technology



THE INTERNATIONAL STUDENT SUPPORT PROGRAM

Matthew McEvoy- Senior Director, International Student Support



International students face a number of unique challenges

Cultural

- Adaptation issues
- Nutritional and financial concerns
- Pressure to assimilate to new culture, beliefs and values



Linguistic

- Difficulty verbalizing issues
- Challenges understanding common phrases and terminology



Academic

- Adaptation to North American academic system
- Parental expectations and pressure to succeed



Social

- Separated from support network
- Feelings of isolation and social anxiety

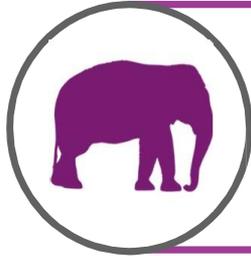


All of these challenges result in an increased risk of developing mental health issues and academic troubles

*Addressing the Mental Health Concerns of International Students, Journal of Counseling & Development. Mori, 2000

*Inter- and Intra- Group differences in Presenting Concerns among International Students, Counselling Psychology Quarterly. Kawamoto, 2017 (In Press)

Stigma is elevated among international students...



International students have **2.5X** higher **Personal stigma** when compared with Domestic students

...and when they do reach out, they present with higher rates of distress on almost all CCAPS-62 measures



Social Anxiety



Eating Concerns



Academic Distress

Students from
Asia & Africa



Depression

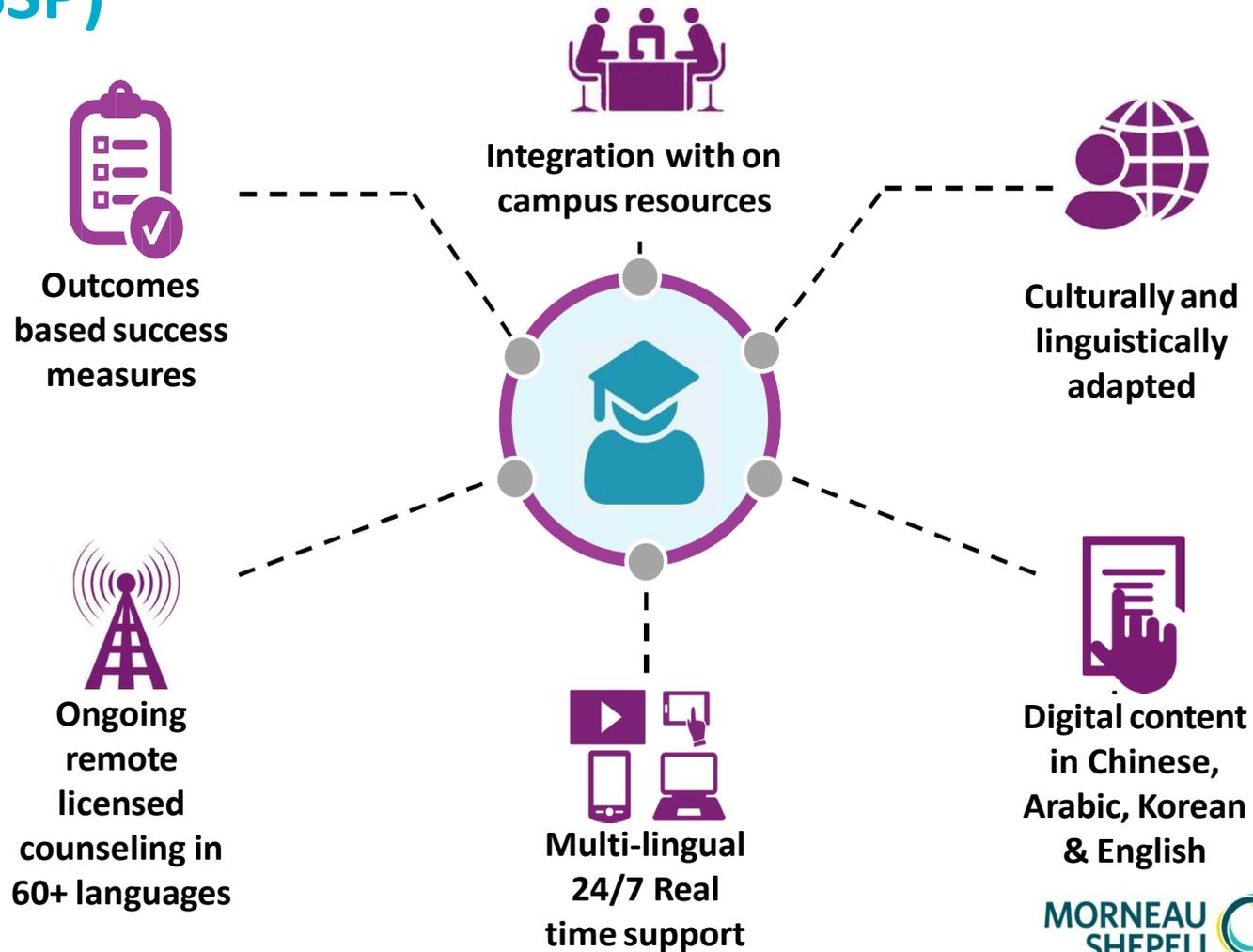


Generalized Anxiety

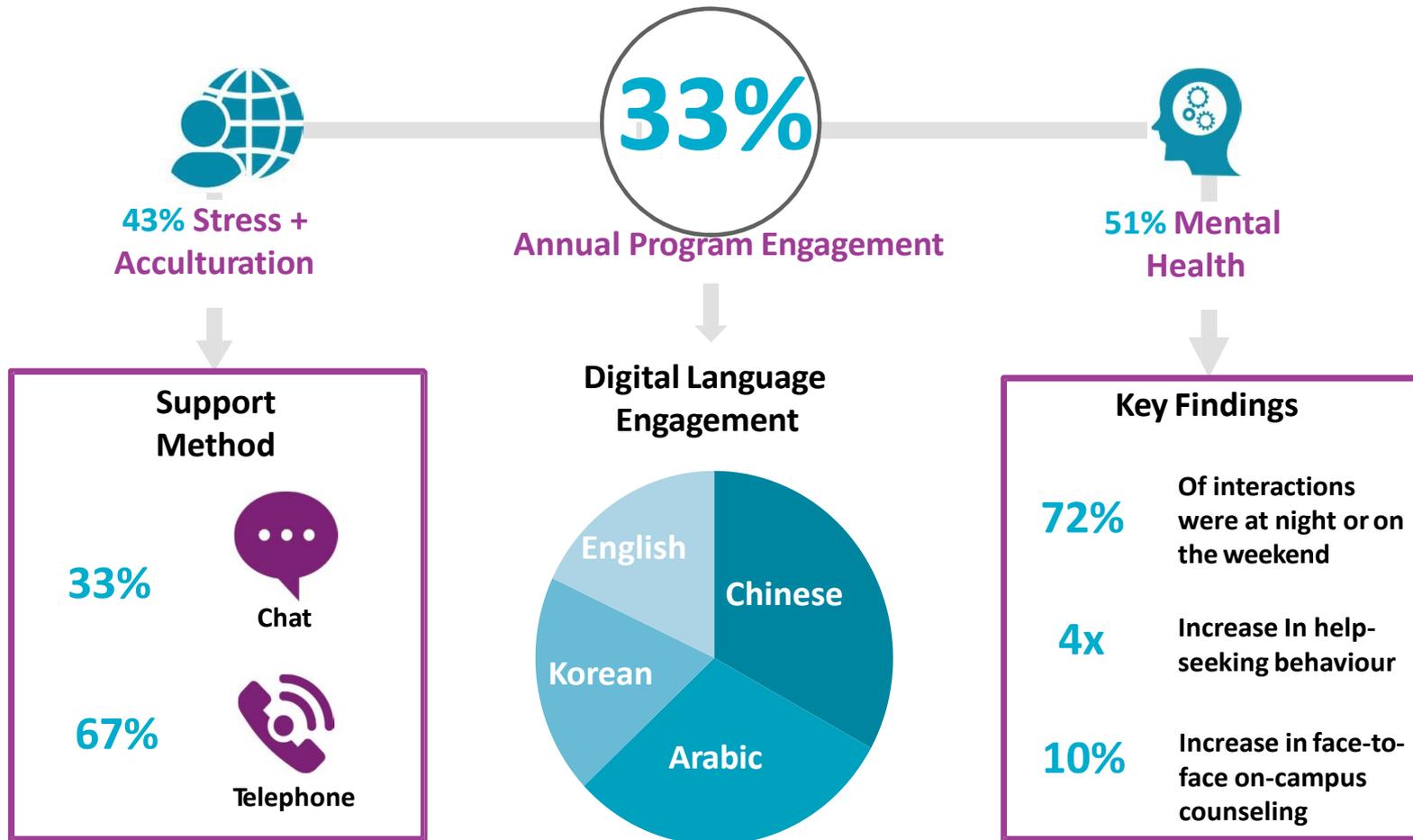
*Healthy Minds Network Annual Survey 2015

*Inter- and Intra- Group differences in Presenting Concerns among International Students, *Counselling Psychology Quarterly*. Kawamoto, 2017 (In Press); Centre for Collegiate Mental Health

Fostering early intervention with the International Students Support Program (ISSP)



Results from one institution implementing the ISSP as part of a Stepped Care Approach



Reception and Dinner

The Healthy Minds Network



for Research on Adolescent and Young Adult Mental Health

College Mental Health Research Symposium

Sunday, March 19 & Monday, March 20, 2017
Institute for Social Research
University of Michigan, Ann Arbor

Monday

- Breakfast and Day 2 Overview
- March Madness Innovation Tournament
 - Overview and definition (~30 minutes)
 - Round 1 (9 groups) (~30 minutes)
 - Break (~9:30-9:40am)
 - Round 2 (3 groups) (~40 minutes)
 - Break (~10:20-10:30am)
 - Round 3 (full group discussion) (~60 minutes)
- Wrap-Up

Innovation Tournament

- OVERVIEW

- Goals

- Enhance the discussion of solutions to the increasing demand for mental health services through the unique combination of perspectives present at the Symposium

- Problem statement: *How might we create an ideal campus mental health system, given the increasing demand for mental health services and the emerging technologies and programs available? What additional data and research do we need most urgently to answer this question more confidently?*

- Define “an ideal campus mental health system”

- In 1 sentence, what does an ideal mental health system look like? (i.e., what is the end goal?)*

- Individual brainstorming: ~3 minutes

- Group discussion: ~10 minutes

- Consensus definition of an “ideal campus mental health system”:

Ideal Campus Mental Health System

Consensus definition:

Innovation Tournament: Round 1

~9 groups (breakout rooms)

Supplies

~5 minutes: individually engage with “how might we...?” question

~15 minutes: share out/cluster ideas

**Add ideas to Gsheet: <http://tinyurl.com/m7a5q8y>*

Discuss to determine which ideas/clusters to move forward with

**Ideally 1-2 ideas/clusters from each group after Round 1*

Innovation Tournament: Round 2

~3 groups (3 groups merged from Round 1)

~15 minutes: each group from Round 1 shares idea(s) (5 minutes/group)

~15 minutes: discussion/cluster ideas

**Add ideas to Gsheet: <http://tinyurl.com/mkbz8vy>*

Dot vote (each person gets 3 dots) to determine which ideas/clusters to move forward with

**Ideally 1-2 ideas/clusters from each group after Round 2 (select spokesperson)*

Innovation Tournament: Round 3

How might we create an ideal campus mental health system, given the increasing demand for mental health services and the emerging technologies and programs available? What additional data and research do we need most urgently to answer this question more confidently?

“An ideal campus mental health system”

Each group from Round 2 shares idea(s)

Full group discussion

Symposium Wrap-Up

The Healthy Minds Network



for Research on Adolescent and Young Adult Mental Health

Symposium Wrap-Up

- Next steps
- Will follow-up with notes/materials from Symposium
- Symposium evaluation
- Next year's Symposium: March 12-13, 2018
- Depression on College Campuses Conference begins today at 1pm at the Rackham Building

College Mental Health Research Symposium

Thank you for joining us!