Overview

The following represents a summary of the accomplishments of the California Community Colleges Student Mental Health Program (CCC SMHP). It is submitted to the California Mental Health Services Authority (CalMHS Authority) in compliance with its annual reporting requirement.

The CCC SMHP is a partnership between the California Community Colleges Chancellor’s Office (CCCCO) and the Foundation for Community Colleges (FCCC). The initiative focuses on prevention strategies which address the mental health needs of students and advance the collaboration between educational settings, county services, and the community at large. There are four main components of the CCC SMHP: comprehensive Training and Technical Assistance, Online Suicide Prevention Training, Campus Based Grants (CBGs), and a corresponding Evaluation. The goal is to build the capacity of the 112 colleges in their efforts to address the mental health needs of the over 2.6 million students they serve. As the largest higher education system in the nation, serving one fourth of all community college students in the United States, the potential impact is of national significance.

Achievements

The Initial CCC SMHP Implementation Goals Were Pragmatic and Achievable Overall, the initiative achieved successful implementation of each of the four components including: establishment of a statewide TTA system supporting all 112 colleges; the availability of online suicide prevention training to all colleges, faculty, staff and students; the engagement of 30 colleges in PEI grant funded activities focused on CalMHS Authority priority areas; and the evaluation of the individual effects and collective impact of each of these components. In partnership with RAND, the CBGs and subcontractors have participated and contributed data in compliance with CalMHS Authority’s statewide evaluation.

Training Participation To date, 88,867 students, faculty and staff have been reached through CCC SMHP trainings, presentations, events, and workshops. Of these, 13,787 students, faculty, and staff have completed the online suicide prevention trainings.

Training and Technical Assistance (TTA) In April 2012, the CCC SMHP entered into a 26-month contract with the Center for Applied Research Solutions (CARS) for the delivery of statewide student mental health training and technical assistance services (TTA). The goal is to develop a comprehensive capacity building and service delivery system reaching all 112 campuses. Emphasis is on assisting campuses in developing long-term and sustainable systems, partnerships, and capacity.

The TTA contract has consistently achieved or exceeded the original deliverables including the following: established a centralized resource center website, on schedule to deliver 1,500 TTA days (with 1,272 days completed to date), significantly exceeded the number of onsite trainings (39 regional and 67 college specific, onsite trainings, including support for 22 Regional Strategizing Forums), completed and archived 26 webinars, disseminated monthly electronic newsletters, developing over 25 publications and resources, as well as 2 online training modules, and hosted a 2-day learning community event for the CBGs.

Information Dissemination and Access to Resources The SMHP website has had 85,738 visitors and 221,249 page views. A monthly electronic newsletter is distributed to 1,786 individuals including: campus staff, faculty, administrators and students; county and community representatives; and other statewide and national partners.

TTA Engagement and Outreach To date, 108 (96%) of the 112 campuses have been engaged in TTA services. Initial Readiness and Consultation Calls have been conducted with 97 (86%) of the campuses, each resulting in a customized TTA Plan. Additional calls continue to be scheduled.
Suicide Prevention Training for Faculty and Staff (SPT) In May 2012, the CCC SMHP entered into a contract with Kognito Interactive to provide online suicide prevention trainings (SPT). These gatekeeper trainings are designed to increase the knowledge, skills and abilities of faculty, staff and students to appropriately identify, address and refer students in psychological stress. The SPT uses Kognito’s award-winning, avatar-based, online training which includes role playing simulations and active decision making tools for participants.

Campus Based Grants (CBG) In July 2012, 23 awards were made to individual colleges and consortia to enhance their capacity to address the mental health prevention and early intervention needs of their students, faculty, and staff. An emphasis was placed on leveraging county and community mental health partnerships. Selection priority was given to those applicants that proposed comprehensive, feasible, and sustainable strategies and have an existing and viable infrastructure to which activities could be expanded, enhanced, and leveraged. The original plan was to award 12 CBGs. With support from CalMHSAs, 23 grants representing 30 colleges were awarded. This decision resulted in over one-fourth (27%) of the 112 CCCs receiving PEI funding. While implementation levels have varied across colleges, there have been substantial successes in utilizing data, increasing awareness, building capacity, and ultimately in establishing more effective mental health systems. The successful establishment of and/or expansion of identification and referral systems, behavioral intervention teams, and peer support teams have been documented for many of the campuses.

Program Evaluation In June 2012, an evaluation services contract was awarded to PIRE. The contract is designed to plan, develop, and implement evaluation activities required by the contract with CalMHSAs. These services include addressing data collection, quality assurance, and evaluation activities for each of the CCC SMHP’s components, and providing assistance to the CCC SMHP in complying with analysis and reporting requirements. Importantly, the contractor will provide expert consultation services, conduct the program evaluation, and develop a summary report which identifies the extent to which the CCC SMHP achieves its anticipated outcomes.

Accomplishments We Are the Most Proud Of

Creation of a Centralized TTA Support and Knowledge Transfer System Before the initiative, the colleges were functioning in general isolation from one another with limited cross college communication regarding effective student mental health approaches. The funding allowed for the creation of a statewide networking, resource and learning community among the colleges. This cross sharing is particularly critical for the CCC system in which there are limited resources dedicated to student mental health. The statewide TTA infrastructure has facilitated the sharing of innovative approaches, resources, and knowledge transfer across campuses. This was particularly true for the learning transfer from the CBGs to the broader college system. Ultimately, it is hoped that the CBG benefits will be realized by the entire CCC system. Our goal is for the initiative to lead to model strategies and tools that can be shared with the entire higher education system (including CSU and UC).

Tops in the Nation for Online Suicide Prevention Training Participation The CCC system has been consistently in the top 3 Kognito clients nationwide for training participants in the online suicide prevention gatekeeper training. The majority of campuses (74%) are using the trainings, top campuses include: Santa Monica (936 trained), LA Pierce (919 trained), West Valley (730 trained), and Saddleback College (767 trained).
Staying Focused on Reducing Stigma and Disparities  Concentrated efforts and great strides were made to build the system’s capacity to more effectively reach and address the needs of traditionally underserved students. This was achieved through culturally tailored onsite and online trainings, population specific publications and resources, and strategic partnerships with advocacy groups. Collectively, these addressed: LGBTQ students, Transition Aged Foster Youth, student veterans, recent immigrants, students with disabilities, as well as strategies for working with students representing different racial and ethnic groups.

Generated the Largest Community College Dataset  As part of their grant, all CBGs were required to participate in the HSACCC data collection effort as part of the NCHA/ACHA. This resulted in the largest data set of community college health data ever collected nationally, and provides participating colleges and the system important data about health and mental health issues.

Collaboration With Other Higher Education Partners  The CCC SMHP has maintained productive collaborative relationships with the CSU and UC systems that resulted in sharing CalMHSA resources between the three systems. The CCC, CSU and UC partners meet quarterly to facilitate this collaborative process that is planned to continue beyond the grant.

Creating a Lasting Value and Leveraging Resources

Created a Statewide TTA System and a Centralized “One Stop Shop” CCC SMHP Resource Center  A statewide TTA system and infrastructure has been firmly established which has the potential to last beyond the life of the grant. Through this a networking system and medium for colleges to exchange resources and connect with one another regarding student mental health issues has been created. In addition, a centralized website has been established which houses a searchable resource repository; over 25 archived webinars; online TA request and registration for all events; as well as general information regarding the initiative.

Developed and Enhanced Mental Health Systems, Infrastructures, and Policies  Through both the TTA services and CBG activities an emphasis was placed on establishing or expanding mental health systems. This included: referral systems, student support teams (behavioral, crisis, and threat assessment and intervention teams), internship programs, peer to peer support programs, and collecting and utilizing data. Colleges have received SIGMA threat assessment trainings, suicide prevention and behavioral intervention trainings from the JED Foundation, and BACCHUS peer support trainings, as well as individualized consultation in these areas. The majority of colleges have participated in these trainings; 72 colleges have received the threat assessment training alone.

Examples of College Level Impact  The Los Angeles Community College District (LACCD) is working to establish Behavior Intervention Teams (BIT) within each of the 9 District colleges. Nearly 50 campus representatives attended BIT training to develop formalized policies and procedures. Riverside Community College has developed a successful mental health peer ambassador program. Peer Ambassadors have completed 20 campus events and engaged in 3,000 hours of peer-to-peer conversations. Counseling appointments have increased by 200% since the program launch.

Beyond the Grant: Products and resources will be available and useful beyond the life of the grant including sample templates, policies, online trainings, and a behavioral health resource website portal that can be adopted and customized by campuses. Every effort will be made to maintain the website past the life of the grant.

Leveraging Resources: The CARS TTA team utilizes a brokerage model which capitalizes on an administrative team in conjunction with a pool of subject matter experts. This model maximizes the amount of TTA services provided to the system by accessing subject matter experts in a cost effective way. The TTA team also strategically partnered with a number of existing student mental health organizations in order to leverage already existing resources and packaged training curricula. Partners include: SIGMA, JED Foundation, NAMI, Active Minds, ReachOut, Trevor Project, BACCHUS, and the National Suicide Prevention Resource Center.

Beyond the Grant: While the onsite trainings are not expected to continue without additional funding, the capacity that was built and the systems and policies that have been created will have a lasting impact. Through negotiation with Kognito, the online trainings will be available past the grant. In order to support longer term data collection efforts, the PIRE developed database will continue to be available to colleges after the grant. Through a strong relationship with existing campus health centers, systems have been enhanced to better reach and serve students with mental health needs.
Fostered Partnerships and Collaborations  Forty-five Regional Strategizing Forums have been implemented statewide, resulting in direct and active collaboration between county and community mental health partners as well as other higher education segments. The TTA system further expanded this by: offering college specific consultation to foster partnerships and referral systems, developing resources such as a sample county and college MOU, and providing webinars and trainings dedicated to building partnership capacity.

Examples of College Level Impact: College of the Canyons developed a campus MH consortium with over 20 partners from local UCs, CCCs, private colleges, and county and community-based organizations actively engaged. San Diego City College and Mira Costa work collaboratively with the County Suicide Prevention Council for Higher Education to address suicide prevention efforts through regional forums and trainings. Santa Monica College established partnerships with three county mental health providers who provide students with on-campus mental health services. Rio Hondo College has an LA County Mental Health Department representative that sits on the colleges BIT team. They also developed Rio Source, a website for students to access local resources from community partners.

Reaching Traditionally Underserved Student Populations A consistent focus of this initiative was to support campuses in identifying, outreach, and serving traditionally underserved students. This was achieved through trainings, consultation, resources and strategic partnerships with organizations dedicated to serving these populations. With the CCC system serving over ½ the veterans receiving GI educational benefits in the state, the Welcome Home training focusing on student veterans was one of the primary trainings made available to campuses. Representatives from 54 colleges received this intensive training. A partnership with Active Minds resulted in Send Silence Packing and site visits for 12 colleges. An ongoing collaboration with the CCC Academic Senate LGBTQ Caucus and the Trevor Project resulted in customized trainings and publications for more effectively serving LGBTQ students. The Healthy Transitions curricula for Transition Aged Foster Youth was offered and a factsheet series on underserved students was developed.

Examples of College Level Impact: Orange Coast established a Veteran’s Drop Zone and secured an MOU with County Mental Health to provide on-campus counseling to veterans. San Bernardino Valley College established a strengths-based prevention and early intervention approach that engages the campus LGBTQ community, student veterans and former foster youth in 6-week mental health and wellness workshops. In addition, secured an MOU with a County Mental Health Provider to provide counseling to student veterans on-campus in the veteran center.

Key Outcome Findings to Date

Online Suicide Prevention Trainings Lead to Increases in Self Reports of Referrals. The Kognito gatekeeper training collects pre and post electronic survey data on the extent to which faculty and staff refer students. Faculty and staff made two and a half times more referrals 3 months after receiving the training. Similarly, initially low referring students were found to refer 4 times more after receiving the training. Both of these findings were statistically significant.

Onsite Trainings Lead to Perceived Increases in Knowledge and Skills All onsite training participants receive an evaluation survey at the end of each event. The following findings are based on participants’ self reports of change overtime. While positive changes were seen across all 15 areas, the following were statistically significant changes:

- Ability to identify where to refer students
- Comfort level discussing mental health issues with students
- Awareness of the warning signs of mental health distress
- Encouraging student to get professional help

- Encouraging student to talk to their parents or friend
- Giving student a specific number or person to call
- Asking specific questions to assess the level of stress

TTA Recipients Report Implementation of Mental Health Systems Change at College Level All TTA recipients are asked to complete an initial and 3 month follow up evaluation survey. The follow up survey asks a number of questions related to the extent to which the TTA resulted in the pursuit of mental health system changes. The majority of TTA recipients who completed the follow up evaluation are reporting to actively pursue mental health system changes.

Beyond the Grant: Once established, these partnerships have the potential to be sustained. The formal and informal partnerships with counties was a key sustainability goal. Statewide partnerships with NAMI and Active Minds have led to local campus connections and chapters.

Leveraging Resources: The Welcome Home training was previously developed and piloted through funding from the Zellerbach Family Foundation. The trainings were quickly rolled out to the CCC system and efficiently taken to scale. For the transition-aged foster youth curricula, existing infrastructures of campus-based foster youth projects offered a launching point for the trainings.
College Capacity Survey Findings Indicate High Levels of System Capacity Activity and Suggest Collaboration in Achieving These Changes  As part of the evaluation for the initiative PIRE developed a college capacity survey which has been administered twice to date. Consistent with the TTA evaluation findings, the majority of colleges are reporting to build or expand capacity in multiple domains. Increasing the availability of mental health resources and referral systems were the most frequently reported (80 and 78% respectively). Depression screening days, electronic health reporting and suicide prevention policies were the least reported (33%, 30%, and 19% respectively). Not surprisingly, CBGs are generally reporting higher rates of capacity development than the non-funded colleges. When college representatives were asked if they were collaborating with partners to achieve these system capacity improvements, they reported collaborating with the TTA provider on an average of 3.2 capacity areas, county mental health 2.9 areas, other community colleges for 2.3 areas, and other higher education partners for 1.1 areas.

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<th>Performance Monitoring, Quality Improvement, and Learnings</th>
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<td>Active and ongoing performance monitoring of all components of the initiative has been critical to successful implementation. Performance monitoring activities include: monthly progress reports from all partners (focusing on goals, objectives, and deliverables); monthly funder check-in calls with each partner (CBGs, CARS, Kognito, and PIRE); regular cross-partner check-in calls (with CARS, PIRE, and Kognito), and the ongoing review and integration of evaluation data for decision making. The Chancellor’s Office Advisory Group on Student Mental Health (COAGSMH) is kept informed of the initiative and provide guidance and feedback through quarterly onsite meetings. The following represent some of the key learnings.</td>
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<th>The Connection to Student Success and Emerging Priorities is Critical for Ensuring Institutional Buy In for Mental Health  College representatives were quick to identify the challenge convincing their administrators and campus colleagues about the prevalence of student mental health issues and the need for identification and referral. The role of data and the linkage between mental health and other academic success indicators became a focus.</th>
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<td>A Gradual Shift in Campus Awareness and Culture Can Be Profound The role of the campus culture, norms, and awareness should not be underestimated. While the gradual shifts in culture that appear to be happening as a result of this initiative are still just a starting point, they appear to begin to be felt within the system.</td>
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<th>Readiness to Respond is Important When Increasing Identification and Referral  While it would be easier to allow all CCCs to openly access the Kognito online suicide prevention trainings, a strategic decision was made at the onset to require and implement an intake and readiness assessment process for all colleges wishing to participate in the online trainings and TTA services. This helps to ensure adequate and responsible referral systems are in place at a college before increasing awareness and identification.</th>
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<td>Concurrent Evaluation Efforts Require Ongoing Coordination and Strategic Planning  As the CCC SMHP evaluation was being planned and beginning to roll out, the importance of active coordination and ongoing communication with the RAND team was quickly realized. Active planning and collegial compromise was required in terms of instrumentation, data collection methods, and timing of administration.</td>
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| High Student Need and Limited Resources Aren’t Insurmountable  At the onset of the initiative the task of supporting a system with 2.6 million students and limited campus resources seemed at times daunting and overwhelming. In some cases, colleges are functioning without any dedicated student mental health staffing and resources. Through this initiative, we have had the opportunity to tap into a set of committed and passionate individuals who are now able to stay connected, learn from one another, and share and leverage resources. Many times the sheer transfer of knowledge and tools can make a meaningful difference. |

- 91% developing/expanding SMH programs, trainings, or policies
- 91% increasing faculty, student or staff awareness of SMH resources
- 89% developing/expanding SMH materials for faculty, staff, or students
- 89% increasing faculty, student or staff awareness of SMH issues
- 80% developing/expanding campus assessment, referral or treatment system
- 79% collaborating or sharing resources with other community colleges
- 71% establishing/expanding partnerships with county mental health or CBOs