

# Student Mental Health Program

Training and Technical Assistance for California Community Colleges



FOUNDATION for CALIFORNIA  
COMMUNITY COLLEGES



# CAMPUS MENTAL HEALTH BASICS

## A PRIMER FOR CALIFORNIA COMMUNITY COLLEGE FACULTY AND STAFF

With the recognition that non-clinical faculty and staff at California community colleges have regular and ongoing access to students experiencing mental health conditions, this primer has been compiled to provide guidance and resources. College faculty and staff are often the first to notice signs and symptoms of distress and therefore should be equipped to approach potentially distressed students, start a conversation, and refer when appropriate.

While this document will provide guidance on how to initially speak with and support a student in crisis, rest assured that this is in your current role and not as that of a professional therapist. There is a wide spectrum of mental health conditions that impact students, ranging from mild depression, stress, and anxiety, to clinically diagnosed mental illness, including bipolar disorder and schizophrenia. Challenges can be experienced anywhere along the spectrum. A clinician can make a diagnosis and work with a student on a treatment plan, but often that student may need support in getting to the clinician.

In these pages, you will learn about:

- the magnitude of the mental health challenges facing today's students;
- how services can make a difference in their academic and personal lives;
- the factors that are putting them at risk;
- signs and symptoms of distress;
- strategies and recommendations for supporting them;
- cultural and linguistic considerations; and
- resources for individual care as well as overall campus climate.

### A Partnership for Campus Mental Health

The California Community Colleges Student Mental Health Program (CCC SMHP) is a statewide effort focusing on prevention and early intervention strategies which address the mental health needs of California Community College students. As a partnership between the California Community Colleges Chancellor's Office and the Foundation for California Community Colleges, it is funded through the voter-approved Mental Health Services Act (Prop 63) and administered by the California Mental Health Services Authority (CalMHSA).

## Student Mental Wellness is Critical to Student Success

In recent years, there has been a growing awareness of how mental health issues are impacting college students across the country. Research indicates that both the *number* of college students experiencing mental health challenges and the *complexity* of these challenges are increasing at alarming rates. In the United States, young adults between the ages of 18 and 25 have the highest prevalence of diagnosed mental health disorders.<sup>i</sup> The peak onset period for psychotic disorders is between ages 15 and 30, with more than half of psychotic disorders appearing before the early 20s.<sup>ii</sup>

Left untreated, mental health problems can have serious impacts. Mental health issues can be a factor in attendance, participation in class and social activities, grades, and self-care. In the Spring 2013 American College

Health Association (ACHA) survey of 17,271 California community college students, over half reported they had felt very sad at least one time in 2013. One-third indicated they were so depressed that it was difficult to function at least one time during 2013.<sup>iii</sup>

Resources to support student mental health needs on college campuses are commonly limited, especially in small, rural colleges. California community colleges may have very limited clinical services and are largely unable to meet the increasing demand for student mental health support and treatment. Resources and time to provide faculty and staff with training may also be lacking, leaving staff unprepared for supporting students in distress and ensuring they get services they may need.

Even if services are available, either on or off campus, students may be unaware that services exist. Of the 7,378 CCC students who responded

to the CCC 2016 survey:

- nearly 40% were either unaware of health centers on campus or did not know where the campus health centers were;
- nearly 80% felt overwhelmed; and
- over 40% reported overwhelming anxiety.

**Of concern, nearly 11% of CCC students surveyed in 2016 reported having seriously contemplated suicide, and 2% had attempted suicide.**<sup>iv</sup> In a survey conducted by the National Alliance on Mental Illness in 2012, 36 percent of former students said they dropped out due to a mental health reason.

### MENTAL ILLNESS AMONG COLLEGE STUDENTS

- Many college students report feeling hopeless and depressed
- Suicide is the second leading cause of death on college campuses
- Reports of severe mental health issues are on the rise

### SERVICES AND SUPPORTS CAN MAKE THE DIFFERENCE IN RETENTION

In College Students Speak, a National Alliance on Mental Illness survey, 64% of former college students reported they are no longer attending college because of a mental health related reason. More than 45% of those who stopped attending college did not receive accommodations; 50% did not access mental health services and supports.

## Sources of Student Stress

Challenging situational factors may interfere with a student's ability to be successful and have a positive college experience. These factors do not, in and of themselves, cause or constitute mental illness. However, these issues may negatively impact a student's ability to study, work, socialize, and function, and may increase a student's risk of developing a mental health disorder.

Many students experience parental pressure and expectations to achieve in college, and for some, the pressure can be very intense and stressful.

In addition, some students have a history of low academic achievement, failure, truancy, or having previously dropped out of school. These students may carry doubts, anxiety, and low self-esteem that impact their ability to achieve in post-secondary school.

The demands of college life, especially if a student has special learning needs, can be extremely challenging. Stressors also include financial concerns, balancing study and social life, and insufficient sleep and rest.

The 2016 CCC ACHA data reflected a correlation between student's mental health needs and their academic

success. Students reported the following factors affecting their individual academic performance:

Stress	33.3%
Anxiety	24.8%
Sleep Difficulties	22.4%
Work	21.8%
Depression	17.3%
Cold/Flu/Sore Throat	14.0%

While these are common stressors for students throughout college systems, it's important to note that community college campuses tend to have more demographic and socio-economic diversity than four-year universities. They have larger numbers of veteran, LGBTQ, foster youth, low income,

and first generation college students. As such, discrimination, stigma, food and housing insecurity, and other historic and contemporary burdens widely contribute to poor mental health. Other stressors such as parenting, work, and uncertain immigration status for oneself or other loved ones in a mixed status household also fall disproportionately on the shoulders of community college students.

Some mental health disorders can also have a genetic and/or familial component, meaning that a family member has a history of symptoms and/or diagnosis of mental illness. Students who inherit a biological predisposition to mental illness may be at increased risk for experiencing a mental health issue.

Whether situational or biological, a student may feel disconnected and isolated if he or she lacks social support and friends. If a student has no one to confide in or experience positive interactions with, mental health challenges may intensify.

### EFFECTS OF TRAUMA

Past trauma in the family may put a student at risk. Other kinds of trauma can be debilitating as well, such as sexual assault, harassment, experiencing life in a war zone, being bullied, and other kinds of victimization.

Unhealthy or abusive relationships, past or present, can also have a negative impact on a student, especially those that manifest in traumatic incidents. Similarly, unresolved family conflict that has escalated into physical, verbal, or emotional abuse of the student or a family member puts a student at greater risk for mental health problems, particularly if the conflict has been sustained over many years. Grief related to loss of a family member, especially at a young age, may also put a student at risk of mental illness.

These forms of trauma are much more common than we usually think, but if appropriately supported, students can learn resiliency and coping skills and most will achieve their recovery goals.

## Signs and Symptoms of Distress

Faculty and staff can play a pivotal role in supporting students experiencing mental health distress. An important starting point is understanding the signs and symptoms of mental health disorders among students and how these signs and symptoms can be

distinguished from more ordinary and less concerning student behaviors.

- **What they may be feeling:** hopelessness; overwhelmed; loneliness; exhaustion; sadness; anger; anxiety; suicidal thoughts.
- **What faculty and staff may be seeing:** confused thinking; prolonged depression (sadness or irritability); extreme highs

and lows; excessive fears, worries, and anxieties; social withdrawal; dramatic changes in eating or sleeping habits; actions motivated by anger; strange thoughts (delusions); seeing or hearing things that aren't there (hallucinations); growing inability to cope with daily problems and activities; numerous unexplained physical ailments; substance abuse.

### HOW TO REFER

#### Preparing to reach out to the student

- Consult with the Behavior Intervention Team (BIT) to explore the issues involved and interventions.
- Know the available campus resources and the referral process.
- Seek suggestions from experienced colleagues and the department chair.
- Allow sufficient time to thoroughly address the issues of concern.
- Review your physical environment and make provisions for your safety and that of others. If necessary, notify colleagues in close proximity of your intended intervention.
- Remain calm and know whom to call for help in case of need.
- When a student expresses a direct threat to self or others, or acts in a bizarre, highly irrational and disruptive way, contact SCCC Police.
- If you decide not to have contact with the student, refer incident to the proper resources.

#### Connecting with the student

- Listen supportively. Repeat the student's statement to clarify and to demonstrate an understanding of the student's perspective.
- Do not challenge, shock, or become argumentative with the student.
- Do not try to minimize the student's distress.
- If safe, meet and talk in private to minimize embarrassment and defensiveness.
- Clearly express your concerns focusing on the behavior in non-disparaging terms.
- Ask if the student wants to hurt himself. Asking does not plant ideas in the student's mind.
- Offer supportive alternatives, resources and referrals.
- Respect the student's privacy without making false promises of confidentiality.
- Explore the student's support system(s).
- Emphasize the importance of professional help for the student.
- Document all incidents and attempts to resolve the situation. Be factual and objective.

#### Making the Referral

- Recommend services and provide student with realistic expectations. Note that some campus resources can offer confidential support while others are required to respond or report.
- Reassure the student that students often seek help over the course of their college career to effectively achieve their goals.
- Direct the student to a preferred assistance source.
- Be frank with the student about your limits (time, expertise, student's reluctance to talk).
- Frame any decision to seek and accept help as an intelligent and wise choice.
- Make sure the student understands what actions are necessary.
- Encourage and assist the student to make and keep an appointment.
- If necessary, find someone to stay with the student while calls to the appropriate resources are made, and officer to escort the student.
- Set a follow-up appointment with the student.



Source: Red Folder  
Resources: See Something, Say Something, Do Something (SCCCP)

## Strategies and Recommendations for Supporting Students

Behind the statistics on the prevalence of mental illness are the sometimes heartbreakingly stories of the experience and outcomes for those with these illnesses – feelings of hopelessness and depression, self-injury, and even suicide. Faculty and staff are concerned with the health

and well-being of their students and want to see healthy students leading fulfilling lives and achieving academic success.

It is important to recognize that the manifestation of symptoms of depression, anxiety, or other mental illnesses does not necessarily mean that the individual has a diagnosable illness. However, **without help and support, mild symptoms can develop into more serious issues.** As a college faculty or staff member, this is an

opportunity to be a change agent that transforms a student's life!

If a student seems to be unusually distressed, consult with the health or mental health professionals or other resources on campus that can **intervene early in an appropriate way.** While staff and faculty should be aware of the different types of mental health disorders, diagnoses should be left to a professional.

### WHAT CAN YOU DO TO SUPPORT STUDENTS?

- **Be Proactive:** Engage students early on, pay attention to signs of distress, and set limits on destructive behavior.
- **Be Direct:** Don't be afraid to ask students directly if they are under the influence of drugs or alcohol, feeling confused, or having thoughts of harming themselves or others.
- **Listen Sensitively and Carefully:** Use a non-confrontational approach and a calm voice. Avoid threatening, humiliating, and intimidating responses.
- **Safety First:** The welfare of the campus community is the top priority when a student displays threatening or potentially violent behavior. Do not hesitate to call for help.
- **Follow Through:** Direct the student to the physical location of the identified resource (e.g., Health Center).
- **Consultation and Documentation:** Always document interactions with distressed students and consult with the department chair/supervisor after any incident.
- **Remember:** *Approaching and engaging students in conversation about concerning behaviors does not obligate the faculty or staff to assume the role of therapist – it is to support the student and connect him or her to services when appropriate.*

## Campus Mental Health Advocacy

In order to sufficiently address student mental health, it is a best practice for a campus to develop and implement a detailed strategic or action plan that establishes a roadmap for a continuum of mental health approaches. The plan should include a strong focus on early intervention and prevention activities. It should be two-fold:

1) strengthen services for individual treatment and 2) promote mental health for all students by resourcing campus-wide activities that prevent problems from arising.

Staff and faculty should be fully oriented to the plans, policies, and procedures in place at the college that relate to student mental health. This may include a strategic or action plan, protocols for responding to crisis situations, protocols for making referrals to a threat assessment team, obligations regarding accommodation of disabled persons, and policies that protect privacy and confidentiality with respect to health matters.

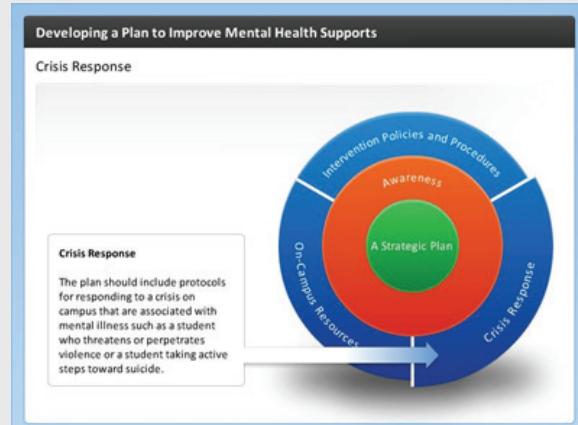
Staff and faculty can serve as advocates with college administration to ensure that mental health services are available to students. If mental health services are lacking on campus, it is crucial that health center or other

staff are familiar and up-to-date with low-cost or free community resources and are trained to provide effective and timely referrals to students for off-campus services.



## THREAT ASSESSMENT TEAMS

A Threat Assessment Team is committed to improving community safety through a proactive, collaborative, objective, and thoughtful approach to the prevention, identification, assessment, intervention, and management of situations that pose, or may reasonably pose, a threat to the safety and well-being of the campus community. Threat Assessment Teams are charged with managing students of concern through development of a wellness plan and tracking treatment and progress. This team approach allows for coordinated evaluation and implementation of a wellness plan (also called an intervention plan) to reduce the risk. It is not an adversarial or punitive process, but rather one that is concerned with predicting and preventing future targeted violence. In addition to the student of concern, these multi-disciplinary teams may be comprised of one or more administrators, such as the directors or deans of student health, student affairs, disability resources, and/or student services; mental health professionals; and district police officers.



## Cultural Competence

Within the field of behavioral health care, there is a growing appreciation of the need for cultural competence in providing services. Cultural competence means providing effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.

Certain special populations are at a higher risk for mental health challenges. This has implications for the planning and implementation of preventative mental health strategies on college campuses.

As community colleges endeavor to support student mental health, it is critical to consider the role that the cultural backgrounds of students and providers play in both access and effectiveness. The California community colleges are highly diverse, serving a greater proportion of non-traditional students than other systems of higher education.

### Training in the National Culturally and Linguistically Appropriate Services (CLAS) Standards

may facilitate a greater understanding of how the college can institutionalize cultural competence.

#### The National CLAS Standards

- Correct inequities in health services.
- Make services more responsive to diverse clients and families.
- Contribute to the elimination of racial and ethnic health disparities.

Learn more at:

[www.integration.samhsa.gov/  
EnhancedCLASStandardsBlueprint.pdf](http://www.integration.samhsa.gov/EnhancedCLASStandardsBlueprint.pdf)

Having an intervention team on campus may be a very effective part of a culturally competent system for helping distressed students. An intervention team is usually a group of professional staff who receive referrals from

faculty, staff, and students in order to intervene early before a crisis occurs. One advantage in using a team approach is the ability to maximize cultural and linguistic knowledge and resources. Read more about supporting students from diverse racial and ethnic backgrounds: [http://ccstudentmentalhealth.org/  
docs/SMHP-Diverse-Racial-Ethnic-  
Students.pdf](http://ccstudentmentalhealth.org/docs/SMHP-Diverse-Racial-Ethnic-Students.pdf)



### CARING IMPLORES US TO LISTEN, LEARN, AND ACT

Many California Community College campuses are seeing a sharp increase in the enrollment of returning veterans. Veterans are at a much higher risk for mental health issues due to the stress and trauma of combat.

Lesbian, gay, bisexual, and transgender students are at higher risk as well, particularly for depression and suicide.

Students who are transitioning out of the foster care or child welfare system are often coping with symptoms related to childhood trauma and are also at high risk for depression and anxiety.

Students with disabilities are also at higher risk for mental health concerns. They may already receive supportive services through the campus' Disabled Student Services to support their academic success and so may more easily access mental health support.

Learn more and obtain factsheets for supporting these and other diverse populations at  
[www.cccstudentmentalhealth.org](http://www.cccstudentmentalhealth.org).

## Driving Away Stigma

The stigma surrounding mental illness is one reason that students with mental health disorders are reluctant to seek help, either on campus or elsewhere. They may believe that reaching out for help will cause them harm because of discrimination and judgment.

Students of underrepresented or marginalized populations may experience group stigma and social isolation, which can exacerbate feelings of depression and anxiety. The impact of stigma may include:

- bullying and harassment;
- social isolation;
- feelings of failure;

- discrimination at school, work, and housing; or
- fear/distrust of mental health treatment.

Colleges can create a safe and supportive environment for students and staff to discuss mental health issues openly without fear of being judged and to provide specific resources that enhance student wellness. Opportunity areas in which to raise awareness include:

**Educate the entire college community** through events, social marketing campaigns, presentations to groups, and other methods.

**Empower students** to educate and raise awareness about mental health,

potentially through involvement in a campus-based chapter of [NAMI](#), the National Alliance on Mental Illness, or [Active Minds](#).

**Use campus social media channels** to participate in the May is Mental Health Matters Month campaign.

**Present information** about mental health services during campus orientation events.

**Outreach with student cultural clubs/associations** on campus, and cross-promote events and resources with them.

**Reduce stigma** about mental health issues and promote wellness as part of a campus-wide mental health strategy.



**Each Mind Matters**, California's Mental Health Movement funded by the California Mental Health Services Authority (CalMHSA), has a large catalogue of useful resources and programs related to suicide prevention, mental health awareness, and stigma reduction. <http://www.eachmindmatters.org>

**Do you believe that each mind matters?**

**MAKE A PLEDGE!**

I pledge to know my students, to show them that I care for them authentically, and will do my best to provide a safe and supportive school where they can thrive and live up to their potential!

— Pledge made on [EachMindMatters.org](http://www.eachmindmatters.org)

**Customizable PSAs are now available for download!** You can now customize 5 different PSAs to include your campus branding and local resources, such as the phone number for your health center, a link to your campus mental health resource page, or contact info for your campus mental health clubs. [www.cccstudentmentalhealth.org/resources/psa](http://www.cccstudentmentalhealth.org/resources/psa)

## Resources

When a student does want to seek help for mental health problems, will the resources he or she needs be available? One factor for low utilization of mental health services among young adults is lack of readily available resources and barriers for accessing these resources. Students may be unaware of where to access services, either on campus or at community-based organizations. Students may not have health insurance or may have a policy that does not adequately cover mental health services. Some students may even have tried to get help before but were turned away.

Clearly, faculty and staff at community colleges have an important role to play in addressing the problem of low rates of mental health services utilization by students. Faculty and staff are in an excellent position to recognize the possibility that a student may need additional supports and to approach that student with caring and concern. In talking with the student, the faculty and staff member can provide critical information on the availability of counseling, a first step in getting treatment. Faculty and staff can serve as advocates with college administration to ensure that mental health services are available to students.

Some of the mental health resources and supports that can help students at community colleges include:

- Health center services
- Intervention teams
- Disabled Student Programs and Services
- Extended Opportunity Programs and Services
- Counseling departments
- Police or security departments
- Coordination with local mental health providers
- County Crisis Lines



## Barriers to Accessing Mental Health Services

- Need for readily available resources
- Student awareness of where to access services
- Student health insurance



### COORDINATION WITH COMMUNITY MENTAL HEALTH PROVIDERS

It is very important for college campuses to have a clear protocol for coordinating with community mental health providers and local mental health systems to ensure that students get the help they need, especially in a crisis. A campus must be able to refer students who are identified as potentially suicidal to appropriate mental health providers for treatment. The biggest obstacle to service and treatment coordination is the appropriate concern around protecting students' confidential health information in compliance with federal law. However, there are formal policies and procedures that can be put into place that both protect students' confidentiality and allow on-campus and off-campus providers to enable the exchange of crucial information and to help link students to care in a timely manner.

<http://cccstudentmentalhealth.org/docs/CCCSMHP-Collaboration-Toolkit-BMHD.pdf>

## Other Relevant Websites

**Each Mind Matters** ([EachMindMatters.org](http://EachMindMatters.org)) – California's Mental Health Movement. Millions of individuals and thousands of organizations working to advance mental health.

**Know the Signs** ([SuicideisPreventable.org](http://SuicideisPreventable.org)) – A statewide suicide prevention social marketing campaign built on three key messages: Know the signs. Find the words. Reach out.

**Kognito Interactive** (<https://ccc.kognito.com/>) – Interactive courses based on research in neuroscience, social cognition, and game mechanics. Learn how you can help students you are worried about. Trainings available for faculty, staff, and students.

**MY3 App** (<http://www.my3app.org>) – MY3 is for individuals who may be having thoughts of suicide, or who have a history of suicidal behavior. It is designed to help these individuals stay safe when they are experiencing thoughts of suicide.

**Promoting Student Mental Health: A Guide for UC Faculty and Staff** ([http://www.ucop.edu/student-mental-health-resources/\\_files/pdf/PSMH-guide.pdf](http://www.ucop.edu/student-mental-health-resources/_files/pdf/PSMH-guide.pdf)) – Provides a complete listing of signs of distress and ways you can promote student mental health.

**Reachout** (<http://us.reachout.com>) – An information and support service using evidence-based principles and technology to help teens and young adults facing tough times and struggling with mental health issues.



**California Community Colleges  
Student Mental Health Program (CCC SMHP)**  
**Toll-free: (855) 304-1647**  
**[www.cccstudentmentalhealth.org](http://www.cccstudentmentalhealth.org)**

## References

1. <https://www.nimh.nih.gov/health/statistics/prevalence/any-mental-illness-ami-among-us-adults.shtml>
2. Heinssen, R. K., Goldstein, A. B., & Azrin, S. T. Recovery After an Initial Schizophrenia Episode (RA1SE), National Institute of Mental Health (NIMH), National Institutes of Health. (2014). Evidence-Based Treatments for First-Episode Psychosis: Components of Coordinated Specialty Care. [http://www.nimh.nih.gov/health/topics/schizophrenia/raise/nimh-white-paper-csc-for-fep\\_147096.pdf](http://www.nimh.nih.gov/health/topics/schizophrenia/raise/nimh-white-paper-csc-for-fep_147096.pdf)
3. American College Health Association. (2015). American College Health Association-National College Health Assessment II: California Community Colleges Reference Group Executive Summary Spring 2015. Hanover, MD: American College Health Association.
4. Quinn, S. (2017). HSACCC Research Report 2017. <http://www.hsacc.org/2017.Wed.Research.Report.Susan.Quinn.pdf>

The California Community Colleges Student Mental Health Program (CCC SMHP) is dedicated to increasing the capacity of the CCC system to provide student mental health services. Funded by the California Mental Health Services Authority, this program offers cost-free training and technical assistance (TTA) to California's community college campuses.

The California Mental Health Services Authority (CalMHSA) is an organization of county governments working to improve mental health outcomes for individuals, families and communities. Prevention and Early Intervention programs implemented by CalMHSA are funded through the voter-approved Mental Health Services Act (Prop 63). Prop 63 provides the funding and framework needed to expand mental health services to previously underserved populations and all of California's diverse communities.



# Student Mental Health Program

Training and Technical Assistance for California Community Colleges



EachMind  
**MATTERS**  
California's Mental Health Movement

FOUNDATION for CALIFORNIA  
COMMUNITY COLLEGES



## Campus Information

This form is provided for you to complete and keep for your easy reference.

**Student  
Health Services**

**Mental Health  
Counseling Services**

**Extended Opportunity  
Programs and Services**

**Disabled Student Programs  
and Services (DSPS)**

**Dean of Students**

**Veterans Services**

**EAP or Faculty/Staff  
Assistance Programs**

**Campus Police or 911**

**County Crisis Lines**

**Crisis Text Line | Text 741741 anywhere, anytime | [www.crisistextline.org](http://www.crisistextline.org)**

California Community Colleges Student Mental Health Program (CCC SMHP)  
Toll-free: 855.304.1647 [www.cccstudentmentalhealth.org](http://www.cccstudentmentalhealth.org)