California Community Colleges Student Mental Health Program

Final Evaluation Report Appendices



Prevention Research Center

Oakland, California

Appendix A: Kognito Solutions Data

This appendix provides more details on the data collected in concert with the Kognito Solutions training programs.

Brief surveys were administered before the Kognito training (Pretest), immediately after the training (Posttest), and 3 months later (Follow-Up). A large number of faculty, staff, and students from across the California community colleges participated in the trainings, but as can be seen in the "maximum reach" the rate of participation, especially among students, was never very large. This leaves room for improving participation rates, most likely via the use of incentives.

Participation rates at both college and individual levels:

Table 1. Descriptive Results on Trainings (N = 112 campuses):

	<u>Mode</u>	<u>Median</u>	Mean (SD)	Maximum	Max Reach ¹
FSA At-Risk	0	6.5	25 (41)	273	25.4%
Student At-Risk	0	1	74 (172)	964	4.7%
VOC (FSA)	0	2	14 (26)	146	16.5%
VOC P2P	0	0	9 (30)	229	1.7%
LGBTQ OC (FSA)	0	1	6 (15)	117	11.8%
LGBTQ OC (Students)	0	0	12 (38)	255	1.9%

¹Reach based on maximum number of trainings

<u>Note</u>: FSA = Faculty/Staff/Administrators, VOC = Veterans on Campus, P2P = Peer to Peer, LGBTQ = Lesbian, gay, bisexual, transgender, queer/questioning

Table 2. Across the CCC System

	<u>Total</u>
FSA At-Risk	3,074
Student At-Risk	8,543
VOC (FSA)	1,597
VOC P2P	1,169
LGBTQ OC (FSA)	704
LGBTQ OC (Students)	1,495
Grand Total:	16,582

Demographics of the Trainees were obtained for those that completed the Posttest survey. (Demographic questions were administered at the Posttest instead of the Pretest to reduce the burden of taking the Pretest, so that potential trainees could get to the training as quickly as possible.)

Table 3. Demographics of Trainees

					Race (not mutually			exclusive)		
	Sample Size	Female	Trans- gender	Hispanic	Caucasian	Amer. Indian/ Native Alaskan	Asian	Black/ African Amer.	Native Hawaiian/ Pacific Islander	
FSA At-Risk	2286	70%	0.6%	20%	78%	5%	12%	6%	1%	
Student At- Risk	6776	64%	0.5%	34%	45%	2%	17%	8%	1%	
VOC (FSA)	1179	71%	0.5%	23%	62%	3%	13%	7%	1%	
VOC P2P	961	66%	0.4%	34%	63%	8%	24%	10%	2%	
LGBTQ OC (FSA)	489	73%	0.6%	18%	81%	6%	12%	8%	1%	

					Ra	ace (not n	nutually e	exclusive)
	Sample		Trans-			Amer.			Native
	Size	Female	gender	Hispanic		Indian/		Black/	Hawaiian/
	0.20					Native		African	Pacific
					Caucasian	Alaskan	Asian	Amer.	Islander
LGBTQ OC (Students)	1181	65%	0.7%	33%	64%	8%	24%	10%	2%

Limitations

The results reported on Kognito data is obtained from those that undertook the trainings, and this may not be a representative sample. Regarding the results on increases in referral rates, the follow-up completions were quite low. Follow-up completion rates for students were lower than those for Faculty/Staff/Administrators, and the apparent increase among referral rates for students, may reflect a selection bias in those taking the Follow-Up Survey. Campus climate ratings could be a function of other CBG based initiatives on campus, and external factors as well. The campus climate data is cross-sectional and not longitudinal.

The following pages include copies of the Faculty and Staff questionnaires, including questions asked just before the training, just after the training, and at the 3-month follow up. These are followed by a copy of the questions before and after the student training.

CCC At-Risk Faculty - Pre

Before we begin the course, please answer these short questions. Your answers will provide the CCC SMHP Program Evaluator valuable information.

Your participation in this survey is voluntary. There will be no negative consequences to you if you decide not to participate. All of your identifying information and answers are confidential. Your results will be combined with responses from other survey participants and may be presented at scientific or medical meetings or published in scientific journals. By submitting your answers to this survey, you are agreeing that you have read and understand the nature and consequences of participating. If you do not want to participate, please click "Exit Survey" button on the upper right corner.

1. How would you rate your preparedness to:

	Low	Medium	High	Very high
Recognize when a student's behavior is a sign of psychological distress		1	J	J
Recognize when a student's physical appearance is a sign of psychological distress	J	<u>J</u>	J	<u>J</u>
Discuss with a student your concern about the signs of psychological distress they are exhibiting	J	<u> </u>	J	<u>J</u>
Motivate a student exhibiting signs of psychological distress to seek help	J	J	J	J
Recommend mental health support services (such as the counseling center) to a student exhibiting signs of psychological distress	J	J	J	3

2. How likely are you to discuss your	concerns with	a student e	xhibiting :	signs of
psychological distress?				

the very criminal to thinkery the circles	jh	Very Unlikely	\mathbf{J}	Unlikely	\mathbf{j} h	Likely	jih	Very Like
---	----	---------------	--------------	----------	----------------	--------	-----	-----------

3. How likely are you to recommend mental health support services (such as the counseling center) to a student exhibiting signs of psychological distress?

J	Very Unlikely	J	Unlikely	J	Likely	♪	Very Likely
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4. Please rate how much you agree/disagree with the following statements:

	,	9	5		9		
				Strongly disagree	Disagree	Agree	Strongly agree
I feel confident in my ability to dis exhibiting signs of psychological d	•	oncern with a	student	J	j	J	<u>.</u>
I feel confident in my ability to red services to a student exhibiting sig			• •	<u>J</u>	J	J	3
I feel confident that I know where support	to refer a s	tudent for me	ntal health	J	<u>J</u>	J	J
I feel confident in my ability to hel	p a suicida	al student see	k help	<u></u>	J	J	J
Part of the role of faculty, staff and experiencing psychological distres				J	<u>j</u>	J	J

CCC At-Risk Faculty - Pre

5. In the past m							_	
utilize mental h	nealth servi	ces, would	you have	done so if	the oppo	ortunity h	ad occur	red?
Never	∄ Ra	rely	Sometime	imes	Often		Never	
6. In the past to	wo months,	approximat	ely how n	nany stude	nts have	you		
Been concerned about of	due to their psychol	ogical distress						
Approached to discuss y	our concerns about	their psychologica	l distress					
Referred to support servi	ces							
7. To what extent do you think								
	ý			Not at all or to a very little extent	To a little extent	To some extent	To a great extent	To a very great extent
there are efforts in your psychological stress to r		_	igns of	ij.	J	J	J	j
others in your institution	are aware of these	efforts?		J	J	J	J	J
the leaders of your instit	ution are supportive	of these efforts?		<u>j</u>	J		J	
the prevailing attitude w students exhibiting signs services?	-			<u>J</u>	<u>j</u>	J	<u></u>	<u></u>
members of your institut stress, its consequences community?			ogical	3	J	<u>.</u> j	J	<u></u>
resources are available space – to support effort	•	on – people, time,	money,	J	<u></u>	J	<u>J</u>	<u>J</u>
8. Please rate t			0	•	sons with	n diverse	backgro	ounds
by marcating y	Hostile	J	hat hostile	Neutral	Somey	vhat welcomin	g Welco	omina
Students with physic disabilities			J	J		j	j	
Students with menta health issues	l <u>J</u>	-	J	J		J	j	Ĺ
Women students	j		j	J		j	j	h
Racial/ethnic minori		-	J	J		j	j	į.
Gay, lesbian, bisexu transgendered stude		-	j.	J		J	j	į.
Students with differe religious beliefs and backgrounds	nt <u>j</u>	-	3 14	<u>J</u>		J	j	ia
Student Veterans	10		j i	<u> </u>		<u>H</u> ı	1	1

CCC At-Risk Faculty - Pre

9. How often have you read, heard, or seen insensitive or negative comments or material at this college about each of the following?

	Never	Rarely	Sometimes	Often
Students with physical disabilities	<u>.</u>			1
Students with mental health issues		J.		3 1
Women students	J	J	J	J
Racial/ethnic minority students	J	J	J	J
Gay, lesbian, bisexual, and transgendered students		J	<u> </u>	3 1
Students with different religious beliefs and backgrounds	J	ⅎ	J	3
Student Veterans	J	J	J	J

CCC At-Risk Faculty - Post

Dear Faculty, Administrator, or Staff Member

This short survey has been designed to assist your institution in assessing the course you just completed, to learn more about the needs of its community, and to further improve this program.

Your participation in this survey is voluntary. There will be no negative consequences to you if you decide not to participate. All of your identifying information and answers are confidential. Your results will be combined with responses from other survey participants and may be presented at scientific or medical meetings or published in scientific journals. By submitting your answers to this survey, you are agreeing that you have read and understand the nature and consequences of participation.

Thank you for your participation.

1. After taking the course, how would you rate your preparedness to:

	Low	Medium	High	Very high
Recognize when a student's behavior is a sign of psychological distress		<u>J</u>	J	j
Recognize when a student's physical appearance is a sign of psychological distress	J	<u>i</u>	J	<u>i</u>
Discuss with a student your concern about the signs of psychological distress they are exhibiting	J	<u> </u>	J	j
Motivate students exhibiting signs of psychological stress to seek help	J	J	J	<u></u>
Recommend mental health support services (such as the counseling center) to a student exhibiting signs of psychological distress		J	<u>j</u>	j

2. How likely are you to discuss y	our concerns with	a student e	xhibiting s	signs of
psychological distress?				

	Very Likely	_ ♣ Likely	🕕 Unlikely	Very Unlikely
--	-------------	-------------------	------------	---------------

3. How likely are you to recommend mental health support services (such as the counseling center) to a student exhibiting signs of psychological distress?

Very Unlikely	Unlikely	<u></u> Likely	J Very Likely

4. Please rate how much you agree/disagree with the following statements:

	Strongly disagree	Disagree	Agree	Strongly agree
I feel confident in my ability to discuss my concern with a student exhibiting signs of psychological distress	J	J	J	
I feel confident in my ability to recommend mental health support services to a student exhibiting signs of psychological distress	<u>J</u>	J	J	J
I feel confident that I know where to refer a student for mental health support	J	J	J	J)
I feel confident in my ability to help a suicidal student seek help	J	<u></u>	J	J
Part of the role of faculty, staff and administrators is to connect students experiencing psychological distress with mental health support services	J	J	J	J)
All faculty, staff and administrators in my academic institution should take this course	J	<u>J</u>	J	J

CCC At-Risk Faculty - Post

■ No

5. In the past two months, approximately how many students have you					
Been concerned about due to their psych	nological distress				
Approached to discuss your concerns about their psychological distress					
Referred to support services					
6. Overall, how would you	ı rate this course?				
Poor	J Good	Very good	<u>J</u>	Excellent	

7. How long did it take you to complete the course?

. Would y	ou recommend this course to your colleagues?
_∰ Ye	as a second of the second of t
	,

9. Please indicate to what extent you think that the course is

	Not at all or to some extent	To a little extent	To some extent	To a great extent	To a very great extent
A useful tool?	<u>j</u>	1	J	J	J
Well-constructed?	J	J	J	J	J
Easy to use?	<u>j</u>	1	J	<u>j</u>	J
Likely to help you with students in psychological distress?	J	J	1	J	J
Based on scenarios that are relevant to you and your students?	j	Ī		J	<u></u>
Aid you in getting timely help to your students?	J	J	J	J	J

CCC At-Risk Faculty - Post

10. To what extent do	you think				
	Not at all or to a very little extent	To a little extent	To some extent	To a great extent	To a very great extent
there are efforts in your institution to link students exhibiting signs of psychological stress to mental health support services?	J	<u>J</u>	J	_	<u></u>
others in your institution are aware of these efforts?	J	j	J	J	JI.
the leaders of your institution are supportive of these efforts?	J	JI.	J.	J	J
the prevailing attitude within your institution is supportive of efforts to link students exhibiting signs of psychological stress to mental health support services?	J).	J	J	3	3
members of your institution understand the causes of psychological stress, its consequences, and how it impacts the institution or	. 3)	<u>J</u> I	J	.	.
resources are available within your institution – people, time, money, space					
– to support efforts on this issue?	1	<u>J</u>	J	J.	J

11. Prior to taking this course, had you received gatekeeper training in suicide prevention?

∄ No

Ji Yes (please specify in what format you received the training such as a workshop, online course, or written material)

12. Have you ever received training to become a mental health practitioner?

1	No	
j	Yes	

CCC At-Risk Faculty - Post					
13. Do you currently teach or have yo	u ever	taught cours	es in Psyc	chology?	
n Yes					
No No					
 14. What subjects/disciplines do you o	generall	ly teach?			
5					
15. Different people have different leve	els of al	oility for perfo	orming diffe	erent tasks.	In terms
of your abilities, please rate the extent	to whic	ch you can pe	rform each	of the follo	owing using
this 1-5 scale:	o voru littlo	ovtont			To a yeary great
Not at all or to	a very little	To a little ext	ent To some ex	tent To a great ex	tent extent
I will be able to achieve most of the goals that I have set for myself.	1	J	<u>j</u>	J	J
When facing difficult tasks, I am certain that I will accomplish them.	J	J	J	J	J
In general, I think that I can obtain outcomes that are important to me.	J)	J	j	J	3 1
I believe I can succeed at most any endeavor to which I set my mind.	in	<u></u>	J	J	<u>J</u>
I will be able to successfully overcome many challenges.	1	J	<u>j</u>	J	1
I am confident that I can perform effectively on many different tasks.	<u>j</u> h	J	J)	<u> </u>	<u> </u>
Compared to other people, I can do most tasks very well.	J	J	j	J	<u> </u>
Even when things are tough, I can perform quite well.	J	J	J	J	J
16. How did you hear about this cours	se (chec	ck all that ap	ply)?		
Email from an administrator or staff member					
Flyer in my mailbox					
Poster in the school					
© Colleague					
Other (please specify)					

	CC Al-RISK Faculty - PUS					
17	. What is your employment sta	tus	6?			
	■ Full-time faculty member	M	Teaching assistant		<u></u>	Administrator or staff member
	Adjunct faculty member	J	Graduate student teacher		1	Peer counselor
	① Other (please specify)					
18	. Please provide us with the fol	lov	ving information			
City	y/Town:					
Sta	te/Province:					
ZIP	Postal Code:					
Ema	ail Address:					
19	. Gender					
	∄ Female					
	Male					
	1 Transgender					
20	. Are you Hispanic or Latino?					
	 J Yes					
A	No					
21	. If yes, which group represents	S V(ou? (Select one or r	more)		
	Mexican, Mexican American, or Chicano	,	(11)	,		
	Puerto Rican					
	€ Cuban					
	Dominican					
	© Central American					
	South American					
22	. What is your race? (Select on	e o	r more)			
	White/Caucasian		•			
	 American Indian or Alaska Native 					
	Asian					
	Black or African American					
	Native Hawaiian					

CCC At-Risk Faculty - Post
23. What did you like best about the course?
5
6
24. What would you change to make it more effective?
5
6
25. Any other suggestions or comments?
5
6
26. If you would be willing to discuss your experience with the course over the phone,
please provide your name and phone number
5
6

CCC At-Risk Faculty - Follow Up

Dear Faculty, Administrator, or Staff Member

Several months ago, you completed At-Risk, an online gatekeeper training course designed to prepare faculty and staff to identify, approach, and refer students exhibiting signs of psychological stress. We ask that you take this 4-minute confidential follow-up survey to help assess the effectiveness of the course and the needs of your institution and community.

Your participation in this survey is voluntary. There will be no negative consequences to you if you decide not to participate. All of your identifying information and answers are confidential. Your results will be combined with responses from other survey participants and may be presented at scientific or medical meetings or published in scientific journals. By submitting your answers to this survey, you are agreeing that you have read and understand the nature and consequences of participation.

Thank you for your participation.

1. How would you rate your preparedness to:

Very Unlikely
Unlikely

	Low	Medium	High	Very high
Recognize when a student's behavior is a sign of psychological distress	J	J	J	1
Recognize when a student's physical appearance is a sign of psychological distress	J	<u>j</u>		J
Discuss with a student your concern about the signs of psychological distress they are exhibiting	J	<u> </u>	1	
Motivate students exhibiting signs of psychological distress to seek help	J	J	J	J
Recommend mental health support services (such as the counseling center) to a student exhibiting signs of psychological distress	j	J	j	

Likely

Very Likely

2. How likely are you to discuss yo	ur concerns with	n a student exh	ibiting signs of
psychological distress?			

3.	How likely a	are you to red	commend menta	al health supp	ort services	(such a	is the

counseling center) to	a student exhibitin	g signs of psychological c	listress?
Very Unlikely	Unlikely	J Likely	Very Likely

CCC At-Risk Faculty - Follow Up

4. Please rate how much you agree/disagree with the following statements	S:
--	----

	Strongly disagree	Disagree	Agree	Strongly agree
I feel confident in my ability to discuss my concern with a student exhibiting signs of psychological distress	J	J	J	<u>.</u> j)
I feel confident in my ability to recommend mental health support services to a student exhibiting signs of psychological distress	J.	<u>J</u>		J
I feel confident that I know where to refer a student for mental health support	J	J	J	J
I feel confident in my ability to help a suicidal student seek help	J	J.	<u>J</u>	J
Part of the role of faculty, staff and administrators is to connect students experiencing psychological distress with mental health services	J	J	J	1
All faculty, staff and administrators in my academic institution should take this course	J	J	J	J

5. Please rate how much you agree/disagree with the following statements that begin with:

As a result of taking the At-Risk gatekeeper course there has been an increase in the number of students that I have:

	Strong Disagree	Disagree	Agree	Strongly Agree
Recognized as exhibiting signs of psychological distress	<u>j</u>	J	1	J
Approached to discuss my concern about their psychological distress	J	J	<u>J</u>	J
Referred to mental health support services		J	J	

6. As a result of this course, there has been an increase in the number of conversations I
have had with other faculty, staff and/or administrators regarding students that I am
concerned about

- Strongly Disagree
 Disagree
 Agree
 Strongly Agree
- 7. In the past month, whether or not you have approached a student to encourage them to utilize mental health services, would you have done so if the opportunity had occurred?
- Never Rarely Sometimes Often Always
- 8. In the past two academic months, approximately how many students have you \dots

Been concerned about due to their psychological distress

Approached to discuss your concerns about their psychological distress

Referred to support services

CCC At-Risk Faculty - Follow Up 9. To what extent do you think ... Not at all or to a very little extent to a little extent To some extent To a great extent To a very great extent there are efforts in your j jh j j jh institution to link students exhibiting signs of psychological stress to mental health support services? others in your institution are jh J jh <u>j</u>h j aware of these efforts? the leaders of your j jj jj j ijħ institution are supportive of these efforts? the prevailing attitude J j 1 j 1 within your institution is supportive of efforts to link students exhibiting signs of psychological stress to mental health support services? members of your institution jh jh jh j jh understand the causes of psychological stress, its consequences, and how it impacts the institution or community? resources are available 1 jh 1 Ð jh within your institution people, time, money, space - to support efforts on this issue? 10. Please rate the climate at this college in general for persons with diverse backgrounds by indicating your response using the following scale: Hostile Somewhat hostile Neutral Somewhat welcoming Welcoming Students with physical jjh jjh j j j disabilities Students with mental jh jh <u>j</u> jh jh health issues Women students j jh jh jh Racial/ethnic minority J jh J J j students Gay, lesbian, bisexual, and J J transgendered students Students with different 1 1 J J 1 religious beliefs and backgrounds Student Veterans j j J

CCC At-Risk Faculty - Follow Up

11. How often have you read, heard, or the following?

	Never	Rarely	Sometimes	Often
Students with physical disabilities	J	J		J
Students with mental health issues	<u>J</u>	<u>J</u> L	<u>J</u>	J
Women students		J		j
Racial/ethnic minority students	<u></u>	<u>J</u>	<u>J</u>	J
Gay, lesbian, bisexual, and transgendered students	<u> </u>	J	<u></u>	J
Students with different religious beliefs and backgrounds	<u>J</u> h	J	J	<u> </u>
Student Veterans		J	<u></u>	J

12. Since taking the course, do you have any suggestions on how your academic institution can improve its outreach efforts to better engage individuals such as yourself in assuming the role of a gatekeeper?



13. Any other suggestions or comments?

5	
6	

Before we begin the course, please answer a few short questions. Your answers will provide the CCC SMHP Program Evaluator with valuable information.

Your participation in this survey is voluntary. There will be no negative consequences to you if you decide not to participate. All of your identifying information and answers are confidential. Your results will be combined with responses from other survey participants and may be presented at scientific or medical meetings or published in scientific journals. By submitting your answers to this survey, you are agreeing that you have read and understand the nature and consequences of participating. If you do not want to participate, please click "Exit Survey" button on the upper right corner.

1. How would you rate your preparedness to:

	Low	Medium	High	Very high
Recognize when a fellow student's behavior is a sign of psychological distress	J	<u>J</u>	J	J
Recognize when a fellow student's physical appearance is a sign of psychological distress.	<u></u>	<u>j</u> h	3	<u>j</u> h
Discuss with a fellow student your concern about the signs of psychological distress they are exhibiting	J	<u>j</u> l	J	<u>J</u>
Motivate a fellow student exhibiting signs of psychological distress to seek help	in	<u>J</u>		<u>J</u>
Recommend mental health support services (such as the counseling center) to a fellow student exhibiting signs of psychological distress	1	J	<u></u>	J

2. How likely are you to discuss your concerns with a fellow student exhibiting signs of	f
psychological distress?	

<u>J</u>	Very Unlikely	Julikely	Likely	Very Likely
----------	---------------	----------	--------	-------------

3. How likely are you to recommend mental health support services (such as the counseling center) to a fellow student exhibiting signs of psychological distress?

jh	Very Unlikely	<u>j</u>	Unlikely	1	Likely	1	Very Likely

4. Please rate how much you agree/disagree with the following statements:

	Strongly Disagree	Disagree	Agree	Strongly agree
I feel confident in my ability to help a suicidal student seek help	J	1	J	1
I may seek help from the counseling center or health services myself when feeling stressed	J	J	J	J

5. In the past two months, how many fellow students have you ...

Been concerned about due to their psychological stress

Approached to discuss your concerns about their psychological stress

Referred to support services

6. To what extent do you think ...

	Not at all or to a very little extent	To a little extent	To some extent	To a great extent	To a very great extent
there are efforts in your institution to link students exhibiting signs of psychological stress to mental health support services?	J	J	J	J	1
others in your institution are aware of these efforts?	<u></u>	J	1	.	<u></u>
the leaders of your institution are supportive of these efforts?	j	J	1	J	1
the prevailing attitude within your institution is supportive of efforts to link students exhibiting signs of psychological stress to mental health support services?	<u>J</u>	J	J	J	J
members of your institution understand the causes of psychological stress, its consequences, and how it impacts the institution or community?	J	J	J	J	1
resources are available within your institution – people, time, money, space – to support efforts on this issue?	<u>J</u>	J	J	J	J

7. Please rate the climate at this college in general for persons with diverse backgrounds by indicating your response using the following scale:

	Hostile	Somewhat hostile	Neutral	Somewhat welcoming	Welcoming
Students with physical disabilities	J.		J	<u>j</u>	<u></u>
Students with mental health issues	J	J	J	J	J
Women students	<u>j</u>	<u></u>	J		<u>J</u>
Racial/ethnic minority students	J	J	J	<u>J</u>	<u>J</u> h
Gay, lesbian, bisexual, and transgendered students	<u>J</u>	J	J	J	<u>J</u> 1
Students with different religious beliefs and backgrounds	<u>J</u>	<u>.</u>	J h	<u>J</u> .	J
Student Veterans	1	J	J	J	J

8. How often have you read, heard, or seen insensitive or negative comments or material at this college about each of the following?

	Never	Rarely	Sometimes	Often
Students with physical disabilities			<u></u>	
Students with mental health issues	<u>J</u>		J	J
Women students	J		J	J
Racial/ethnic minority students	<u>J</u>	J	J	J
Gay, lesbian, bisexual, and transgendered students	_j	J	4	j
Students with different religious beliefs and backgrounds	J	J	J	J
Student Veterans	j.	Ji)	J	<u>j</u>

Dear Student

Very unlikely

Very Unlikely

This short survey has been designed to assist your institution in assessing the course you just completed, to learn more about the needs of its community, and to further improve this program.

Your participation in this survey is voluntary. There will be no negative consequences to you if you decide not to participate. All of your identifying information and answers are confidential. Your results will be combined with responses from other survey participants and may be presented at scientific or medical meetings or published in scientific journals. By submitting your answers to this survey, you are agreeing that you have read and understand the nature and consequences of participation.

Thank you for your participation.

1. After taking the course, how would you rate your preparedness to:

	Very Low	Low	Medium	High	Very high
Recognize when a fellow student's behavior is a sign of psychological distress	J.	J	<u>.</u>	J	
Recognize when a fellow student's physical appearance is a sign of psychological distress.	J	<u>J</u>	J	J	<u>J</u>
Discuss with a fellow student your concern about the signs of psychological distress they are exhibiting	J	J		J	<u> </u>
Motivate a fellow student exhibiting signs of psychological distress to seek help	<u>J</u>	J	.	J	<u>J</u>
Recommend mental health support services (such as the counseling center) to a fellow student exhibiting signs of psychological distress	H	J		J	1

2. How likely are you to discuss your concerns w	ith a fellow student exhibiting signs of
psychological distress?	

Likely

1 Likely

Very likely

Very Likely

3. How likely are you to recommend mental health support services (such as the	Š
counseling center) to a fellow student exhibiting signs of psychological distress	3?

Unlikely

Unlikely

	much you agree/o	disagree v		O		
			Strongly Disagree	Disagree	Agree	Strongly Agree
I feel confident in my ability to exhibiting signs of psychologic		fellow student	J	<u></u>	Ī	<u>.</u> j
I feel confident in my ability to services to a fellow student ex			J	J	<u> </u>	<u></u>
I feel confident in my ability to	o help a suicidal fellow stude	ent seek help	<u>J</u>	J	J	j
I feel confident that I know wh	nere to refer a fellow student	for mental	J	J)	J	J
Part of the role of students is a psychological distress with me		xperiencing	J	J	J	J
All students in my academic in	nstitution should take this co	urse	j	J	J	J
5. Overall, how wo	uld you rate this c	ourse?				
p Poor	 Good		Very good		Excellent	
6. How long did it t						
7. Would you recor	mmend this cours	se to your	friends and p	peers?		
1 Yes			∄ No			
8. In your estimation	n, to what extent	is At-Risk				
		Not at all or to very little exten	a To a little extent	To some extent	To a great extent	To a very great extent
A useful tool?		Not at all or to	a To a little extent	To some extent	To a great extent	
A useful tool? Well constructed?		Not at all or to very little exten	a To a little extent it		-	extent
		Not at all or to very little exten	a To a little extent	J	j	extent
Well constructed?		Not at all or to very little exten	To a little extent	J	J	extent
Well constructed? Easy to use?	ed students?	Not at all or to very little exten	To a little extent	J J	J	extent
Well constructed? Easy to use? Likely to help you help trouble Based on scenarios that are re	ed students? elevant to you and your	Not at all or to very little exten	To a little extent	J J	31 31 31	extent
Well constructed? Easy to use? Likely to help you help trouble Based on scenarios that are refellow students?	ed students? elevant to you and your to your fellow students?	Not at all or to very little extend	To a little extent	J J J	ji ji ji	extent
Well constructed? Easy to use? Likely to help you help trouble Based on scenarios that are refellow students? Aid you in getting timely help	ed students? elevant to you and your to your fellow students? months, how many	Not at all or to very little extend	To a little extent	J J J	ji ji ji	extent
Well constructed? Easy to use? Likely to help you help trouble Based on scenarios that are re fellow students? Aid you in getting timely help 9. In the past two re	ed students? elevant to you and your to your fellow students? months, how many heir psychological stress	Not at all or to very little extended in the very little e	To a little extent	J J J	ji ji ji	extent
Well constructed? Easy to use? Likely to help you help trouble Based on scenarios that are refellow students? Aid you in getting timely help 9. In the past two notes that the past two notes the past two no	ed students? elevant to you and your to your fellow students? months, how many heir psychological stress	Not at all or to very little extended in the very little e	To a little extent	J J J	ji ji ji	extent
Well constructed? Easy to use? Likely to help you help trouble Based on scenarios that are refellow students? Aid you in getting timely help 9. In the past two notes that the past two notes the past two notes the past two notes that the past two notes the	ed students? elevant to you and your to your fellow students? months, how many heir psychological stress	Not at all or to very little extended in the very little e	To a little extent	J J J	ji ji ji	extent
Well constructed? Easy to use? Likely to help you help trouble Based on scenarios that are refellow students? Aid you in getting timely help 9. In the past two notes about due to the Approached to discuss your conserved to support services	ed students? elevant to you and your to your fellow students? months, how many heir psychological stress	Not at all or to very little extended in the very little e	To a little extent	J J J	ji ji ji	extent

10. Different people have different levels of ability for performing different tasks. In terms of your abilities, please rate the extent to which you can perform each of the following using this 1-5 scale:

	Not at all or to a very little extent	To a little extent	To some extent	To a great extent	To a very great extent
I will be able to achieve most of the goals that I have set for myself.		j	j	J	_j
When facing difficult tasks, I am certain that I will accomplish them.	<u>J</u>	J	J	J	<u>J</u>
In general, I think that I can obtain outcomes that are important to me.	<u>.</u>	J	1	J	<u>J</u>
I believe I can succeed at most any endeavor to which I set my mind.	<u> </u>	J	<u>J</u>		J
I will be able to successfully overcome many challenges.	J	J	1	J	J
I am confident that I can perform effectively on many different tasks.	<u> </u>	J	J	J	<u>J</u>
Compared to other people, I can do most tasks very well.	J	J	1	J	J
Even when things are tough, I can perform quite well.	<u></u>	₫	<u></u>	J	J

11. To what extent do you think ...

	Nct at all or to a very little extent	To a little extent	To some extent	To a great extent	To a very great extent
there are efforts in your institution to link students exhibiting signs of psychological stress to mental health support services?	<u> </u>	J	<u></u>	Ī	
others in your institution are aware of these efforts?	J	<u>J</u>	<u></u>	<u>J</u>	<u>J</u>
the leaders of your institution are supportive of these efforts?	j	J	<u>J</u> 1	J	<u>j</u>
the prevailing attitude within your institution is supportive of fforts to link students exhibiting signs of psychological stress to menta health support services?	<u>J</u>	J	J	J	J).
members of your institution understand the causes of psychological stress, its consequences, and how it impacts the institution or community?	J	J	J	J	J
resources are available within your institution – people, time, money, space – to support efforts on this issue?	J	J	1	1	<u></u>

12.	How did you hear about this course (check all that apply)?
é	Email from a school administrator or faculty
e	Counseling Center
e	Poster
é	Friend (word of mouth)
é	Flyer
e	Other (please specify)
13.	Please select your year:
<u></u>	Freshman
₫	Sophomore
∄	Junior
<u></u>	Senior
1	Other
14.	Are you a Peer Counselor or Student Leader?
<u></u>	Yes
J	No
15.	Was taking this course mandatory?
1	Yes
1	No
	Please provide us with the following information
State	e: <u>6</u>
Your	age:
17.	Gender
J	Female
1	Male
<u></u>	Transgender

18. What is your race? (Select one or more)
White/Caucasian
American Indian or Alaska Native
Black or African American
Native Hawaiian
Hispanic or Latino
19. If you answered "Hispanic or Latino" to the previous question, which group represents you? (Select one or more)
Mexican, Mexican American, or Chicano
E Puerto Rican
€ Cuban
© Dominican
© Central American
South American
20. What did you like best about the course?
21. What would you change to make it more effective?
22. Any other suggestions or comments?
23. If you would be willing to discuss your experience with the course over the phone, please provide your name and phone number

CCC At-Risk Student Leaders - Follow up

Dear Student

Several months ago, you completed At-Risk for Students (Friends in College), an online course designed to prepare students to identify, approach, and refer fellow students exhibiting signs of psychological stress. We ask that you take this 3-minute confidential follow-up survey to help assess the effectiveness of the course and the needs of your institution and community.

Your participation in this survey is voluntary. There will be no negative consequences to you if you decide not to participate. All of your identifying information and answers are confidential. Your results will be combined with responses from other survey participants and may be presented at scientific or medical meetings or published in scientific journals. By submitting your answers to this survey, you are agreeing that you have read and understand the nature and consequences of participation.

Thank you for your participation.

1. How would you rate your preparedness to:

	Low	Medium	High	Very high
Recognize when a fellow student's behavior or appearance is an indicator of psychological stress	J	_j	J	
Approach fellow students exhibiting signs of psychological stress to discuss your concerns	3	<u>J</u>	J	<u>J</u> h
Motivate fellow students exhibiting signs of psychological stress to seek help	<u>J</u>	J	J	H
Refer fellow students exhibiting signs of psychological stress to the counseling center	J	J	J	J

2. How likely are you to discuss your concerns with a fellow student exhibiting signs of psychological distress?

ith	Very unlikely	→ Unlikely	∄ Likelv	→ Very likely

3. How likely are you to recommend mental health support services (such as the counseling center) to a fellow student exhibiting signs of psychological distress?

jh	Very Unlikely	1	Unlikely	$\mathbb{J}_{\mathbf{h}}$	Likely	ⅎ	Very Likely
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4. Please rate how much you agree/disagree with the following statements:

	Strongly Disagree	Disagree	Agree	Strongly Agree
There has been an increase in the number of fellow students that I recognized as exhibiting signs of psychological stress	J	J	J	J
There has been an increase in the number of fellow students that I approached to discuss my concern about their psychological stress	<u>J</u>	J	J	j
There has been an increase in the number of fellow students that I referred	j	j	J	Ð
I feel confident in my ability to help a suicidal student seek help	<u></u>	<u></u>	j	jh.

CCC At-Risk Student Leaders - Follow up 5. In the past two academic months, how many fellow students have you ... Been concerned about due to their psychological stress Approached to discuss your concerns about their psychological stress Referred to support services Served as a peer mentor for 6. To what extent do you think ... Not at all or to To a little To some To a great To a very a very little extent great extent extent extent extent there are efforts in your institution to link students exhibiting signs of J J psychological stress to mental health support services? others in your institution are aware of these efforts? 1 勣 in ,ijh the leaders of your institution are supportive of these efforts? j J jh the prevailing attitude within your institution is supportive of efforts to 亷 ih動 iji link students exhibiting signs of psychological stress to mental health support services? members of your institution understand the causes of psychological Ī ī stress, its consequences, and how it impacts the institution or community? resources are available within your institution - people, time, money, space - to support efforts on this issue?

7. Please rate the climate at this college in general for persons with diverse backgrounds by indicating your response using the following scale:

	Hostile	Somewhat hostile	Neutral	Somewhat welcoming	Welcoming
Students with physical disabilities	<u> </u>	3	J	J	1
Students with mental health issues	J	J	J	j).	J
Women students	J	<u>.</u>	J	J	<u> </u>
Racial/ethnic minority students	J	<u>J</u>	in	<u>J</u>	<u>j</u> l
Gay, lesbian, bisexual, and transgendered students	<u>J</u>	J	J	j	
Students with different religious beliefs and backgrounds		<u></u>	<u>J</u>	<u> </u>	<u>J</u>
Student Veterans		1	J	j	<u>j</u>

CCC At-Risk Student Leaders - Follow up

8. How often have you read, heard, or seen insensitive or negative comments or material at this college about each of the following?

	Never	Rarely	Sometimes	Of
Students with physical disabilities	<u></u>			j.
Students with mental health issues	<u>J</u>	<u>J</u>	<u>J</u>	ih j
Women students				I <u>₹</u> i
Racial/ethnic minority students	<u>j</u> l	<u>J</u>	<u>J</u>	ih j
Gay, lesbian, bisexual, and transgendered students	<u> </u>	J	J	k j
Students with different religious beliefs and backgrounds	<u>J</u>	JI.	J	ih j
Student Veterans	_	J	_	181

9. Any other suggestions or comments?

5

6

Appendix B: Supplemental Data on the TTA Activities

This appendix provides more data related to training and technical assistance (TTA).

- B1: Webinars organized by topic area, satisfaction ratings and number of attendees
- B2: Onsite trainings, topic areas, number or trainings and colleges in attendance
- B3: One-one-One technical assistance, topic areas, number of TA sessions, participants and colleges participation
- B4: Stacked bar chart of TTA topic areas accessed by campuses

APPENDIX B1. Webinars organized by topic area, satisfaction ratings and number of attendees

	Webinars Topic	No. Campuses Represented	Mean Satisfaction/Scale Range	No. Attendees**
		Capacity Building		
1	Planning and Networking Session for CBGs	10	4.7/5*	19
2	Planning and Networking Session for CBGs	14	4.8/5*	20
3	Strategies to Evaluate Student Mental Health Needs: Conducting a Needs Assessment	11	4.7/5*	24
4	Quarterly Reporting Requirements and Admin. NCHA Survey	14	3.3/4	27
5	Evaluation Capacity Survey of Campus Based Mental Health	16	3.3/4	34
6	Training and Technical Assistance Informational Session	14	3.8/4	28
7	CCC SMHP Evaluation Data Follow-up Discussion to CBG Meeting	15	2.6/4	15
8	Making Referrals and Building Relationships	13	3.4/4	22
9	Depression Screening Tools	23	3.1/4	33
10	Affordable Care Act Outreach Methods	18	3.5/4	42
		th Awareness	0.5/4	
11	Introduction to Active Minds	10	3.5/4	20
12	Introduction to Active Minds ¹	7	3.8/4	21
13	Online Guide to Mental Health Services - Website Module for College Websites 13 3.3/4			
14	NAMI- California Campus-Based Programs	8	3.3/4	22
	Service Needs and Support for	High Risk/Underserved	Students	
15	Welcome Home: Veterans on Campus	15	3.2/4	24
16	Trevor Ally Workshop (LGBTQ Support)	17	3.6/4	25
17	Trevor – Connect, Accept, Respond Empower LGBTQ Support	28	3.5/4	33
Crisi	s Intervention Services (Behavioral Intervention Distress, Thre	Teams, Crisis Intervent at Assessment)	ion, Active Shooter,	Students in
18	JED Foundation's Mental Health Supports for Colleges- Web Resources	13	3.9/4	27
19	Balancing Safety and Support on Campus – A Guide to BIT Teams- Jed Foundation	23	3.6/4	37
20	BIT Team (Follow-up Discussion)	11	3.2/4	21
	Suicide F	Prevention		
21	Reach Out Informational Session	5	4.0/4	15
22	Suicide Prevention Resource (plans/policies/ strategies)	11	3.8/4	25
23	Using the C-SSRS ² for Suicide Risk Assessment	12	3.4/4	37
24	Joint Efforts with UC and CSUs to Support Suicide Prevention	29	3.2/4	52
	Totals	350	Mean = 3.5/4	647

^{*} Note: The rating scale for participant surveys was modified in Nov/Dec from 1-5 to 1-4 (with 1 being the lowest). Satisfaction score based on a 5 point scale were converted to a 4 point scale ** Note: The number of attendees does not include non-campus attendees (e.g., CARS, CCC SMHP, presenters or community or internal partners).

¹ Offered more than one time

² C-SSRS is the Columbia-Suicide Severity Rating Scale –for more information, please visit the link at http://www.cssrs.columbia.edu/

APPENDIX B2. Onsite Trainings, topic areas, number or trainings and colleges in attendance

	OnsiteTrainings – Trainings by Request							
	General Topic Area	Titles	No. Trainings	Total No. Attend.	No Coll. (% CCC Campuses)	College/Location host (Nos. colleges)		
1	Mental Health Screening/ Mental Health 101	Mental Health First Aid Mental Health 101 (Part I) Mental Health 101 Mental Health Screening	4	263	31 (28%)	Las Positas (1) CA Association for Post-Secondary Education (28) Sierra College(1) LA Consortium(1)		
2	Active Shooter	Active Shooter	4	431	12 (11%)	Allan Hancock (1) California College and University Police Chiefs Association (n=9) Las Positas (1) Alliance Of Schools For Cooperative Insurance Programs (ASCIP) (1)		
3	Enhancing Counseling Skills	Enhancing Counselor's Assessment/Intervention Skills Optimizing Team Effort to Meet Mental Health Challenges Counseling staff challenges and interview techniques Making Psychiatric Referrals	4	171	8 (7%)	 Cosumnes(1) Irvine Valley(1) Sierra (1) Mira Costa College (5) 		
4	Cultural Competency, working with Diverse Populations	 Practical Tools for Recognizing and Managing Unconscious Bias At-risk and ethnically diverse students Building Multicultural Bridges of MH for Student Success Cultural awareness, competence and responsiveness Reaching Out to Our Diverse Student Body for Mental Health and Wellness Working with Diverse Students The Challenges and Opportunities for Faculty and Staff Working with Increasingly Diverse Students Indigenous perspectives on American Mental Health and restorative practices for caregivers 	8	530	6 (5%)	 Cuyamaca (1) CalWORKs (1) College of San Mateo (1) MHWA Meeting (1) Ohlone (1) College of San Mateo (1) Ohlone (1) Ohlone (1) Ohlone (1) 		
5	Responding to Difficult, Disruptive or Distressed Students	Ability to deal with disruptive students Don't Panic-Stress Management Preventing and managing disruptive behavior, identifying distressed students Improving capacity to deal with distressed students Disruptive Students in the Classroom Responding to Difficult or Distressed Online Students: Mental Health Assessment and Referrals	6	160	6 (5%)	 San Jose (1) Cerro Coso(1) Cosumnes(1) Irvine Valley(1) Oxnard(1) Moorpark(1) 		
6	LGBTQ (Services and MH Needs, Peer Support and Service Delivery Systems)	 Safe Zone LGBQT Transgender training LGBQT LGBQT LGBT training to improve their awareness, sensitivity, and service delivery systems 	5	90	4 (4%)	 Orange Coast (1) College of Alameda (1) Gavilan (1) Gavilan (1) College of San Mateo (1) 		

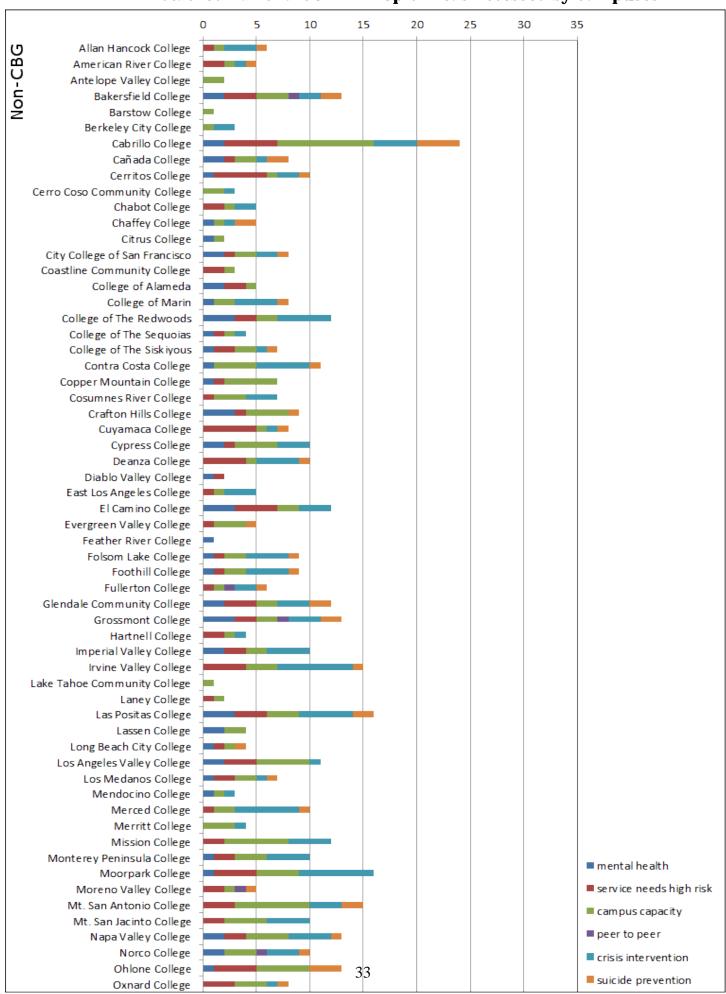
APPENDIX B2. Onsite Trainings, topic areas, number or trainings and colleges in attendance (Cont.)

	General Topic Area	Titles	No. Trainings	Total No. Attend.	No Coll. (% CCC Campuses)	College/Location host (No colleges)
7	Suicide Prevention	Suicide Prevention	4	189	5 (4%)	 Pacific Coast Health Assoc. (2) College of the Canyons (1) Ohlone (2) Ohlone (1)
8	Service Needs of Asian Americans/Pacific Islanders	Affirmative Reactions: Attending to the Physical and Mental Health of AAPI Students Challenges of Asian and Pacific Islander students transition to college Depression/Suicidality among Asian females	3	119	4 (4%)	Asian Pacific Americans in Higher Education (1) Ohlone (2) West Valley (1)
9	Mental Health and Wellness	Partnering for Peace & Wellness Mental Health & Wellness for Student Success Tapestry of Well Being	3	345	3 (3%)	LA Consortium(1)College of Alameda(1)College of San Mateo(1)
10	Stigma associated with Diverse Groups	Psychodrama performance about stigma Reduce stigma across campus and connect with minority group	2	200	2 (2%)	College of San Mateo (1)Santa Monica College (1)
11	Behavioral Intervention Teams (BIT)	Behavioral Intervention Teams (BIT)	1	20	1 (<1%)	Irvine Valley (1)
12	ACHA-NCHA Survey Results	Overview of CCC ACHA-NCHA survey results	1	100	1 (<1%)	• San Jose (1)
13	Student Veterans	Working with Student Veterans	1	?	1 (<1%)	College of Alameda(1)
14	Foster and Adjudicated Youth	Best practices for staff that work with high- risk youth, many time foster and adjudicated youth	1	24	1 (<1%)	Pasadena (1)
15	Threat Assessment (BIRT)	Threat Assessment	1	10	1 (<1%)	Shasta (1)
16	Trauma Informed Care	Trauma Informed Care	2	53	1 (<1%)	Southwestern (1)Southwestern (1)
17	Other	Non-Violent Sexuality Crisis response Transforming Violence - LA Consortium Am. Sign Language Interpreters and SMH Supporting Students with Math Student Panel (Part III) part of MH 101 LA harbor	6	220	10 (9%)	 Ohlone (1) Ohlone (1) Colleges of San Mateo, Skyline (2) Folsom Lake (6) LA Consortium (1) LA Consortium (1)
	Total					

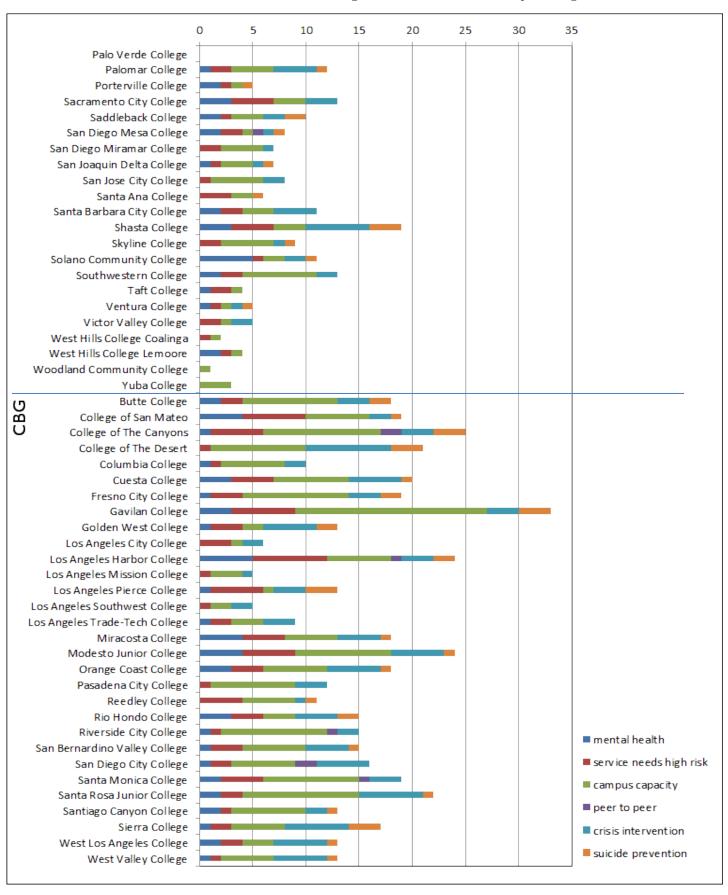
APPENDIX B3. One-one-One Technical Assistance, topic areas, number of TA sessions, participants and colleges participation

	One on One Technical Assistance (over the phone or in-person)							
	General Topic Area	One On One Descriptions	No. TA sessions	No. Participants	No Coll. (% CCC Campuses)	College Involved (people attended)		
1	Developing Referral Systems	Making Student Referrals	13	47	13 (12%)	 San Joaquin Delta College (26) San Joaquin Delta College Antelope (1) Cerro Coso (1) College of The Siskiyous (1) Cypress (1) Evergreen Valley (1) Fresno City (1) LA Southwest (1) Santa Monica (1) Santiago Canyon(1) Southwestern (1) Santa Rosa (2) Lassen (9) 		
2	Suicide Prevention	Suicide Prevention –Active Minds	10?	10	10 (9%)	Cabrillo (1 person) College of the Desert (1 person) Crafton Hills (1) Fresno City (1) Palomar (1) Porterville (1) Rio Hondo (1) Santa Rosa Junior (1) West LA (1) West Valley (1)		
3	Behavioral Intervention Team Development	BIT Development BIT strategic planning session BIT Development BIT Development/Threat Assessment	4	39	4 (4%)	 Las Positas (10 people) Irvine (10 people) Contra Costa (9 people) Shasta (10 people) 		
4	Strategic Planning	Strategic Planning	3	18	3 (2%)	Fresno-(15)Reedley (2)Cabrillo (1)		
5	Cultural Competency, working with Diverse Populations	Develop cross-cultural conflict resolution training	1	4	1 (<1%)	Cuyamaca (4 people)		
6	Mental Health 101	Mental Health 101 Curriculum/Training	1	21	1 (<1%)	Ohlone (21 people)		
7	Veterans	De-escalation between student Veterans and staff	1	3	1 (<1%)	Irvine Valley (3 people)		
8	Foster Youth	Foster Youth- mental health wellness	1	5	1 (<1%)	Cabrillo (5 people)		
9	Other	Developing an Intern Handbook	1	1	1 (<1%)	Santiago (1 person)		
		Totals	35	148	35 (30%)			

APPENDIX B4: Stacked Bar Chart of TTA Topic Areas Accessed by Campuses



APPENDIX B4: Stacked Bar Chart of TTA Topic Areas Accessed by Campuses (Cont.)



Appendix C: Quarterly Reporting Tool

This appendix contains a copy of the on-line quarterly reporting tool used by the Campus Based Grants.



California Community Colleges Student Mental Health Program (CCC SMHP) Campus-Based Grants (CBGs) Quarterly Reporting Tool 9-26-13

Instructions: This quarterly report is intended to capture information about CBG-related activities that occurred during the previous quarter. The form should be completed by the person who is most knowledgeable about grant activities. Quarterly reports are due by 15th day of the month following the ending of the quarter. Note that the first reporting period covers two quarters.

1. Reporting Period: 1□ July – December, 2012 (due January 15, 2013)

2□ January – March, 2013 (due April 15, 2013)

3□ April – June, 2013 (due (due July 15, 2013)

4□ July – September, 2013 (due October 15, 2013)

5□ October – December, 2013 (due January 15, 2014)

6□ January – March, 2014 (due April 15, 2014)

7□ April – June, 2014 (due July 15, 2014)

2. Using the table below, please rate your progress on each activity and briefly describe the major actions you took during this reporting period related to the activity. For this table, only report on activities for which the CBG funds provided substantial support. If you do not intend to address an item during the grant period, indicate "not applicable."

	Not yet begun	In very early stages	Making some progress	Making a lot of progress	Nearly or fully complete	Not applicable	Briefly describe major actions that were taken (750 character
	1	2	3	4	5	98	maximum; bullet lists are encouraged)
a. Conducting a campus-wide assessment of							
our students' needs related to mental health							
services.							
b. Establishing an identification and referral							
system for students to meet their mental							
health needs.							
c. Developing resources (e.g., websites and							
information material) for students, families,							
faculty, and staff.							
d. Developing a system for conducting campus							
threat assessments.							
e. Meeting the CCC SMHP goal of providing							
suicide prevention training to faculty, staff,							
and students.							
f. Meeting the CCC SMHP goal of providing							
mental health training to faculty, staff, and							
students.							
g. Fostering collaboration with CSU, UC, and							
other community college campuses.							
h. Fostering relationships with county mental							
health agencies, private mental health							
providers, and other community partners.							
i. Leveraging resources related to mental health							
services (e.g., new funding, in-kind staffing							
support, partnerships with new other							
providers).							
j. Meeting the CCC SMHP goal of increasing							
peer-to-peer opportunities on your campus.							
k. [If 2j ≠ "not applicable"] How many active							
peer mentors did you have during this							
reporting period? If you do not know the							
number, please provide an educated							
estimate I. [If 2k > 0] How many active peer mentees did							
you have during this reporting period? If you							
do not know the number, please provide an							
educated estimate.							
Euucateu estimate.							

3. If your campus developed online resources (e.g., websites and information material) for students, families, faculty, or staff please complete the table below to document that work.

Date Posted	Name	Туре	Content	Target Audience
		e.g., training materials, resource materials, fact sheet, policy, protocol, other (please specify)	Brief description of content or purpose	e.g., general public, students, faculty, staff, other (please specify)

4. The following table asks about <u>Training of Trainers</u> (TOT) events held on campus during the reporting period, using grant funds. For each TOT, indicate the date of the training, the number of people trained, and the length in hours of the training, by topic. (Note: Please do not include ASIST training.)

Topic	Date	Number of persons trained by group (enter 0 if none) (faculty/staff: students: other:	[If # of students > 0] Indicate the student populations that were addressed and/or served (Check all that apply: LGBTQ, Foster Youth, Student Veterans, Racial/Ethnic Minorities, International Students)	Length in hours	Name of activity and brief description
a. Early recognition of students of concern					
b. Crisis or behavioral intervention					
c. Suicide prevention					
d. General mental health promotion					
e. Peer-to-peer					
f. Other (specify)					

5. The following table asks about <u>presentations and trainings</u> on campus during the reporting period, using grant funds. Include presentations and trainings conducted by outside organizations or by your organization, as well as those conducted via webinar or in-person. Do NOT include Training of Trainers (TOT) and do NOT include any training that was conducted by Kognito.

Topic	Date	Number of	[If # of students > 0]	Length of	Type of Event	Name of
		persons in	Indicate the student	event in	dropdown	activity and
		attendance by	populations that were	hours	(Presentation	brief
		group (enter 0 if	addressed and/or		Training	description.
		none)	served (Check all that		Seminar)	
		(faculty/staff:	apply: LGBTQ, Foster			
		students:	Youth, Student			
		other:	Veterans, Racial/Ethnic			
			Minorities,			
			International Students)			
a. Early recognition of						
students of concern						
b. Crisis or behavioral						
intervention						
c. Suicide prevention						
d. General mental health						
promotion						
e. Peer-to-peer						
f. Other (specify)						

6. The items in the table ask about mental health services and referrals for this reporting period, regardless of funding source.

a. Do you track the number of individuals who received mental health services on	
your campus? YES NO	
[If YES] Number of individual students who received mental health services on	
campus during the reporting period. Count each individual student only once, even	
if s/he received services more than one time during the reporting period.	
b. Do you track the number of units of mental health services provided on your	
campus? YES NO	
[If YES] Number of units of mental health service provided (i.e., a student seen three	
times during the reporting period would be counted as three units of service).	
c. Do you track the source of referrals to your center for mental health services? YES	
= 1 NO = 0	
d. [If yes] Indicate the source of new referrals for the reporting period (provide	
numbers for each):	
Health care provider (e.g., physician, nurse, or counselor)	
Campus faculty or staff member	
A peer of the student	
Family member of the student	
Self-referral	
Unknown	
Other:	
e. Do you track the number of students that your center referred for off-campus	
mental health services? YES NO	
[If YES] Number of students that your center referred for off-campus mental health	
services.	
f. Do you track whether students whom you referred for off-campus services actually	
received the service? Yes = 1 No = 0	
h. [If yes] Indicate the number of students whom you referred for off-campus services	
who actually received them.	

7. During this reporting period, did your college host a Regional Strategizing Forum (RSF)? YES = 1 NO = 0

[If YES] Please complete the following table:

	#	Select the primary	List major topics
Date	Attending	focus of the RSF	
		Informational 1	[text field]
		Networking 2	
		Training 3	
		Other 4	

8. During this reporting period, did your college participate in a RSF hosted by another college? YES = 1 NO = 0

[If yes to item 7 or 8 (part of question 8] To what extent did your college's involvement in a RSF have an impact on the following?

	No impact	Slight impact	Some impact	Large impact
	1	2	3	4
a. Conducting a campus-wide assessment of our students'				
needs related to mental health services.				
b. Establishing an identification and referral system for				
students to meet their mental health needs.				
c. Developing resources (e.g., websites and information				
material) for students, families, faculty, and staff.				
d. Developing a system for conducting campus threat				
assessments.				
e. Meeting the CCC SMHP goal of providing suicide				
prevention training to faculty, staff, and students.				
f. Meeting the CCC SMHP goal of providing mental health				
training to faculty, staff, and students.				
g. Meeting the CCC SMHP goal of increasing peer-to-peer				
opportunities on your campus.				
h. Fostering collaboration with CSU, UC, and other				
community colleges.				
i. Fostering relationships with county mental health				
agencies, private mental health providers, and other				
community partners.				
j. Leveraging resources related to mental health services				
(e.g., new funding, in-kind staffing support,				
partnerships with new other providers).				

9. Did you encounter any grant-related problems or barriers during this reporting period? YES 1 NO 0

[If yes] Briefly describe these problems/barriers and indicate any actions you took to address them. (200 words or less, bulleted lists are encouraged.)

10. Did these problems or barriers slow down your progress during the reporting period or impede any project deliverables? YES 1 NO 0

[If yes] Please describe. (200 words or less, bulleted lists are encouraged.)

11. Is there any assistance that CCC SMHP Office can provide to address any problems/barriers identified in question #9 above? YES 1 NO 0

[If yes] Please describe. (200 words or less, bulleted lists are encouraged.)

12. How useful has the SMHP-supported TA been in helping you meet your project goals?

Extremely useful	Mostly useful	A little useful	Not at all useful	Not applicable (did
1	2	3	4	not receive TA)
				98

[If = 4] Please explain why you feel the TA was not useful.

13. How useful has the SMHP-supported training been in helping you meet your project goals?

Extremely useful	Mostly useful	A little useful	Not at all useful	Not applicable (did
1	2	3	4	not receive training)
				98

[If = 4] Please explain why you feel the training was not useful.

14. From the list below, select all the organizations that you collaborated or worked with during the reporting period, regardless of the funding source that supported the effort. (Only include "substantial" efforts; do not include relatively simple contacts or requests for information.)

1 California Community Colleges (i.e., other campuses)
1 University of California
1 California State University
1 HSACCC (Health Services Association – California Community Colleges)
1 MHWA (California Community College Mental Health and Wellness Association)
1 Veterans' organizations (e.g., VA, veterans' health clinics, etc.)
1 Local school districts
1 County Mental Health Services
1 Private mental health providers
1 Other (including community-based organizations):
1 Other (including community-based organizations):
1 Other (including community-based organizations):

- 15. Please summarize your activities, progress, and challenges in working with the organizations you checked above. (200 word maximums or less, bulleted lists are encouraged).
- 16. Please list and briefly describe any grant-related accomplishments during the reporting period that you would like to share with CCC SMHP (e.g., the adoption of evidence-based practices, the development of new initiatives, unexpected collaborative efforts, etc.).

- 17. Briefly list major non-CBG-funded initiatives related to mental health that took place on your campus this reporting period.
- 18. Name of person completing this form:

Definitions

Peer Mentor. Peer mentors refer to students who have been trained to engage other students in issues related to mental health and wellness and to identify/refer students of concern. If you have a PEER coalition, consider your regular attendees at coalition meetings to be your active peer mentors.

Peer Mentee. Peer mentees are students who meet regularly with peer mentors to receive support around issues related to mental health and wellness. Do not include students who simply attend presentations that are made by peer mentors.

Training of Trainers. A Training of Trainers (TOT) is intended to provide people with the skill to fully train others. For instance, if you want your health center staff to know how to train faculty to identify students of concern (rather than always calling in a consultant to train the faculty) you might have those staff be trained as trainers. The initial training of the staff would be a TOT; the subsequent training of the faculty would be a regular training.

Presentations and Trainings. Although there are no hard-and-fast distinctions between presentations and trainings, you may consider the following guideline: Trainings are often aimed at enhancing skills or motivating people to "act" on the information they received. Use your discretion in deciding whether an event was a training or presentation.

Appendix D: PIRE/RAND Faculty, Staff and Student Surveys

This appendix provides details about the on-line surveys and copies of the questionnaires used as part of the overall Prevention and Early Intervention (PEI) Statewide Projects for Student Mental Health, as required by CalMHSA.

PIRE/RAND CalMHSA Student Mental Health Campus-Wide Survey

The original California Community College Student Mental Health Program (SMHP) evaluation did not originally include surveys of either students or faculty and staff. In part, this was due to the high cost of conventional surveys, either in dollars (e.g., for incentives; for analyses) or in labor (e.g., for in-class paper questionnaires). The evaluation team revisited the question when it discovered that, as part of the CalMHSA Statewide Evaluation of the PEI Initiatives, RAND was conducting campus-wide online surveys of University of California and California State University faculty, staff, and students during the spring and fall of 2013. PIRE and RAND collaborated to modify the on-line survey questionnaire to better fit the objectives of the CCC SMHP, particularly measures related to student referrals to mental health services and some additional measures of possible academic impairment due to mental health problems.

Sample

As part of a larger evaluation of the CalMHSA Student Mental Health Activities in higher education institutions, a voluntary and confidential web-based survey of students and faculty/staff on UC, CSU, and CCC campuses was conducted. UC and CSU invited all of their campuses to participate. CCC invited a subset (30 campus-based grantees [CBGs] with CalMHSA funding and 30 campuses without campus-based grants) of their campuses to participate. Between April 2013 and December 2013, participating campuses emailed invitations to students, staff, and faculty to complete the online survey. For the community colleges, invitations were sent to all students, staff, and faculty via email blasts, while other campuses sent invitations to a random sample of students, staff, and faculty, with a goal of generating a minimum of 150 student and 150 staff and faculty responses per campus. Reminder emails were sent once a week for three weeks to encourage participation in the survey. The study was approved by the RAND IRB and the respective IRBs of participating institutions, as needed.

A second survey wave was fielded in the fall of 2014, with the original sample of community colleges asked to again send out email requests to all their students, faculty and staff. In the evaluation final report, we compare baseline (2013) to post-program (2014) surveys only for those colleges that participated in both waves so that any differences in measures would not be confounded with differences in samples.

Measures

The majority of questionnaire items came from standardized and valid measures of student mental health (e.g., U.S. National Health Interview Survey (NHIS), Kessler (K6) Psychological Distress Scale (Pratt, 2009), as well as measures currently found in the California higher education systems (e.g., National College Health Assessment). Each campus was asked to include campus-specific information about how to contact mental health services at the end of the survey.

Limitations

As noted earlier, the community college surveys of students and faculty could only be done at very low cost. This meant that some standard survey procedures, most notably employing cash incentives, could not be used. As a result, while the numbers of respondents were high in total, the response rates were

low, as would be expected. Researchers grow concerned with low response rates because of the possibility that the resulting sample would not accurately reflect the larger population from which it comes. That is a concern with the results reported here, but we do note that those results appear quite reasonable, especially when we had the opportunity to compare them to students from the other state systems, University of California and California State University. Many of the comparisons from Wave 1 (baseline) to Wave 2 (post-program) appear to be quite similar to each other, suggesting that the results may not be out of line with what might have been found in an expensive survey.

We should also point out that, with different schools participating in each of the two waves of the surveys, we only compered data from the two waves for those schools who participated in both of them. Had we done otherwise, we could not be confident that any observed differences were due to changes across the waves instead of differences in the sample of schools participating in each wave. This does mean that the smaller number of schools may not be representative of all community colleges in California, but our major concern is less with representation than with detecting changes as a result of the CCC SMHP.

Pratt, L. A. (2009). Serious psychological distress, as measured by the K6, and mortality. *Annals of epidemiology*, 19(3), 202-209.

CalMHSA Higher Education Student Survey

This survey asks about your behavior, experiences, and attitudes related to your health and well—being. It includes questions about your mental health; things you have done to cope with stress; and what you think about services available at your school for students who may be distressed. **You do not have to answer these questions**, but your answers will be very helpful in improving your campus' health programs for students. You will be able to answer whether or not you have experienced mental health distress. There are no right or wrong answers. Finally, **your name will not be included in the survey**; your answers will be confidential.

This survey asks about things you may have done during different periods of time, such as within the past **12 months**, within the last **30 days**, or in the last **two weeks**. Each provides different information. Please pay careful attention to these time periods.

In this section, we ask questions about stress, how you have been feeling lately, your use of alcohol, how these things have affected your academic performance, and things you may have done to cope with problems.

- 1. Within the last 12 months, how would you rate the overall level of stress you have experienced?
 - 1. No stress
 - 2. Less than average stress
 - 3. Average stress
 - 4. More than average stress
 - 5. Tremendous stress
- 2. The next questions are about how you have been feeling during the past 30 days.

	All of			A little bit	None
	the	Most of	Some of	of the	of the
	time	the time	the time	time (4)	time (5)
	(1)	(2)	(3)		
a. How often did you feel nervous?	0	0	0	0	0
b. How often did you feelhopeless?	0	0	0	0	0
c. How often did you feel restless orfidgety?	0	0	0	0	0
d. How often did you feel so depressedthat	0	0	0	0	0
nothing could cheer you up?					
e. How often did you feel that everything wasan	0	0	0	0	0
effort?					
f. How often did you feel worthless?	0	0	0	0	0

[For CCC Survey Only...all others skip to#3]

2a. Now think back about how you have been feeling over the last 12 months.

	All of the time (1)	Most of the time (2)	Some of the time (3)	A Little bit of the time (4)	None of the time (5)
g. How often did you feel nervous?	0	0	0	0	0
h. How often did you feelhopeless?	0	0	0	0	0
i. How often did you feel restless orfidgety?	0	0	0	0	0
j. How often did you feel so depressed that	0	0	0	0	0
nothing could cheer you up?					
k. How often did you feel that everything wasan	0	0	0	0	0
effort?					
l. How often did you feel worthless?	0	0	0	0	0

- 3. Over the last <u>two weeks</u>, how many times have you had five or more drinks of alcohol at a sitting? By one drink, we mean one regular size can/bottle of beer or wine cooler, one glass of wine (5 ounces), one mixed drink, or one shot glass (1.5 ounces) of liquor.
 - □ N/A, I don't drink
 - □ None
 - □ 1 time
 - □ 2-3 times
 - ☐ 4-5 times
 - ☐ 6 or more times
- 4. Within the last 12 months, have any of the following affected your academic performance?

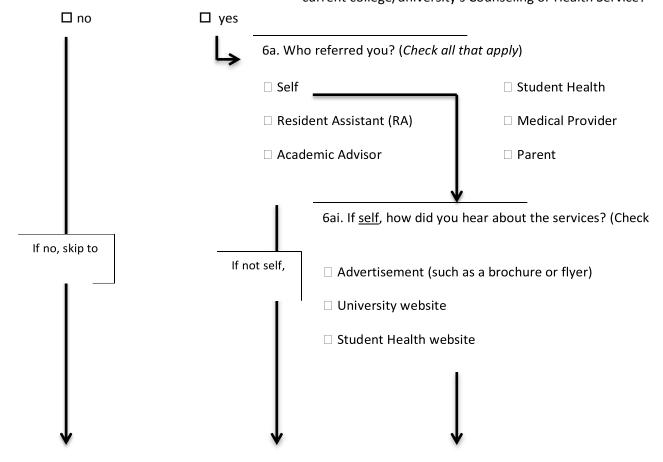
		Experienced this, but my				Significant
	This did not happen to me (1)	academic performance was not affected (2)	Received lower grade in an exam (3)	Received lower grade in a course (4)	Received incomplete /dropped course (5)	disruption /took a leave of absence (6)
a. Alcohol use?	0	0	0	0	0	0
b. Anxiety?	0	0	0	0	0	0
c. Death of a friend or family member?	0	0	0	0	0	0
d. Depression?	0	0	0	0	0	0
e. Eating disorder/ problem?	0	0	0	0	0	0
f. Stress?	0	0	0	0	0	0

5. How true do you feel these statements are about you personally?

	Not at all	A little	Pretty	Very much
	true	true	1 -	true
a. I know where to go for help with a personal problem.	0	0	0	0
 b. I try to work out problems by talking or writing about them. 	0	0	0	0
c. I can work out my problems.	0	0	0	0
d. I accept mistakes as part of the learning process.	0	0	0	0
e. I seek alternative solutions to a problem.	0	0	0	0
f. When I need help, I find someone to talk with.	0	0	0	0
g. I am aware of where to go on campus if Ineed mental health or other similar supportive services.	0	0	0	0

The next set of questions asks about your experience with or use of counseling or mental health services.

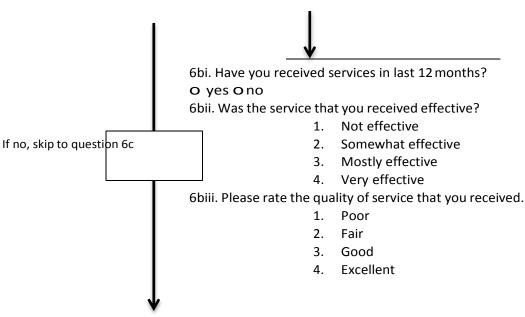
6. Have you <u>ever</u> been referred for or used counseling or mental health services <u>on campus</u> from your current college/university's Counseling or Health Service?



6b. Did you end up receiving psychological or mental health services on campus?

O no

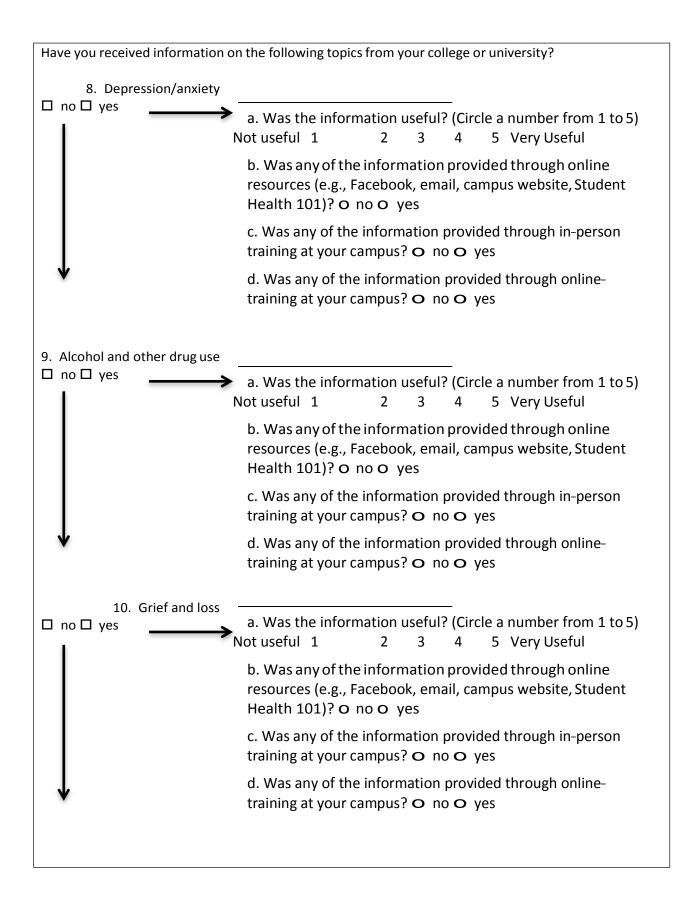
O yes (If no, skip to 6c)

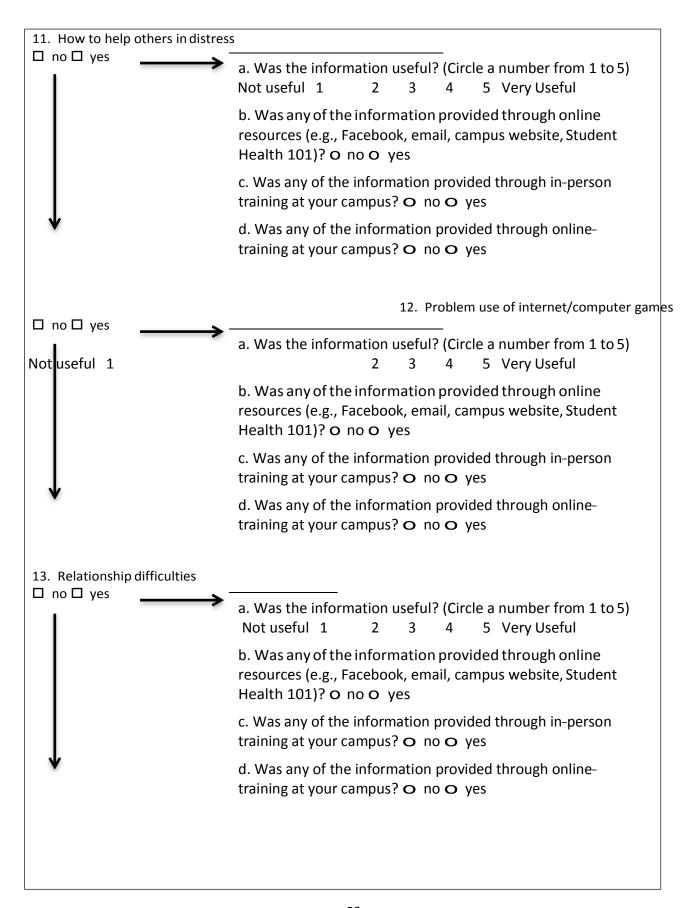


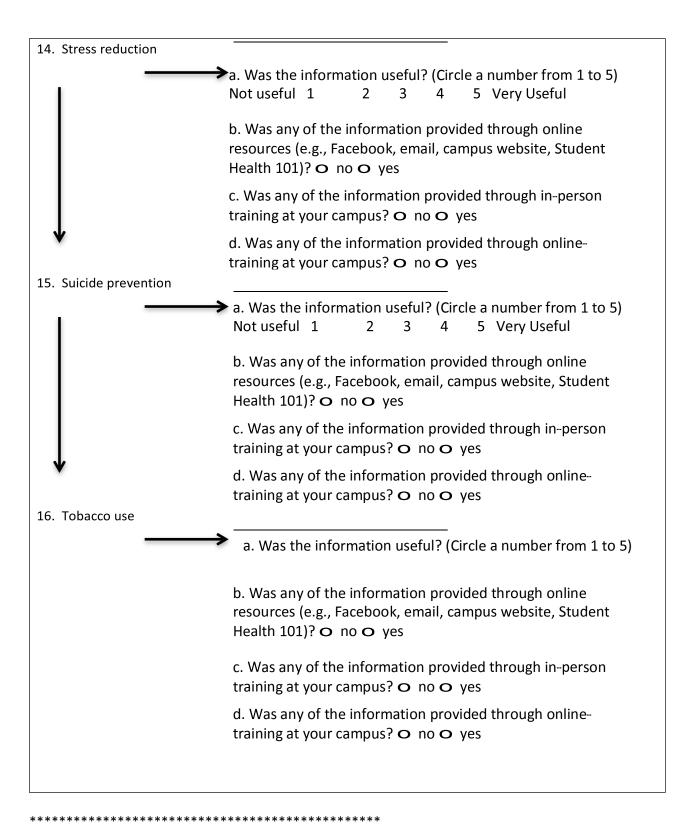
6c. Students have many reasons why they don't end up using psychological or mental health services. Which of these reasons were true for you? (check all that apply) ☐ I didn't feel I needed services. ☐ I had never heard of it. ☐ I didn't know what it offered. ☐ I didn't know if I was eligible. ☐ I didn't know how to access it. ☐ I didn't think it would help. ☐ I had concerns about possible costs. ☐ I had concerns about possible lack of confidentiality. ☐ I was embarrassed to use it. ☐ I didn't have enough time. ☐ It has a poor reputation. ☐ The hours are inconvenient. ☐ The location is inconvenient. ☐ The wait for an appointment was too long. ☐ I got help from another university service or staff person instead.

If received mental health services, skip to question 7

7. If in the future you	were having a personal problem that was really bothering you, would you consider seeking help from a mental health professional?
□ no	Ga. would you consider seeking help on campus <u>from</u> your current college or university's Counseling or HealthServices?
	o yes o no
*******	************
This may include informate helping other students in	s asks about information you may have received from your college or university campus. Action about depression or coping with grief or loss. It may also include topics such as a distress. We are interested in your thoughts about all types of information (e.g., nation, in-person trainings, online-trainings) and how helpful you thought this
Continued	







In this set of questions, we are interested in your opinion about your college or university's campus climate toward student mental health. By campus climate, we mean things like how much support your campus provides for students experiencing distress or the general attitude of the people on campus toward mental

health problems.

17. Based on your experience and observation, rate the <u>general climate for students at your campus</u> along the following dimensions:

	1	2	3	4	5	6	
Hostile	0	0	0	0	0	0	Friendly
Impersonal	0	0	0	0	0	0	Caring
Intolerant of diversity	0	0	0	0	0	0	Tolerant of diversity
Dangerous	0	0	0	0	0	0	Safe

18. How much do you agree with the following statements about your campus?

10. How mach do you agree with the following ste	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree
 a. My school provides adequate counseling and support services for students. 	0	0	0	0	0
b. My school provides effective confidential support and referral services for students needing help because of substance use, violence, or other problems (e.g., a Student Assistance Program).	0	0	0	0	o
c. My school emphasizes helping students with their social, emotional, and behavioral problems.	0	0	0	0	o
d. People with mental health problems experience high levels of prejudice and discrimination at my school.	0	0	0	0	0
e. Faculty members on my campus are concerned about students' emotional well-being	0	0	0	0	0
f. My school does a good job of getting the word out to students about the available mental health services on campus for students.	0	0	0	0	0
g. There is an emotionally supportive climateon this campus for students with mental health needs.	0	0	0	0	0
h. There is an emotionally supportive climate on this campus for students with substance abuse problems.	0	0	0	0	0
 There is an emotionally supportive climate on this campus for students who have been victims of abuse or other violence. 	0	0	0	0	0

[For CCC Survey Only...all others skip to 23]

19. How much do you agree with the following statements?

	Strongly disagree	Disagree	Neither Agree or Disagree	Agree	Strongly agree
j. I lead a purposeful and meaningful life.	0	0	0	0	0
k. My social relationships are supportive and rewarding.	0	0	0	0	0
I. I am engaged and interested in my daily activities.	0	0	0	0	0
m. I am optimistic about my future.	0	0	0	0	0

******	******	******	******					
Finally, we woul	d like some backg	round inform	nation about yo	ou.				
20) What is yo	ur age in years?	□ 17 □ 26-59	□ 18 □ 19 □ 60-84	0 □ 20 □ 85+	□ 21 □ 22	□ 23	□ 24	□ 25
21) What is yo	our gender? 🛛	Male	☐ Female	□ Othe	er (e.g., Transge	ender)		
22) Are you o	r Hispanic, Latino,	, or Spanish o	rigin? □ Ye	es 🗆 No				
[For CCC Survey	Onlyall others	n American n/Native Ame n/Pacific Islar skip to 25]	erican/Alaska I nder —					
	ip do you identify Mexican, Mexica Puerto Rican Cuban Dominican Central America South American	an American, n						
	s your primary lang □ Yes □ No □	guage?						

	☐ Lesbian, Gay, Bisexual, Transgender, Queer of ☐ Foster Care Youth	r Questio	ning (LGBTQ)
	☐ Ethnic Minorities		
	☐ Student Veterans	25a. ho	w many times were you deployed?
	☐ Homeless Youth	0	0
	☐ Students with Disabilities	0	1
	Students in Alternative Schools for At-Risk Youth	0	
□ Othe	r (Please specify):		
26) Cł	neck if you are		
	Undergraduate student		
0	Full time		
0	Part time		
0	Years at this campus:		
	Graduate student		
0	Full time		
0	Part time		
0	Years at this campus:		
27) \\/	hat is your primary academic goal at your current campus	2	
-	A certificate	•	
	An Associate Degree		
	Transfer to a four-year school		
	A Bachelor's Degree		
	A graduate or professional degree		
	Acquire or update job skills		
	Educational development (intellectual, cultural)		
	Other (please specify):		
_	- Care (presse speeding).		

CalMHSA Higher Education Faculty/Staff Survey

The following questions will help us understand how to better improve campus programs, services, and staff/faculty trainings designed to help staff and faculty better meet the needs of students with mental health needs. Your answers will be kept anonymous. This means your co-workers, administrators, or any other person at your campus will not see your individual answers to this survey. Your responses are really important to us. Thank you for filling this out!

In this section, we ask your opinion about your campus' support for student mental health	١.

1. How much do you agree with the following statements about this campus?

	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree
a. This campus provides adequate					
counseling and support services for	0	0	0	0	0
students.					
b. This campus provides adequate					
counseling and support services for students					
with unique needs (e.g., diverse	0	0	0	0	0
ethnic/language groups, Lesbian, Gay,					O
Bisexual, Transgender, Queer or Questioning					
[LGBTQ]; low income).					
c. This campus provides effective					
confidential support and referral services for					
students needing help because of depression,	0	0	0	0	0
stress, substance use, violence, or other					
emotional issues.					
d. This campus emphasizes helping					
students with their social, emotional, and	0	0	0	0	0
behavioral needs.					

2. To what extent is your campus actively putting into place the following policies or programs?

					Α	
	Not at		Some		great	Don't
	all		what		deal	know
a. Programs and resources for students that promote	0	C	0	0	0	0
the responsible use of, or abstinence from, alcohol.	U)	U	0	U	
b. Programs and resources for staff and faculty to refer	0	C	0	0	0	0
students for help with drug or alcohol problems.	U	0	U	0	U	
c. Support, resources, or programs for students with	0	C	0	0	0	0
mental health needs.	U	0	U	0	U	
d. Support, resources, or programs for staff and faculty		0		0		0
to refer students with mental health needs.	0	0	0	0	0	0
e. Training programs to help students recognize and	0	0	0	0	0	0

respond to other students with mental health needs.						
f. Training programs to help staff and faculty recognize	0	0	0	0	0	C
and respond to students with mental health needs.	U	U))	0	0
g. Training programs to help <u>students</u> recognize and	0	0	0	0	0	0
respond to students at risk for suicide.	U	Ü))	0	0
h. Training programs to help staff and faculty recognize	0	0	0	0	0	C
and respond to students at risk for suicide.	U	U))	0	0
i. A social media campaign to reduce stigma and						
improve awareness of student mental health forthe	0	0	0	0	0	0
whole campus.						
		1				

The following questions are about your experience with and training on helping <u>students</u> with mental health distress or problems. By student mental health, we mean a lot of different things, including: students' feelings of sadness, nervousness, stress, hopelessness, and restlessness.

3. In the past 6 months, how often have you talked with students about their mental health problems?

- 1. Never
- 2. Once or twice
- 3. A few times
- 4. Many times

students with mental health problems?	y trainings online or in-person to help you better support
□ No	□ yes
	1
J	↓
<u></u>	
4a. Faculty and staff have many reasons why	4b. Faculty and staff have many reasons why
they <u>do not participate</u> in student mental	they <u>participate</u> in student mental health
health trainings. Which of these reasons are	trainings. Which of these reasons are the most
the most true for you? (Check all that apply)	true for you? (Check all that apply)
☐ I didn't feel I needed to participate.	☐ Training is part of my job to work with students with mental health problems.
☐ The training is not required.	
	The campus or my job required me to
☐ I don't have a personal or professional interest in student mental health.	participate.
interest in student mentar neath.	☐ I am not required to participate, but I wanted
☐ Student mental health does not affect my daily work.	to improve my ability to help students with mental health problems.
☐ I don't receive an incentive (e.g., CEU's,	☐ I receive an incentive (e.g., CEU's, bonuses)
bonuses) from my campus to participate in training.	from my campus to participate in training.
	☐ My campus encouraged and supported me
☐ My campus does not encourage me to go.	to go.
☐ Available trainings aren't very helpful.	$\hfill \square$ The trainings provide helpful information.
☐ I don't think the trainings would affect student mental health at my campus.	
☐ I didn't know what trainings were offered.	
5. Over the past 6 months, have you accessed info your university or campus' website?	ormation about student mental health online through
□ yes □ no	
·	
*************	****

In the next section, we ask for your opinions regarding student mental health needs and things you may have done to help address the issue on your campus.

6. Please rate the extent to which you agree with the following statements:

	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree
a. The programs on campus send the message to students that help is available for mental health problems.	0	0	0	0	0
b. I can only help a student with mental health distress if they seek assistance.	0	0	0	0	0
c. I have easy access to the educational or resource materials I need to learn about student mental health.	0	0	0	0	0
d. Our college/university has online resources that I can utilize for addressing student mental health.	0	0	0	0	0
e. This campus has an adequate number of resources or people to whom I could refer students with mental health needs/distress.	0	0	0	0	0
f. I can identify the places or people where I should refer students with mental health needs/distress.	0	0	0	0	0
g. I feel comfortable discussing mental health issues with all types of students.	0	0	0	0	0
h. I am aware of the warning signs of mental health distress.	0	0	0	0	0
i. I don't have the necessary skills to discuss mental health issues with a student.	0	0	0	0	0
j. I am confident in my ability to helpstudents address mental health issues.	0	0	0	0	0
k. I am able to help students in distressget connected to the services they need.	0	0	0	0	0

7.	In the past 6 months, approximately how many students have you been concerned about due to their psychological distress? (Please specify):	
3.	In the past 6 months, approximately how many students that you have been concerned about due to their psychological distress have you referred for support services? (Please specify):	
9.	Please let us know about other important student, faculty, or staff mental health issues on your campus that weren't addressed in the survey. (Please specify):	

************** Finally, we would like some background information about you. 10) What is your age? □ 16-25 □ 26-59 □ 60-84 □ 85+ 11) What is your gender? ■ Male ☐ Female ☐ Other (e.g., Transgender) □ No 12) Are you of Hispanic, Latino, or Spanish origin? ☐ Yes 13) What is your race? (Check all that apply) ☐ White ☐ Black or African American ☐ Asian ☐ American Indian/Native American/Alaska Native ☐ Native Hawaiian/Pacific Islander ☐ Other (Please specify): _____ 14) Do you work with or have interest in working with any of the following special populations? (Check all that apply) ☐ Lesbian, Gay, Bisexual, Transgender, Queer or Questioning (LGBTQ) ☐ Foster Care Youth ☐ Ethnic Minorities ☐ Homeless Youth ☐ Students with Disabilities ☐ Students in Alternative Schools for At-Risk Youth ☐ Student Veterans ☐ Other (Please specify): _____ 15) Which student population do you work with? (Check all that apply) ☐ All undergraduates ☐ Undergraduates in residence halls ☐ Graduate students □ Other (please specify): _____ 16) What is your current role at your campus? (Check one) ☐ Full-time faculty ☐ Part-time faculty/Adjunct faculty □ Administrator ☐ Other Staff (Please specify): 17) What is your education level? (Check one) ☐ Less than high school diploma/GED ☐ High school diploma/GED ☐ Some college or technical school ☐ Associate or technical degree ☐ Bachelor's degree ☐ Graduate or professional degree (MA, PhD, JD, MD

Appendix E: CCC SMHP Mental Health Services Capacity Survey

This appendix provides details about the on-line capacity surveys and a copy of the questionnaire. The subsections are:

Appendix E1: Description of the Surveys

Appendix E2: Campuses Responding to Capacity Survey by Wave

Appendix E3: Responses to Qualitative Items

Appendix E4: Capacity Survey Questionnaire (Wave 2, CBG Version)

Appendix E1: Description of the Surveys

The California Community Colleges Student Mental Health Program (CCC SMHP) Capacity Survey of Campus Based Mental Health Services was implemented to track change in mental health service capacity across all California Community College campuses. While originally planned as a baseline/post program two-wave survey, there were ultimately three waves of capacity data collected from one key (most knowledgeable) respondent for campus based grants (CBGs) and non-CBG campuses. In many cases, the most knowledgeable respondent was the Director of the Student Health Services. The third wave was added when a no-cost extension allowed the evaluators to include a final wave later than originally planned.

The Wave 1 survey asked respondents about capacity, including change in capacity, for the 6-month period from July through December 2012 (which coincided with the initial grant period); Wave 2 asked about the period from January through September 2013; Wave 3 asked about the period from October 2013 through June 2014. The Wave 1 survey also included measures of capacity as of the end of June 2012, which represented a (retrospective) baseline.

The evaluation team developed a draft survey that included measures adapted from prior capacity studies by the team plus new measures specific to the community colleges. We worked to develop a list of mental health capacities that was broad and that represented capacity to promote mental health, and to address students' mental health needs. Capacity was conceptualized as including programming, services, and infrastructure capacity.

We obtained feedback on the draft survey from the CCC SMHP staff and a group of community college mental health system stakeholders. The evaluation team reviewed the feedback and made a number of changes in the content of the survey to address many of the points raised by the stakeholders. We also received feedback on the draft survey from staff of the Center for Applied Research Solutions (CARS). We subsequently implemented a pilot of the survey with three community college key respondents. Additional changes were made to the survey based on the pilot. Following these development steps, the final version of the survey was put into Survey Monkey for web-based data collection.

For the Wave 2 and Wave 3 versions of the survey, we added the following statement for clarification: While 'student of concern' often refers to a student who may be a risk to him or herself or others, the term may also include a student who is distressed and whose behavior causes others concern for the personal well-being of that student.

DATA COLLECTION

At each wave, a similar data collection process was followed; this included sending an introductory email that described the purpose of the survey, followed by an email invitation to participate in the web survey. The email invitation itself included a link to the web survey. At each wave, we also implemented a series of follow-up calls and emails to survey non-responders. The follow-up calls and email reminders were very helpful in increasing the response rates at each wave.

Wave 1

Data were collected between February and April, 2013. Survey links were sent to contacts for 107 community college campuses. Including the two campuses whose pilot data we used, the overall response rate was 72% (77 of 107). Once the data were cleaned (including removing cases that were missing all data), the final n size at wave 1 was 75.

Wave 2

Data were collected between October, 2013 and January, 2014 from 99 of 112 campuses. This represented a response rate of 88%. Once the data were cleaned, the final n size at wave 2 was 96.

Wave 3

Data were collected between August, 2014 and October, 2014 from 75 of 107 campuses. This represented a response rate of 70%. Once the data were cleaned, the final n size at wave 3 was 74 (one respondent did not identify the campus he or she was responding about).

Summary across Waves

Table 1 provides details of the data collection. This table shows that almost the same number of campuses responded at Waves 1 and 3 (75 and 74), while at Wave 2 there were 96 campuses represented (including all 30 CBG campuses). One caveat, however, is that while we collected data from the highest number of campuses at Wave 2, five of these campuses only sent data in response to an email request for them to respond to a small number of questions. (See Appendix A for a complete list of the 101 campuses that provided data; this appendix also shows which wave(s) of data were available for each campus. For Wave 2, the list also shows which campus contact provided responses to a small number of questions.) Appendix B contains a copy of the capacity survey instrument (CBG version, wave 2).

Table 1. Details of Capacity Data Collection by Waves

Wave	Dates of Data Collection	<u>CBG</u>	Non- CBG	<u>Total</u>
1	February-April 2013	26	49	75
2	October 2013 – January 2014	30	66	96
3	July – October 2014	27	47	74

Due to the fluctuations in the campuses that responded, in the next section we describe how we selected a subset of campuses for many of our analyses.

BASIC ANALYSES

We selected for many of our analyses only those campuses with some data at all three waves (n=57, with 23 being CBG campuses and 34 being non-CBG campuses). We selected these campuses in order to compare change between waves of the survey based on the same group of campuses over time. However, some of these 57 campuses had missing data due to respondents either skipping survey items or starting the survey and then stopping and not going back to complete the survey. This meant that for some analyses, the total n size was lower than 57.

It should also be noted that the non-CBG campuses whose respondents completed the survey at all three waves may not have been representative of all non-CBG campuses. For example, it might be expected that campuses with greater staff resources would be more likely to respond to the survey each time it was given. [To check this, we ran frequencies of campuses (at wave 2) whose representatives reported that the campus did not have a student health center on campus. We ran the analysis separately for all campuses and for those campuses with data at all time periods. We found that for all campuses (valid n = 94) 19 (or 20%) at wave 2 said they did not have such a center, but for those with all waves of data (valid n = 57) only six (or 11%) at wave 2 said they did not have a center on campus.]

MEASURES

Capacity Development

<u>Measures</u>. The survey included 19 Yes/No items that asked whether the campus developed or expanded capacity in specific areas related to student mental health (SMH) services. The specific areas included programming, services and infrastructure. Time references were: (wave 1) between July and December, 2012, (wave 2) between January and September, 2013, and (wave 3), between October, 2013 and June, 2014.

<u>Computed Variables</u>. We computed a Capacity Development variable at each wave as the mean of 19 Yes/No items, where Yes was coded as "1" and No was coded as "0". Therefore, the computed variables represented the percentage of possible capacity changes reported by each campus at each wave.

Note that in the computation of the Capacity Development variable, we included in the denominator only the cases for which the respondent selected Yes or No. For example, if a respondent said Yes for 14 types of capacity change, No for one type of capacity change, and did not give a response for four types of capacity change, the value on the computed variable would equal .93 (or 14/15).

Analysis of Change in Capacity Development. To examine overall trends in capacity development, we examined the mean of the Capacity Development variable at waves 1, 2, and 3. To examine specific trends in capacity development, we examined the percentages of campuses that reported change in each of the 19 types of capacity. To examine whether there were differences between CBG and non-CBG campuses in change in capacity development, we conducted paired-sample t-tests of the differences in mean Capacity Development separately for CBG campuses and for non-CBG campuses. These tests compared change between waves 1 and 2 and between wave 1 and 3.

Collaboration in Capacity Development

Measures. The survey included items that asked whether the campus had collaborated with key partner organizations in developing or expanding capacity – these items were asked in the context of the 19 areas described above. The key partner organizations asked about on these items were: (1) county mental health, (2) other California community colleges, (3) universities in the UC or CSU systems, and (4) training or T/A providers (e.g., CARS or Kognito). Respondents checked boxes that indicated that there had been collaboration around each area of capacity building.

<u>Computed Variables</u>. We computed four variables as counts (at each wave of data collection) of the checked responses for each of the four key partners with which the respondent reported that his / her campus collaborated across each of the 19 areas of MH capacity.

<u>Analysis of Change in Collaboration in Capacity Development</u>. To examine change, we simply compared at each of the three waves the mean number of capacity areas on which the campuses reported collaborating with each of the key partner organization categories.

To examine differences between CBG and non-CBG campuses, we conducted simple comparisons of the means.

MH Service Capacity-Focused Training or Technical Assistance (TA) Received

<u>Measures</u>. The survey included two items about training or TA related to capacity building. The first item asked whether the campus had received any capacity-related training or TA, while the second asked how many times such training or TA had been received (responses ranged from 'once' to 'six or more times').

Analysis of Change in Capacity-Focused Training or TA Received. To examine overall trends in such training or TA received, we examined frequencies of responses at each wave that indicated the numbers of times each campus respondent reported that their college received training or TA that focused on building the capacity of mental health services. (We ran frequencies of any non-zero responses.)

To examine differences between CBG and non-CBG campuses, we conducted simple comparisons of these frequencies of responses.

Readiness

Measures. The survey included nine items that the evaluators adapted from measured developed by the Tri-Ethnic Center for Prevention Research (2014). PIRE researchers have used an adaptation of the Tri-Ethnic Center in a NIDA-funded community prevention model to reduce youth misuse of harmful legal products in Alaska (Ogilvie, 2008). Our adapted items measured perceived readiness to change capacity of the campus student mental health service system. Readiness items included existence of efforts to link students to needed services, awareness of these services, resources to support efforts around this issue, and several other indicators.

<u>Computed Variables</u>. We computed a Readiness variable at each wave as the mean of nine items. At wave 1, the alpha reliability for the nine items was .84, which indicates that the internal consistency for the computed scale was acceptable.

<u>Analysis of Change in Readiness</u>. To examine overall trends in readiness, we examined the mean of the computed Readiness variable at waves 1, 2, and 3.

Appendix E2: Campuses Responding to Capacity Survey by Wave

ID	Name of Campus (<mark>CBG</mark> highlighted)	Wave 1	Wave 2	Wave 3	Number of Waves
1	Allan Hancock College	1	1	1	3
2	American River College	1	1	1	3
6	Berkeley City College	1			1
7	Butte College	1	1	1	3
8	Cabrillo College	1	1	1	3
9	Canada College	1	1	1	3
10	Cerritos College	1	1	1	3
11	Cerro Coso Community College	1	1	1	3
12	Chabot College		1		1
13	Chaffey College	1	1	1	3
14	Citrus College		1		1
15	City College of San Francisco	1	1	1	3
16	Coastline Community College	1	1		2
17	College of Alameda	1	1		2
18	College of Marin	1	1	1	3
19	College of San Mateo	1	1		2
20	College of Canyons	1	1		2
21	College of the Desert	1	1	1	3
22	College of the Redwoods	1	1	1	3
23	College of the Sequoias	1	1	1	3
24	College of the Siskiyous	1	1	1	3
25	Columbia College	1	1	1	3
26	Contra Costa College		1		1
27	Copper Mountain College	1	1*		2
28	Cosumnes River College	1	1	1	3
29	Crafton Hills College		1	1	2
30	Cuesta College	1	1	1	3
31	Cuyamaca College		1	1	2
32	Cypress College	1	1		2
33	De Anza College		1	1	2
35	East Los Angeles College		1		1
36	El Camino		1*		1
37	Evergreen Valley College	1		1	2
38	Feather River College		1	1	2
39	Folsom Lake College	1	1	1	3
40	Foothill College		1		1
41	Fresno City College	1	1	1	3
43	Gavilan College	1	1	1	3
44	Glendale Community College		1		1

ID	Name of Campus (CBG highlighted)	Wave 1	Wave 2	Wave 3	Number of Waves
45	Golden West College	1	1	1	3
46	Imperial Valley College	1	1		2
47	Grossmont College	1		1	2
48	Hartnell College	1	1	1	3
49	Irvine Valley College	1	1		2
50	Lake Tahoe Community College		1	1	2
52	Las Positas College	1	1	1	3
53	Lassen Community College		1	1	2
54	Long Beach City College	1	1		2
55	Los Angeles City College		1	1	2
56	Los Angeles Harbor College	1	1	1	3
57	Los Angeles Mission College		1	1	2
58	Los Angeles Pierce College	1	1	1	3
59	Los Angeles Southwest College	1	1		2
	Los Angeles Trade-Technical				
60	College College		1	1	2
61	Los Angeles Valley College	1			1
63	Mendocino College		1		1
64	Merced College	1		1	2
65	Merritt College, Oakland	1	1	1	3
66	Mira Costa College	1	1	1	3
67	Mission College	1	1	1	3
68	Modesto Junior College	1	1	1	3
70	Moorpark College	1	1	1	3
71	Moreno Valley College	1	1	1	3
72	Mt. San Antonio College	1	1	1	3
74	Napa Valley College	1	1		2
75	Norco College	1	1	1	3
76	Ohlone College	1	1	1	3
77	Orange Coast College	1	1	1	3
78	Oxnard College		1		1
79	Palomar College	1	1*	1	3
81	Pasadena City College	1	1	1	3
82	Porterville College		1	1	2
83	Reedley College	1	1	1	3
84	Rio Hondo College	1	1	1	3
85	Riverside City College	1	1	1	3
86	Sacramento City College	1	1	1	3
87	Saddleback College		1	1	2
88	San Bernardino Valley College	1	1	1	3
89	San Diego City College	1	1	1	3

ID	Name of Campus (<mark>CBG</mark> <mark>highlighted</mark>)	Wave 1	Wave 2	Wave 3	Number of Waves
90	San Diego Mesa College	1	1	1	3
91	San Diego Miramar College	1	1	1	3
93	San Jose City College	1	1	1	3
94	Santa Ana College	1	1	1	3
95	Santa Barbara City College	1	1	1	3
96	Santa Monica College		1	1	2
97	Santa Rosa Junior College	1	1	1	3
98	Santiago Canyon College	1	1	1	3
99	Shasta College	1	1	1	3
100	Sierra College	1	1	1	3
101	Skyline College	1	1	1	3
102	Solano Community College		1		1
103	Southwestern College	1	1	1	3
104	Taft College	1	1*		2
105	Ventura College	1	1	1	3
106	Victor Valley		1*		1
107	West Hills College Coalinga		1	1	2
108	West Hills College Lemoore		1	1	2
109	West Los Angeles College	1	1	1	3
110	West Valley College	1	1	1	3
111	Woodland Community College		1		1
112	Yuba College	1	1		2
ψ' 1'	TOTALS BY WAVES	75	96	74	

^{*}indicates responded to an email that included only a few key capacity items

Appendix E3: Responses to Qualitative Items

Respondents for CBG campuses were asked two open-ended questions at Wave 3:

- Thinking about the ENTIRE GRANT PERIOD, what would you say has been the most important change that your campus has made in student mental health programs, capacity or services?
- Please describe briefly the most important change that your campus has already committed to make, and that will start in the next academic year.

Tables 30 and 31 below present the responses to these items categorized into themes. The survey also had two questions that asked (for each of the above open-ended items) the degree to which the CBG program had impacted these most important changes. On the first item, 21 of 22 respondents (95%) who answered the question said "to a great extent" or "to a very great extent". On the second item (about changes that were to start in the following academic year), 12 of 15 respondents (80%) who answered the question said "to a great extent" or "to a very great extent".

Table 30. Responses about M Programs, Capacity or Service	ost Important Changes Made by Campus in Student Mental Health			
Category of Response				
Stigma Reduction	 Awareness of importance & support for prevention and stigma reducing activities and programs The inclusion of faculty and staff in prevention and stigma reduction in addition to students. 			
Increased Awareness of Needs / Sensitivity to MH Needs	 Awareness of the need for a Campus Threat Assessment team. Greater sensitivity of security and police staff to mental health needs of students. Awareness, education, and acceptance of mental health issues that people (students, faculty, staff, community) live with. Faculty front line awareness, identification of student distress, and increased referral. Greater awareness of mental health issues and how to assist and refer students in distress Increased awareness, decreased stigma, suicide prevention and threat assessment awareness There is a greater awareness of the need of these services and increased administrative support of our efforts. Also the general Campus community is more aware of our services and the impact stigma has on those seeking services. 			
Peer Activities	 Development of peer activities on campus to educate and decrease stigma Outreach awareness to students on mental health issues and resources through our PEERS program. The peer mentor building component. We have a solid relationship with our county mental health and funding allowed us to hold large events with them. 			
Improvement of Services (New Services Offered /	 Expansion of awareness by staff, faculty, administrators and students of mental health services available to students and 			

Table 30. Responses about M Programs, Capacity or Service	ost Important Changes Made by Campus in Student Mental Health		
Category of Response	· · · · · · · · · · · · · · · · · · ·		
Increased Workshops / Service Hours / Quicker Response Times)	 improvement of the services due to training, materials, information-sharing made possible by all the many grant offerings. More educational workshops, more mental health service hours. We have definitely reached out to our campus community regarding de-stigmatization of mental illness. 		
	 New focus on how mental health can and does impact student success. Increased services and quicker response times. 		
	 Some of the most important changes our campus has made surround mental health awareness and intervention. We have established a student mental health club, increased the oncampus mental health counseling visits, refined our mental health referral process, and have staff who are certified mental health/suicide intervention skills trainers. The campus community is more aware of how to make referrals, the type of services we provide and more willing to talk about how we respond to our student needs. 		
	 The creation of our behavioral intervention team would have to be the most important change we have made for our campus. It is a project that will continue and grow, has had far reaching benefit across the campus and meets what had been a large gap in meeting our students of concern. 		
Kognito training	 Improved training with the Kognito program which we hope to sustain past the grant period. 		
	 Kognito Gatekeeper training for students at risk, creation of an active, successful Behavior Intervention Team that meets weekly and first steps with our county mental health system towards a viable collaborative effort to meet our students' mental health needs. 		
Increased Collaboration across Departments / Agencies (including with local mental health)	 [College] began to strengthen collaboration among departments and bring some of the issues to the awareness of faculty, staff and students. Furthermore, we began to build connection with our local mental health providers through the SAAC-2 meetings and other local collaborations. 		
	The enhancement of our relationship with our local DMH as a result of our Regional Strategizing Forums.		
Multiple Changes	The grant enabled us to hold a district-wide Behavioral Assessment Team training (for 3 district college teams) and to install Maxient student conduct software to adequately track student of concern cases.		
	 The level of awareness with key staff players has increased. They have also received beneficial and much needed training in order 		

Table 30. Responses about Most Important Changes Made by Campus in Student Mental Health			
Programs, Capacity or Service	Programs, Capacity or Services		
Category of Response	Actual Responses (Total N = 25)		
	to help with the efforts. In addition, the collaborative efforts that we now have with county mental health services has been a huge success in helping provide students with mental health support that we as an office cannot meet. Now, the college is making ongoing changes in establishing training opportunities for the Crisis Team members about how to manage student mental health and crisis. In addition, this has helped spur and guide some of the emergency response efforts that have taken shape on-campus this last year.		
	 Training the Behavioral Intervention Team (CARE team), and faculty/staff on students of concern along with tracking students of concern using the conduct management software. Outreach to students in the classroom with mental health peer educators providing classroom presentations on depression and suicide prevention. 		

The state of the s	ost Important Changes by Campus in Student Mental Health Programs,			
Capacity or Services That Will Start in Next Academic Year Category of Response Actual Responses (Total N = 15)				
Additional Training	Additional training and in-services for all staffemphasis on department faculty and staff issues/training			
	 During the 2014-2015 academic year, [college] is committed to increasing the number of mental health/suicide intervention skills courses/workshops offered on campus. 			
	 Training of manager/staff trainers in the strength based approach and offering strengths based interventions to staff, faculty, and managers. 			
Additional Programming	 Bystander program for increased reporting of students of concern, including student reporting on-line 			
	Peer mentor program			
	 We are actively looking to keep the peer to peer programing active and to enhance the program so that it grows into an ongoing program. In addition to the crisis response team is actively aware of their need to continually seek training opportunities to effectively meet the mental health needs of the students. 			
Increased Collaboration	 Collaboration of Veteran Peer Advisors with mental health peer educators Collaboration of LGBTQ Safe Space programs with Kognito gatekeeper trainings 			

Table 31. Responses about MacCapacity or Services That Will	ost Important Changes by Campus in Student Mental Health Programs, Start in Next Academic Year			
Category of Response Actual Responses (Total N = 15)				
	We will increase our intern relationship with CSUS field study MFT LPCC students.			
Increased Service Provision to Specific Groups	 Expansion and improvement of mental health services offered to student veterans. We have a social worker graduate student trainee working with us in 2014-15 who is a veteran with 20+ years military service. Grant resources will help send him to [college] this summer to tour/explore their mental health services to veterans. This trainee and other Health Service Mental Health providers will be attending the college's Veteran's Welcome night before the beginning of the Fall Semester. We expect that these efforts, and others, will improve and increase the utilization of mental health services by our student veterans. 			
	 Much more enhanced services to LGBTQ, Veterans, Active Minds Chapter and NAMI campus chapter. 			
	 Our partnership with County Mental Health will develop a male veterans' group to meet weekly on campus in the coming academic year. 			
Increased Funding	New grants focusing on Veterans and LGBTQ			
Opportunities (i.e., mentions grants)	 If successful, we have applied for the SAMHSA grant to continue and expand the work of this grant, though expanding the hours and responsibilities of our mental health provider, creating an expanded mental health services is planned to begin next year. 			
Infrastructure	 Implement Maxient software to help manage threat assessment for students of concern. Has the potential to expand to managing student success. We are also piloting a ""student success score"" tool to begin measuring health and student success. 			
Other	• This is not related to the grant, but beginning fall 2014 we will have a post-doctoral internship program with one 20 hour week psychologist supervising two part time post-doctoral interns. We hope to double the number of mental health hours for the same cost. We need a full time psychologist but cannot afford since we only charge our students \$11 for a health fee. If we charged the maximum allowed by the state we would hire a full time psychologist to run the mental health program and would probably spend 50% of the health budget on mental health.			

Appendix E4: Capacity Survey Questionnaire (Wave 2, CBG Version)



Thank you for agreeing to complete this California Community Colleges Student Mental Health Program (CCC SMHP) Capacity Survey of Campus Based Mental Health Services. The Pacific Institute for Research and Evaluation (PIRE) is conducting this survey as part of the evaluation of the California Community Colleges Student Mental Health Program. We conducted a baseline survey similar to this one in the Spring of this year.

This survey is targeting the most knowledgeable person about mental health service capacity at each California community college (including those who received Campus Based Grants in 2012 and those who did not receive these grants). We realize that colleges have varying levels of capacity for mental health services for a variety of reasons. The purpose of the survey is simply to better understand the current level of capacity across the California Community Colleges and to track change in capacity over time. The survey should take approximately 30 minutes to complete. While you can save your responses and return the survey at a later time, we ask that you complete this survey within ten days, if possible. Should you have any questions about the survey please contact David Collins, Research Scientist at PIRE. He can be reached by phone (502-238-7338) or email (collins@pire.org).

Note: Questions marked with an asterisk (*) require an answer due to how the questions are set up for the online survey.

1.	Please indicate what college you are responding about:
2.	Does your college have a health center on campus that provides mental health services?
	○ No
	 Yes, mental health services are provided within a health center

Yes, mental health services are provided within a separate mental health center

 My college does not have a health center or mental health center that provides mental health services, but has another office on campus that faculty, staff or students would contact related to student mental health issues or concerns 3. Now thinking about the time period between January 1 and September 30, 2013, during this time period did your college develop or expand (a)... (Indicate "Yes" even if only partially developed in that timeframe.)

<u>Please note</u>: While 'student of concern' often refers to a student who may be a risk to him or herself or others, the term may also include a student who is distressed and whose behavior causes others concern for the personal well-being of that student.

	Yes	No
a. System for faculty, students and staff to refer students of concern to the appropriate health center, mental health center or other designated office	0	0
b. System for the health or mental health center staff to conduct appropriate assessments to identify the mental health services needed by students of concern	0	0
c. System for health or mental health center staff to refer students of concern to needed mental health services	0	0
d. Screening processes at on campus health or mental health center to identify student mental health issues (e.g., administration of PHQ-9 or GAD-7)	0	0
e. Depression Screening Day events (e.g., at health fairs or other campus wide events)	0	0
f. Faculty / Staff / Student Suicide Prevention Gatekeeper Training	0	0
g. Other Suicide Prevention Activities	0	0
h. Suicide Prevention Policies	0	0
i. One-on-one Services with a mental health professional offered on campus	0	0
j. Group Services with a mental health professional offered on campus	0	0
k. Behavioral Intervention Teams or Crisis Intervention and Response Teams	0	0
I. Threat Assessment Protocols	0	0
m. Electronic Health Reporting System	0	0
n. Peer to Peer Training	0	0
o. Other Peer to Peer Activities	0	0
p. Campus-based Mental Health Related Clubs / Chapters / Support Groups	0	0
 q. Stigma and Discrimination Reduction Activities related to accessing mental health services (LGBTQ, Veterans) 	0	0
r. Mental Health Service Resources available on college website to faculty, students, and staff	0	0
s. Mental Health Service Resources available to faculty, students, and staff through dissemination strategies other than college website (e.g., campus newsletter, flyers)	0	0

4. Again, thinking about the time period between January 1 and September 30, 2013, did your college collaborate with any of the following institutions in developing or expanding the following?

<u>Please note</u>: While 'student of concern' often refers to a student who may be a risk to him or herself or others, the term may also include a student who is distressed and whose behavior causes others concern for the personal well-being of that student.

	County mental health	Other California Community Colleges	Universities in the UC or CSU system	Training or T/A Provider (e.g., CARS or Kognito)
System for faculty, students and staff to refer students of concern to the appropriate health center, mental health center or other designated office	0	0	0	0
b. System for the health or mental health center staff to conduct appropriate assessments to identify the mental health services needed by students of concern	0	0	0	0
c. System for health or mental health center staff to refer students of concern to needed mental health services	0	0	0	0
d. Screening processes at on campus health or mental health center to identify student mental health issues (e.g., administration of PHQ-9 or GAD-7)	0	0	0	0
e. Depression Screening Day events (e.g., at health fairs or other campus wide events)	0	0	0	0
f. Faculty / Staff / Student Suicide Prevention Gatekeeper Training	0	0	0	0
g. Other Suicide Prevention Activities	0	0	0	0
h. Suicide Prevention Policies	0	0	0	0
i. One-on-one Services with a mental health professional offered on campus	0	0	0	0
j. Group Services with a mental health professional offered on campus	0	0	0	0
k. Behavioral Intervention Teams or Crisis Intervention and Response Teams	0	0	0	0
I. Threat Assessment Protocols	0	0	0	0
m. Electronic Health Reporting System	0	0	0	0
n. Peer to Peer Training	0	0	0	0
o. Other Peer to Peer Activities	0	0	0	0

	County mental health	Other California Community Colleges	Universities in the UC or CSU system	Training or T/A Provider (e.g., CARS or Kognito)
p. Campus-based Mental Health Related Clubs / Chapters / Support Groups	0	0	0	0
 q. Stigma and Discrimination Reduction Activities related to accessing mental health services (LGBTQ, Veterans) 	0	0	0	0
r. Mental Health Service Resources available on college website to faculty, students, and staff	0	0	0	0
s. Mental Health Service Resources available to faculty, students, and staff through dissemination strategies other than college website (e.g., campus newsletter, flyers)	0	0	0	0

r.	Mental Health Service Resources available on college website to faculty, students, and staff	0	0	0	0
S.	Mental Health Service Resources available to faculty, students, and staff through dissemination strategies other than college website (e.g., campus newsletter, flyers)	0	0	0	0
5.	* Between January 1 and September 30, 20 technical assistance that included a focus of your college? O Yes No Don't Know If No or Don't Know, skip	n building t	he mental he	_	
6.	How many times between January 1 and Set training or technical assistance that include capacity of your college? Once	-	-	_	
	○ Twice				
	○ Three Times				
	○ Four times				
	○ Five times				
	○ Six or more times				

7. To what extent did the training or technical assistance your college received impact mental health programming or capacity building (e.g., system to referring students to

	needed mental health services) by your college between January 1 and September 30, 2013?
	○ No impact
	○ Slight impact
	○ Moderate impact
	○ Large impact
8.	* Does your college charge a student health fee?
	○ Yes
	○ No
	 No If No or Don't Know, skip to Question 11.
9.	What percentage of your college's health fee goes toward mental health services?
	(Please do not include the % sign in your response):
10	. What percentage of your college's health fee goes toward other health services?
	(Please do not include the % sign in your response):
11.	Of all the staff in your college's health center that provide mental health services to students, how many total hours per week do the staff work? (For example, if three staff people work 12 hours each, you would report 36 hours.)
	# Hours:
12.	. Of all of the staff on your campus who provide mental health services to students, how many fall within the following categories? Please note that we are asking about mental health services as distinct from academic/personal counseling.
	(Please indicate the number of staff in the appropriate boxes below.)
	a. # Psychiatrists or other licensed prescribers:
	b. # Full-time mental health counselors/therapists:

c. # Part-time mental health counselors/therapists:
d. # Mental health counseling interns or trainees:
e. # Nurses:
f. # Other:

13. Please rate the extent to which you think...

	Not at all or to a very little extent	To a little extent	To some extent	To a great extent	To a very great extent
a. There are efforts in your college to link students of concern to mental health support services.	0	0	0	0	0
b. Faculty and staff are aware of these efforts.	0	0	0	0	0
c. Faculty and staff understand the importance of taking action to link students of concern to mental health support services.	0	0	0	0	0
d. Faculty and staff in your college understand the causes of psychological stress, its consequences, and how it impacts the institution or community.	0	0	0	0	0
e. The leaders of your college are supportive of efforts to link students of concern to mental health support services.	0	0	0	0	0
f. Resources are available in your college—people, time, money, space—to support efforts on this issue.	0	0	0	0	0
g. Your college's mental health service system has the capacity to adequately refer students of concern to needed mental health services.	0	0	0	0	0
h. Your college's mental health service system has the capacity to adequately track the referrals of students of concern to needed mental health services.	0	0	0	0	0
 Your college's mental health community partners (e.g., county mental health) have the capacity to receive mental health referrals from you. 	0	0	0	0	0

Thank you for taking the time to complete this survey!