Welcome!

Addressing the Mental Health Crisis on College Campuses:
Practical Strategies For Higher Education Leaders

Featuring Special Guest:
Dr. Ryan Patel, D.O., FAPA
Senior Staff Psychiatrist and Adjunct Clinical Professor
The Ohio State University
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Integrate your LMS with access to a vast library of FranklinCovey course resources to use in-person or on-demand.

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Addressing the mental health crisis on college campuses: Practical strategies for higher education leaders

Ryan Patel DO, FAPA
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Objectives

• Mental health crisis on campus

• Culture of care

• Strategies that can be applied by university leadership, administration, faculty, staff, frontline college health professionals, department level, campus level, student body, campus community, parents, etc.
Mental health crisis

- During the 2020–2021 school year, more than 60% of college students met the criteria for at least one mental health problem (Lipson, S., et al., *Journal of Affective Disorders*, Vol. 306, 2022). (Healthy minds data, 273 campuses)

- In another national survey, almost three quarters of students reported moderate or severe psychological distress (National College Health Assessment, American College Health Association, 2021).

- [https://www.apa.org/monitor/2022/10/mental-health-campus-care](https://www.apa.org/monitor/2022/10/mental-health-campus-care)
• The number of students seeking help at campus counseling centers increased almost 40% between 2009 and 2015, and continues to rise.

Data from Penn State University’s Center for Collegiate Mental Health (CCMH), a research-practice network of more than 700 college and university counseling centers (CCMH Annual Report, 2015).
• 1 in 3 college students experiences a mental health condition during their time in college
• Only 10% of college students seek treatment for mental health condition
• 58% of university presidents do not feel they have adequate mental resources on their campus.
• Compared with past generations, we are seeing more students on campus today have accessed mental health treatment before college.

• Stigma around mental health issues also continues to drop, leading more people to seek help instead of suffering in silence.

https://www.apa.org/monitor/2022/10/mental-health-campus-care

Large numbers of students experiencing mental health concerns, seeking treatment on camps, and many more not getting treatment. Campus resources are limited.
Factors impacting young adult mental health

ACHA survey, #1 factor impacting academic performance and retention is mental health
Other factors: adjustment to campus life to economic strain, social injustice, politics, mass violence, and various forms of loss related to COVID-19 → unhealthy life behaviors.

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https://www.apa.org/monitor/2022/10/mental-health-campus-care
Everyone→ Collective impact/approach, Okanagan Charter for health promotion

The commitment of a group of important actors from different sectors to a common agenda for addressing a specific complex problem at scale.

“Collective Impact” by John Kania and Mark Kramer

1. To embed health into all aspects of campus culture, across the administration, operations and academic mandates.
2. To lead health promotion action and collaboration locally and globally

https://www.healthpromotingcampuses.org/okanagan-charter/
A similar approach can be useful to address Mental health crisis

• Mental health on campus, is a large scale community wide problem beyond any single unit or department.

• One approach to address this type of problem is through a “Culture of care”, that mental health on campus is everyone’s responsibility—faculty, students, staff, administration, leadership, community, parents, etc: everyone has a role on campus mental health.
  • A collective approach towards campus mental health
Strategies to address the crisis: Leadership/administration

- Setting the culture and expectations, turnover/burnout
- Student recruitment, expectations
- Chief employee wellness officer → Student health wellbeing AVP.
- Staffing 1:1400 AUCCD data (based on older data, prevalence today is much higher)
- Outsourcing capacity options when staffing options are limited: Betterhelp, Talkspace, MD live, Talkiatry, etc.
- A centralized site (mental health support options)
- Unified messaging across units
- Large scale mental health support options—as students are more tech savvy, and are wanting on demand services
- Community partnerships (for mental health promotion and disease treatment)
Strategies to address the crisis:
Leadership/Administration Programming

• Leading by example on wellness/mental health promotion:
  • Impact of you doing it, and talk about it, promote it, etc.
  • Cross Promotion: Blog/social media ➔ micro skills, campus specific proactive content calendar

• Academic calendar, instructional breaks
• Nature, walking paths, study space
• Outreach/wellness programs: Micro-interventions and information
Large scale computer assisted therapies that can be deployed to the entire campus population

Advantages
Scale: can reach a large number of students, potentially every student could use a service at the same time
Cost effective
Relative efficacy
Convenience (anytime anywhere)
Good for the basics
Stand alone or adjunctive (between sessions) with in human therapy and psychiatry/medication management
Self paced modules/homework format.
Can provide/teach a variety of coping skills
Can be general or Disease specific (Anxiety, stress, depression, insomnia, emotional support, etc)
Marginalized communities (study)

Disadvantages
Some programs are expensive
Some programs have limited evidence of efficacy
Complex problems, co morbid conditions
Treatment resistant cases
Some students may do better with in person therapy
Some students may respond to other therapeutic modalities (non cbt treatment). IPT, trauma focused, RET, etc.
Therapy modality efficacy may not translate to computerized program efficacy.
Variable terminology \lits review challenges.
Not necessarily directly decrease demand for individual counseling, but can potentially provide some support to everyone; may decrease overall health burden.

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• More organizations are adopting officers/directors of mental health technologies, digital therapeutics that are deployed to entire populations served
### Table 1 CCBT programs with multiple randomized, controlled trials

From: [Computer-Assisted Cognitive-Behavior Therapy and Mobile Apps for Depression and Anxiety](https://doi.org/10.1007/s11920-019-1031-2)

<table>
<thead>
<tr>
<th>CCBT program</th>
<th>Primary application</th>
<th>Link</th>
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<tbody>
<tr>
<td>Beating the Blues [16,17,18]</td>
<td>Depression</td>
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<td>Sadness Program [29,30,31,32]</td>
<td>Depression</td>
<td><a href="https://www.c4tbh.org/program-review/the-sadness-program/">https://www.c4tbh.org/program-review/the-sadness-program/</a></td>
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### Table 2 Mobile apps for depression and anxiety

From: [Computer-Assisted Cognitive-Behavior Therapy and Mobile Apps for Depression and Anxiety](https://doi.org/10.1007/s11920-019-1031-2)

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<th>Mobile app</th>
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<td>Breathe2relax</td>
<td>Breathing exercises</td>
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<td>Calm</td>
<td>Soothing music and photos, meditations, calming stories</td>
<td>Calm.com</td>
<td><a href="http://www.calm.com">http://www.calm.com</a></td>
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<td>Day to Day</td>
<td>Daily tips on CBT skills such as challenging negative thoughts and behavioral activation</td>
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<td>Headspace</td>
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<td>My Mantra</td>
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Some examples of large scale technology based programs for campus mental health
SilverCloud - An online, interactive mental health resource provides students with cognitive behavioral skills and strategies, accessible 24/7. SilverCloud can be either self-guided or used with the support of a coach. SilverCloud does not require a referral and you can start right now.

Program for everyone

Programs spanning wellbeing and mental health to provide a full toolkit of resources and support to meet members where they are.

24/7 access, via app, tablet or desktop
30+ Global Mental Health Programs/Therapy Areas

SilverCloud born in Trinity College

18+ Years of Research and Evidence

Up to 65% Significant Clinical Change

600k+ Active Users

300+ Clients

7m+ Clinical Interactions

Numerous Awards

Deloitte - Fast 50, 6 consecutive years
Deloitte – Impact Award
Accenture – Intelligent Automation
TripleTree – Improving Consumer HC
Leading HC – Innovation of the Year

1/4 Of Company Clinical Research Focused

Users maintain gains for more than 12 months

75% NHS IAPT services

Innovation, Outcomes, Scalability, Experience
### Real World Results: Clinical Outcomes at All Severity Levels

<table>
<thead>
<tr>
<th>PHQ9 (Depression Score)</th>
<th>GAD7 (Anxiety Score)</th>
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<td><strong>Subclinical Range</strong></td>
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<td>User: n=235,207</td>
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#### PHQ9

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### Notes
- The table represents the percentage of users in each severity level for depression (PHQ9) and anxiety (GAD7) scores.
- The severity levels are categorized as Minimal, Mild, Moderate, Moderately Severe, and Severe.
- The table indicates the percentage of users in each severity level across different PHQ9 and GAD7 score ranges.
### Real World Results: Clinical Outcomes at All Severity Levels

#### GAD7 (Anxiety Score)

<table>
<thead>
<tr>
<th>User: n=235,207</th>
<th>Severe</th>
<th>Moderate</th>
<th>Mild</th>
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• Therapy Assistance Online (TAO)

• TAO includes over 150 brief, effective, educational sessions covering over 50 common topics and skills related to mental health, wellness and substance use issues. TAO Includes interactive sessions, mindfulness exercises and practice tools all aimed at helping you achieve your goals.

• https://us.taoconnect.org/register.
Personal and Professional development

TAO offers training tools for personal development often valued by employers, ranging from self-awareness as a leader, communication skills and problem solving to mindfulness, journaling and practice tools.

Situational problems and mild concerns

Sometimes we struggle with life problems, TAO has effective single session resources for many of these: procrastination, perfectionism, test anxiety... along with sessions to help evaluate alcohol and drug use and relationship health.

Moderate problems

TAO has interactive, engaging short courses (3-4 weeks) for stress management, grief and loss, worry, recovery after break-up, caregiver fatigue, social anxiety, anger conflict and management and others.

Severe or chronic problems

TAO includes protocolled treatments using CBT, Behavioral Activation, Acceptance and Commitment Therapy, Motivational Interviewing, Alcohol and drug sessions using both Harm Reduction and abstinence.

Ryan Patel DO, FAPA
Multiple Ways to Deliver Content

1. Individual Self-Directed
TAO self-guided allows you to learn new skills, develop coping strategies, and deal with mental health-related struggles in your own time and on your own pace in total privacy.

2. Group Training
TAO allows you to create your own group: select content, enroll group members, and work through selected content week by week. Groups can range from professional skill development, building resilience, to treating anxiety or depression.

3. Individual Treatment
TAO is an effective adjunct to mental health treatment. Assign content to individual patients to bridge between sessions and practice skills discussed in sessions. TAO allows the therapist to review patient work in TAO.

4. Skill Development Program
TAO allows you to create skill development programs for certification or to earn badges in soft skills important to employers.

5. Treatment Program
TAO content can be used with inpatient or intensive outpatient treatment for mental health or substance use problems and help bridge to less intense outpatient support.

6. Course Work Embedded
TAO sessions can be used in for credit course work for skill development, building resilience, learning mindfulness and other uses. Instructors can create a course and use the embedded gradebook.

Ryan Patel DO, FAPA
• TAO research:


• **WellTrack**

• Suite of online tools and courses that uses aspects of CBT to help you identify, understand and address concerns impacting mental health.

• No published trials yet.

• No satisfaction or outcome measures on the company website yet.
WellTrack provides help for student mental health issues and can be used as a part of your self-help outreach program and as a part of face-to-face therapy.

ASSESSMENT
WellTrack uses the DASS-21. It takes about five minutes to complete this assessment, which is important because students tend to lose interest with longer assessments and drop out. Quick assessments provide students with immediate feedback on their levels of stress, anxiety and depression.

SELF-HELP
Our training modules are focused on the major issues of stress, anxiety and depression. Short training sessions are combined with homework using WellTrack tools (Thought Diary, The Zen Room, MoodCheck, and Activity Scheduler) that are delivered on your smartphone.

VIDEO CHAT
Remote client support allows you to provide students with video therapy sessions or to simply do quick check-ins with your clients.

RESOURCES
Integrate your on- and off-campus resources for academic, financial, health and wellness, substance abuse, safety and security, and sexual violence into WellTrack. Individual students will be recommended a customized suggestion based on which areas they indicate they need more support.

INSIGHTS
View aggregate data on how your student population is benefiting from WellTrack. Get insights that tell you which issues are most prevalent on campus, and how many students have improved their mental health using our self-help programs. Insights also summarize resource use.
Mindfulness

• Mindfulness meditation has been shown to have various mental health benefits.

• A review of 13 studies showed improvement in ADHD symptoms with mindfulness meditation (1).

• 41 trials show mindfulness meditation helped improve stress related outcomes such as anxiety, depression, stress, positive mood, etc. (2)


Meditation apps that can be made available to the entire campus body

- **Calm app** (institutional subscription)
- 25 different studies
- More research ongoing
- Also helps with mood.

**Headspace**
Guide to practicing mindfulness in your everyday life.
“Learn how to relax, manage stress and focus your energy to become more centered and well rested.”

Ryan Patel DO, FAPA
Big health (daylight and sleepio): 13 randomized control trials, 4 guidelines (US and Europe), 28k participants studied. 
https://www.bighealth.com/research/

https://www.bighealth.com/sleepio

Daylight anxiety app: https://www.bighealth.com/outcomes
Demo video: https://www.bighealth.com/daylight/

After 10 weeks, 71% of Daylight patients moved from clinical to non-clinical levels of anxiety, as compared to 33% of those in the control group.


Ryan Patel DO, FAPA
A 2020 study of Daylight users: 71% reported improvement in anxiety, 57% reported improvement in mood, and 47% reported improvement in insomnia.

BetterYou
Digital health coach
Helps students make better decisions by linking them back to their goals (social, academic, mindfulness)
Examples: getting better sleep, study goals, being more social, etc.
It coordinates with apps like Calm and Headspace and helps work towards your meditation goals.
It also has a spirituality section on which can include any popular religious apps.
Cost: rewards coupons, privacy, etc.
YouatCollege: 200+ campus partners, 2500+ pieces of content: self assessment, goal setting, skill building, connect to campus partners, normalizes and personalizes wellbeing, integrates student posts and connect to campus resources.
MINDSTRONG™

• Developed at tOSU
• Build coping skills and improve your resiliency to help you deal with stress, anxiety or depressed mood.
• Nearly 20 different research studies show that this evidence-based, cognitive-behavioral skills-building program to help reduce stress, anxiety and depression while improving healthy lifestyle behaviors.
• Studies are ongoing.
TogetherALL

Togetherall is a safe, online community to share feelings anonymously and get support to improve mental health and wellbeing. In the community people support each other, safely monitored by licensed and registered mental health practitioners. Variety of affinity groups provided. Recently, announced partnership to integrate into Anthem Student Advantage Health plans.

https://togetherall.com/en-us/
Demo:
SKY Campus Happiness

• A comprehensive biopsychosocial program tailored for university populations—students, faculty, and staff—offered by the International Association for Human Values and Art of Living Foundation and designed by Sri Sri Ravi Shankar.

• Bringing meditation, breathwork, emotional intelligence, social connection, and service leadership to college students, faculty and staff.

• https://www.skycampushappiness.org/
OSU:
Silvercloud
Mindstrong
Headspace
Mental Health skills videos (internally developed)
OSU Wellness App
Sleep, Exercise strategies for mental health
Food strategies for depression, anxiety, focus
Digital wellness
Student wellness center (wellness coaching, workshops)
Emotional fitness blog
OSU Wellness App

• Students can use the app to create their own “wellness plan” and access timely content, such as advice for managing stress during final exams. They can also connect with friends to share articles and set goals—for instance, challenging a friend to attend two yoga classes every week for a month. OSU’s apps had more than 240,000 users last year.
Life behaviors and mental health

• Large and growing research showing the role of nutrition, exercise, sleep behaviors and mental health.

• A significant area of deficit for a large number of college students

• Can help or worsen anxiety, depression

• Natural student interest in using this approach

• Wellness: exercise, sleep, nutrition for mental health programs at scale. Course credit? (Example: My workshop program)
  • Students are provided with a 1 hour education session on the connection, foods to avoid/increase, problem solving.
• Rec sports pickup, league play, campus events and resources
• Pet therapy
Wellness programs targeting Insomnia

Insomnia Is a Risk Factor for Psychiatric Disorders

Incidence (%) over 3.5 years

- Insomnia (n=240)
- No Insomnia (n=739)

Incidence (%)

*95% CI for odds ratio excludes 1.0.

Breslau N, et al. 1996

Academic Failure GPA<2.0


Ryan Patel DO, FAPA
On Demand services

• **Mental Health Strategies Series** – A series of short videos focused on skills and strategies for improving mental health.

• Blog (next slide)
Emotional Fitness blog

On dept website, OSU social media

Attracting 100,000 page views

Also posted on other OSU social media, parents page, wellness app, etc

Mindfulness meditation vs esketamine for anxiety

Mindfulness meditation has been shown to have various mental health benefits. For example, a review of 6 studies showed improvement in ADHD symptoms with mindfulness meditation. (1)

A review of 8 clinical trials shows that mindfulness meditation is more effective than medication in reducing symptoms of anxiety. (6)

A recent study testing whether mindfulness-based stress reduction (MBSR) was as effective as an antidepressant medication in reducing anxiety (9).

Who was in the study? (9)

- 132 participants in the MBSR and 100 participants in the waitlist group with a mean age of 32 years (3).
- Participants were mostly female (9).

How was the treatment? (9)

- Clinical Global Impression of Severity scale (CGI) was performed by blinded clinical interview at baseline, week 0, and post-treatment weeks 6 and 12.
- Participants were randomly assigned to the Mindfulness-Based Stress Reduction program (MBSR) or wait-list control (WLC) condition (9).

What was the intervention? (9)

- Participants were administered 11 to 14 weeks of the weekly MBSR course in the outpatient setting and completed Mood Gains from 0 to 20 mg (4).
- MBSR group received MBSR, a 12-week program with 45 minutes daily home practice sessions, weekly 2-hour sessions, and daily practice notes (6).
- Participants were taught several forms of mindfulness meditation, such as breathing awareness (paying attention to the breath and other physical sensations), body scan (paying attention to the body part, at a time, and observing how the body part feels), and mindful movement (mindful walking and mindful standing to bring awareness to the body and increase introspective awareness). (9)

What were the results? (9)

Participants who completed the trial at week 12 showed an average for OSDS score of 5.0, which is a significant improvement in depression compared with participants who completed 12 weeks of MBSR, which had a mean OSDS score of 2.6. (9)

The Ohio State University

Tips and Skills for Mental Health

Ryan Patel DO, FAPA
• **Wellness Coaching** takes a positive approach to personal development, focusing on your strengths and using the Ten Dimensions of Wellness model as a framework for generating goals that are meaningful for students. (Staff and/or peer led)
Strategies to address the crisis: Campus community

• Community resources page, partnering with community organizations
• Collaborative relationship (trainings, process/flow meetings, demand communication)
• AOD/vendors/options/permitting
Strategies to address the crisis: Faculty

• In class 2-3 minute Mental health moments, gratitude/mindfulness exercise, positive imagery, words of inspiration/encouragement, humor
  • https://wexnermedical.osu.edu/integrative-health/resources/mindfulness-practices
• Timing of exams
• Collaborating with other faculty regarding online/cancel class strategically
• Instructional breaks
• Tone of interactions with students: verbal and electronic
• Advisors

Ryan Patel DO, FAPA
Syllabus statements

• Sets the tone, procedure, expectations ahead of time, impacts student mindset and perception

• Example,

• “As a college student, there may be times when personal stressors interfere with your academic performance and/or negatively impact your daily life. If you or someone you know is experiencing mental health challenges at Caldwell University, please contact Counseling Services located within the Wellness Center on the 2nd floor of the Newman Center or call 973-618-3307. Their services are free and confidential. In a crisis situation, contact Campus Safety and Security at 973-618-3289 or the Police at 911. The New Jersey Hopeline also offers a 24-hour hotline at 855-654-6735.”

• https://www.smith.edu/sites/default/files/media/Office%20Images/Sherrerd%20Center/Sample%20of%20Mental%20Health%20Statements%20for%20Syllabi.pdf
Examples of syllabus statements

- [https://provost.uoregon.edu/syllabus-guidelines](https://provost.uoregon.edu/syllabus-guidelines)
- [https://www.geneseo.edu/health/mentalhealth_syllabi](https://www.geneseo.edu/health/mentalhealth_syllabi)
- [https://www.union.edu/academic-affairs/policies-forms/examples-mental-health-and-campus-resources-statement-syllabus](https://www.union.edu/academic-affairs/policies-forms/examples-mental-health-and-campus-resources-statement-syllabus)
- [https://www.smith.edu/sites/default/files/media/Office%20Images/Sherrerd%20Center/Sample%20of%20Mental%20Health%20Statements%20for%20Syllabi.pdf](https://www.smith.edu/sites/default/files/media/Office%20Images/Sherrerd%20Center/Sample%20of%20Mental%20Health%20Statements%20for%20Syllabi.pdf)
Don’t Cancel That Class!

https://swc.osu.edu/presentations-and-trainings

• Are you (faculty) expecting to miss one or more classes this semester due to a previously scheduled personal or professional engagement?

• Don’t Cancel that Class! The Student Life Student Wellness Center would be happy to take advantage of your class time to provide health and wellness education to your students.

• Wellness topics such as budgeting and finances, stress management, body image and nutrition, sexual health, alcohol and other drugs, and more!

• 1 hour presentations

• Attendees of a Student Wellness Center Presentation or Training will:

  • Be able to identify, understand and access resources provided by the Student Wellness Center
  • Be able to identify wellness resources on campus and within the community
  • Attain an understanding of holistic wellness
  • Be provided the tools to develop a skill to create habits / behaviors that enhance their wellness
  • Attain an understanding of the relationship between wellness and personal growth

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Strategies to address the crisis: Staff

• Informational outreach ➔ Interventional outreach, culture of care (consistent messaging and language across campus units and community), system of resources (MH options page)

• Life skills programming (nutrition, sleep, exercise, digital wellness, aod education and prevention, etc.)

• Anonymous screening and referral, data driven
Academic advisors

ACHA-NCHA III spring 21:
50% of students reported that academics caused them “high distress” and 39% reported it caused them “medium distress” in 12 months

Reasons for meeting with academic advisor: 32% “overwhelming”, 21% “stress”, 3% “anxiety”

“If you had a mental health problem impacting academic performance, which people at school would you talk to? Academic advisor ~25%, faculty ~4%, Dean ~4%, Professor 14%, Staff 12%
• **Gatekeeper training for faculty, advisors, students, and staff:**

• Provides basic skills for supporting people with mental health and substance use issues and referring them to the appropriate resource.
  • Examples: Mental health first aid, qpr, REACH, etc.
Strategies to address the crisis: Student body

- Gatekeeper training, peers reaching out.
- Sky yoga
- Peer support program: PAL, chat
- MH ambassador program
- Wellness peer coaching: nutrition, exercise, goalsetting
- Workshop facilitators wellness programs and MH outreach, automation.
- **Fresh Check Day®** is an uplifting mental health fair that includes peer-run interactive booths, free food, music, and exciting prizes and giveaways. "You can save a life with this program" 82% of students who attend **Fresh Check Day** say they are more likely to ask for help. [https://freshcheckday.com](https://freshcheckday.com)
Strategies to address the crisis: Parents

• Proactively Educating on:
  • Health insurance: proactive parent education
  • Baseline mental health needs
  • MH services in and around community
  • College preparedness (life style, self efficacy, etc.)
  • Student/college fit (beyond academics)
  • Autonomy/support balance
  • Supporting the students nutrition and life behaviors
  • Expectation management of the student, campus, and community
  • Periodic visits, supportive communication
  • Health and wellness: being a model
Conclusions

• Campus mental health is not limited to one specific department or unit, it is everyone’s responsibility → collective impact to address the large-scale problem.

• This presentation shows examples of how everyone can contribute positively to impact campus mental health

• Next level approach is the entire system working together, complementing each other to maximize positive impact

• Follow up: patel.2350@osu.edu
Thank You!

Addressing the Mental Health Crisis on College Campuses:
Practical Strategies For Higher Education Leaders

To learn more about LeaderU, visit our higher ed section at www.franklincovey.com or email educate@franklincovey.com.