

Challenging Mental Health Stigma and Increasing Impact of Outreach Interventions by Building Collaborations on College Campuses

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OVERVIEW

- Facts about College Mental Health Concerns
- Services Provided in Colleges
- The level of Use of Services
- Barriers to Accessing Services
- Role of Counseling Centers
- Strategies for Increasing Participation in Mental Health Awareness Programs
- Key Collaborators
- Challenges and Opportunities of Collaborative Outreach Programs
- Understanding Stigma
- Reaching underserved student populations
- Increasing access to support through community interventions

Facts about Mental Illness in College Students

- 1 in 3 students report prolonged periods of depression
- 1 in 4 students report having suicidal thoughts and feelings
- 1 in 7 students report engaging in abnormally reckless behavior
- 1 in 7 students report difficulty functioning in school due to mental illness
- 30% of students report having a friend with difficulty functioning due to a mental health problem

SERVICES

Types of Services Offered:

- Individual Counseling
- Group Counseling
- Couples Counseling
- Psychiatric Services

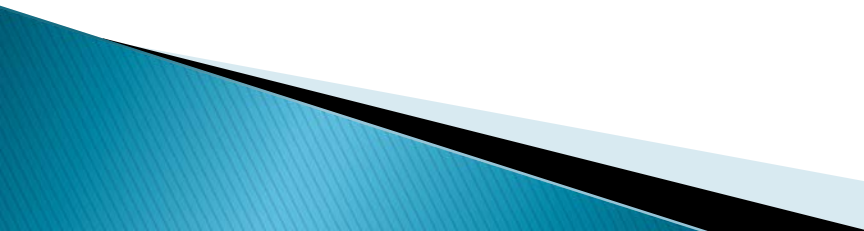
Cost of Services Offered:

- Free vs. Fee for Services

Level of Use of Services

- NAMI (National Alliance on Mental Illness) published the 'College Students Speak' – A Survey Report of Mental Health (2012)
- 50% of students with mental health conditions do not disclose their diagnoses
- 73% report experiencing crisis while in college
- 35% of students accessed services on campus

Reasons for Not Disclosing Diagnosis (NAMI, 2012)

- Concerned about how they would be perceived
 - No opportunity to disclose
 - Did not believe diagnosis would impact academic performance
 - Concerned that disclosure will not remain confidential
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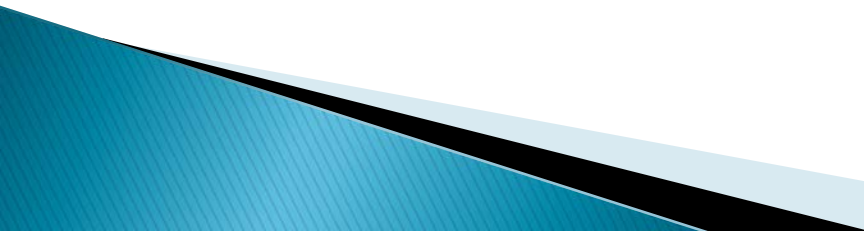
Barriers to Accessing Services

- Stigma 36%
- Busy schedule 34%
- Hours of service 25%
- Lack of information 24%

Consequences of Untreated Mental Illness

- It causes people to socially withdraw
- Academically fail or drop out of school
- Engage in Substance abuse
- Exhibit unsettling behaviors
- Engage in self-harm and life threatening behaviors (e.g., 50% of people with untreated bipolar disorder attempt suicide)

Students' suggestions on how to combat the stigma of mental Health– NAMI (2012)

- 60% recommended a Health Fair
 - Informing campus about mental health issues
 - *A respondent said “Publicizing services helps reduce stigma...”*
 - Marketing services in an intentional, non-stigmatizing format is critical to reach students and challenge stigma of mental illness and mental health services
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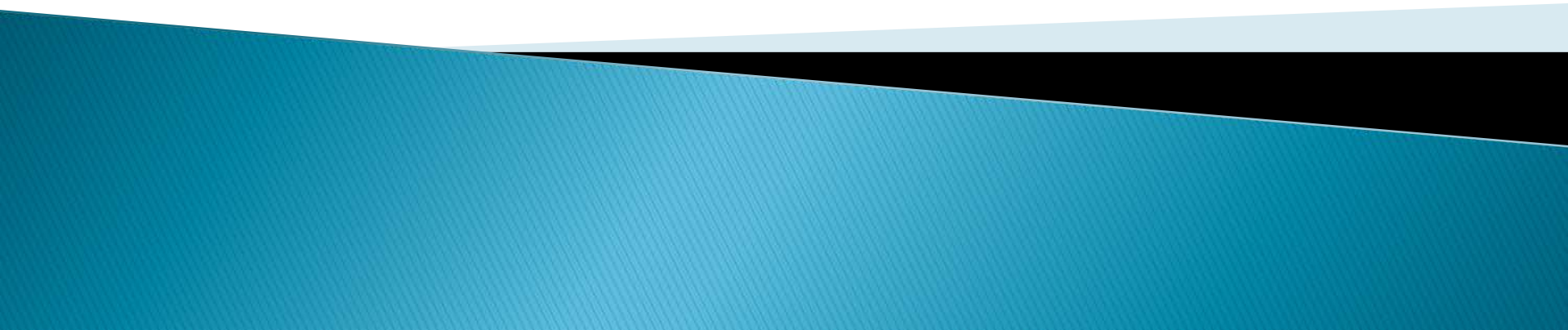
Role of Counseling Centers on College Campuses

- Definition of Outreach: “any organized program, workshop, media, effort, class, or systematic attempts to modify the campus environment” (Stone & Archer, 1990)
- Outreach vs. Community Intervention:
 - Reaching out to promote traditional counseling services
 - Delivering services in the community (e.g., collaborative outreach groups on campus, Let’s Talk, discussion groups, etc.)
 - Outreach as the Intervention itself – community interventions

Role of Counseling Centers (cont.)

- Encouraging the development of healthy behaviors
- Preventing the development and escalation of mental health concerns
- Teaching and discussing developmental issues are relevant to colleges' mission
- Providing mental health services and outreach efforts are an integral part of a students' comprehensive education

Strategies for De-Stigmatizing Participation in Mental Health Awareness Activities

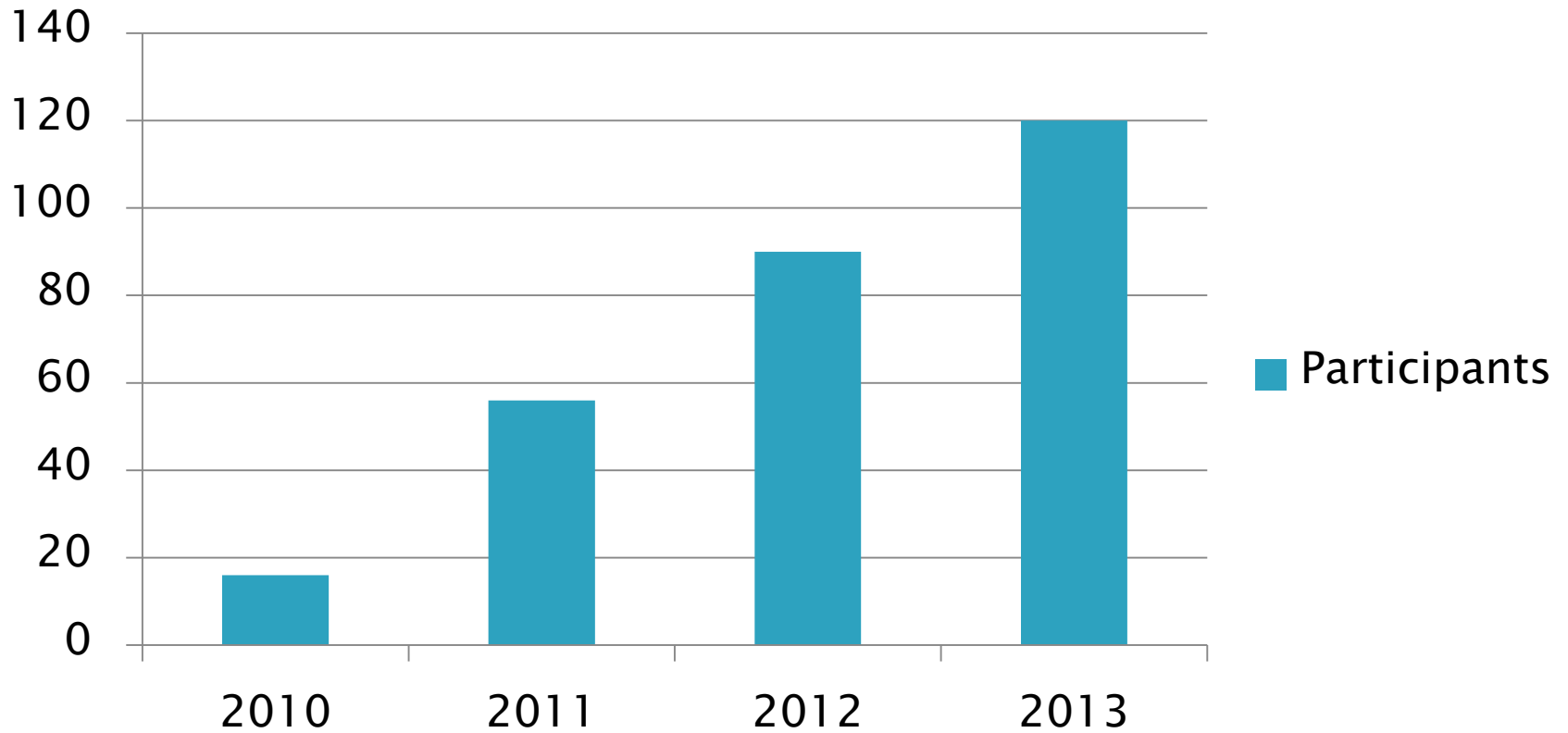
- Collaborating with other units
 - Modifying the names of activities
 - Providing Incentives for participation
 - Making activities more interactive
 - Increasing community interventions in the campus community at key locations
 - Thinking outside the box!
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Key Collaborators

- Health Center
- Health Education
- Human Nutrition Food and Exercise Science
- Maryland –Virginia School of Veterinary Medicine
- Recreational Sports
- The Women's Center
- Cranwell International Center
- Student Organizations
- The Students Success Center

Effects of Collaboration on Participation

Participants



Key Collaborators



Units We Collaborated With (Cont.)



A Major Collaborator: Virginia–Maryland Regional College of Veterinary Medicine



Finals Extravaganza Event



Understanding Stigma

- ▶ **Perceived Public Stigma** – Internalized negative stereotypes and prejudice about mental illness.

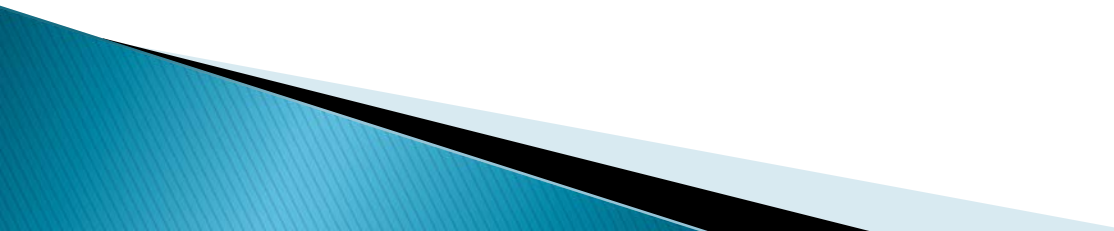
“Most people believe...Most people think... Most people would...”

- ▶ **Personal Stigma** – People’s own stigmatizing attitudes about mental health treatment.

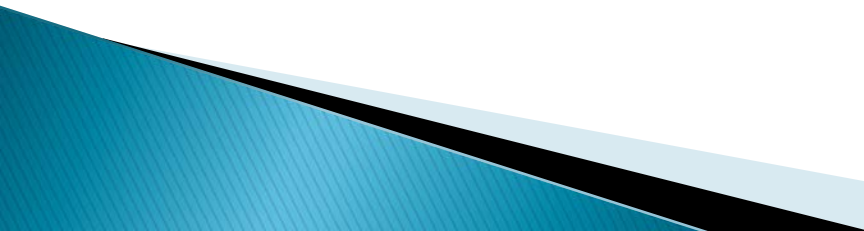
“I would think less of someone...I believe...I would...”

Eisenberg, Downs, Golberstein & Zivin (2009). **Stigma and Help Seeking for Mental Health Among College Students**. *Med Care Res Rev* 2009, 66:522. Sage Publications.


Understanding Stigma (cont.)

- ▶ It is critical to understand “how stigma may affect discreet steps in the help-seeking process. This can inform the development of stigma reduction efforts that are more effectively tailored to increase help-seeking behavior among diverse sectors of the college student population.”
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Perceived Public Stigma

- ▶ High levels of public stigma about mental illness have been repeatedly documented (Phelan, Link, Stueve, & Pescosolido, 2000).
 - ▶ Perceived Public stigma is a strong barrier to help-seeking, due to concern of possible criticism or discrimination from others for seeking help.
 - ▶ Higher perceived public stigma is associated with premature termination and lower treatment adherence (Sirey & Bruce, et al., 2001).
 - ▶ Concern for what people might think has been associated with low help-seeking behavior (Kessler et al., 2001).
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Personal Stigma

- ▶ Higher Personal Stigma has been associated with lower help-seeking in adults and adolescents (Cooper, Corrigan, & Watson, 2003; Penn et al., 2005).
 - ▶ Personal Stigma would deter help-seeking if seeking services implies the acknowledgement of one's own mental health problems and if the individual's internalized negative attitudes toward people with mental health problems would impact his/her self-esteem (Corrigan, 2004).
 - ▶ Findings show that Personal Stigma varies more than Perceived Public Stigma across individual characteristics.
 - ▶ Personal Stigma has been found to be elevated in certain students: male, younger, Asian, international, more religious, lower SES.
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Highlights of Stigma Research Findings

- ▶ Perceived Public Stigma has been found to be substantially higher than Personal Stigma among college students.
- ▶ Many students report high Perceived Public Stigma and low Personal Stigma (the reverse is not the case). To have Personal Stigma, one must have high Perceived Public Stigma.
- ▶ Women have slightly lower Perceived Public Stigma and lower Personal Stigma than Men.
- ▶ Relative to White students, all other racial/ethnic minority students have higher Perceived Public Stigma.
 - Black students have the highest Perceived Public Stigma
 - Asian students have the highest Personal Stigma
 - Hispanic Male students have significantly higher Personal Stigma than Hispanic Female students

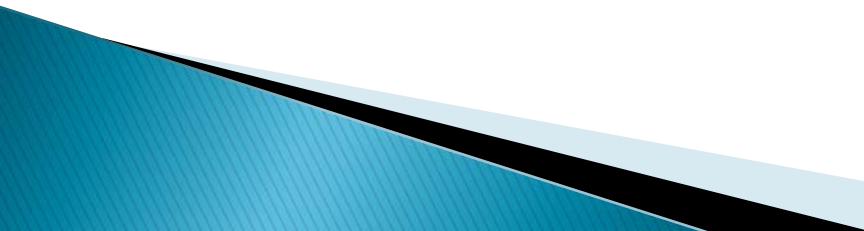
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Highlights of Stigma Research Findings (cont.)

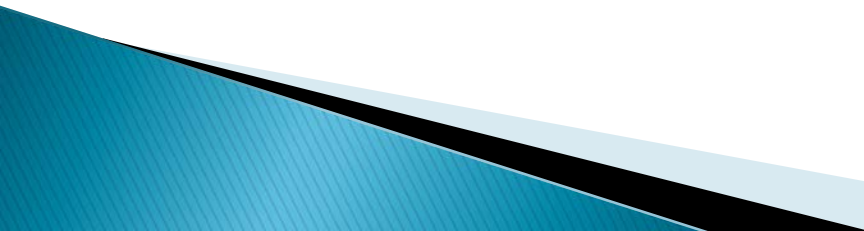
- ▶ Characteristics associated with higher Personal Stigma: younger age, being an international student, higher religiosity, being heterosexual, being male, and being a racial/ethnic minority.
- ▶ Personal Stigma is associated with lower help-seeking of psychotropic medication, therapy, and nonclinical support resources; Perceived Public Stigma is not associated with help-seeking.

Eisenberg, Downs, Golberstein & Zivin (2009). **Stigma and Help Seeking for Mental Health Among College Students.** *Med Care Res Rev* 2009, 66:522. Sage Publications.

Intentional Outreach Programming

- ▶ Developing stigma reduction efforts that are tailored to increasing help-seeking behavior among particular student populations is suggested, such as coordinating programs with student groups who have greater mental health stigma.
 - ▶ It is believed that students have an exaggerated view of Public Stigma. Thus, campus education initiatives should focus on reducing Perceived Public Stigma, such as Social Norms Campaigns to shift misconceptions of public views of mental health treatment.
 - ▶ Emphasizing confidentiality may help reduce Perceived Public Stigma if students feel more confident that their treatment will remain confidential.
 - ▶ Reducing Perceived Public Stigma may have an indirect effect on help-seeking by leading to a decrease in Personal Stigma.
 - ▶ Outreach aiming to reduce stigma among faculty and staff could reduce students' perceived stigma among faculty/staff and thus increase seeking support from these personnel for their mental health and academic concerns.
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Stigma and College Students

- ▶ College is the time of onset of many mental health disorders. Often students are not aware they have a mental health disorder that is in need of treatment (Eisenberg, Golberstein, & Gollust, 2007).
 - ▶ Thus, in college mental health, it is important to consider how stigma impacts students who do NOT identify as having a mental health problem.
 - ▶ It is also important to consider students' willingness to seek support for their mental health symptoms (and/or associated academic difficulties) from non-clinical resources that hold less public and personal stigma.
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Increasing Access to Support for Students with Greater Mental Health Stigma

- ▶ Collaborating with other departments and student groups with decreased stigma is key (e.g., Greeks, Athletes, Res Life, Health Promotion, Women's Center, International Services, Dean's Office, LGBTQ Center, Equity and Diversity, Academic majors, student cultural organizations, UHS, EMS, Police, SGA, etc.)
- ▶ Co-sponsoring workshops, mental health screenings, and other programs with other departments and students groups...never just have CAPS events.
- ▶ Creating collaborative outreach groups at non-clinical locations across campus (e.g., Connecting Across Cultures, Agents of Change, Living Out Loud, Transitions, Self-Defense Group, Yoga/Mindfulness Group).

Increasing Access to Support for Students with Greater Mental Health Stigma (cont.)

- ▶ Offering walk-in support sites (e.g., Let's Talk) at different locations across campus to decrease the barriers to care (e.g., residence halls, student center, academic and administrative buildings across campus).
 - ▶ Collaborating with Active Minds, Psychology Club, and Multicultural Psychology Club to decrease mental health stigma.
 - ▶ Having student Outreach Ambassadors that represent a range of student groups and departments to create a network committed to climate change across campus.
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Future Directions

- ▶ Suicide Prevention Program
 - ▶ Satellite CAPS Outreach/Community Office
 - ▶ Growing the CAPS Empowerment Ambassador Program; possibly combining with the Health Promotion Peer Advocate Program
 - ▶ Increasing connection with Residence Life (e.g., attending staff meetings in residence halls on a more routine basis; continuing/expanding RA training)
 - ▶ Increasing outreach to the Math/Science department, Transfer Students, and particular student groups (e.g., cultural organizations, Greeks, Veterans)
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