



# Student Mental Health on Campus: The Current Landscape

*Speakers: Dr. Sarah Lipson, Healthy Minds Network; Amy Gatto, Active Minds;  
Hannah Ross, Middlebury College*

# About United Educators



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# Today's Speakers

## **Dr. Sarah Ketchen Lipson**

Healthy Minds Network

sklipson@bu.edu

Twitter: @DrSarahLipson | @healthymindsnet

www.healthymindsnetwork.org

## **Amy Gatto, MPH**

Senior Manager, Higher Ed & Evaluation

Active Minds

amy@activeminds.org

## **Hannah Ross**

General Counsel, Chief of Staff, & Secretary of the Corporation

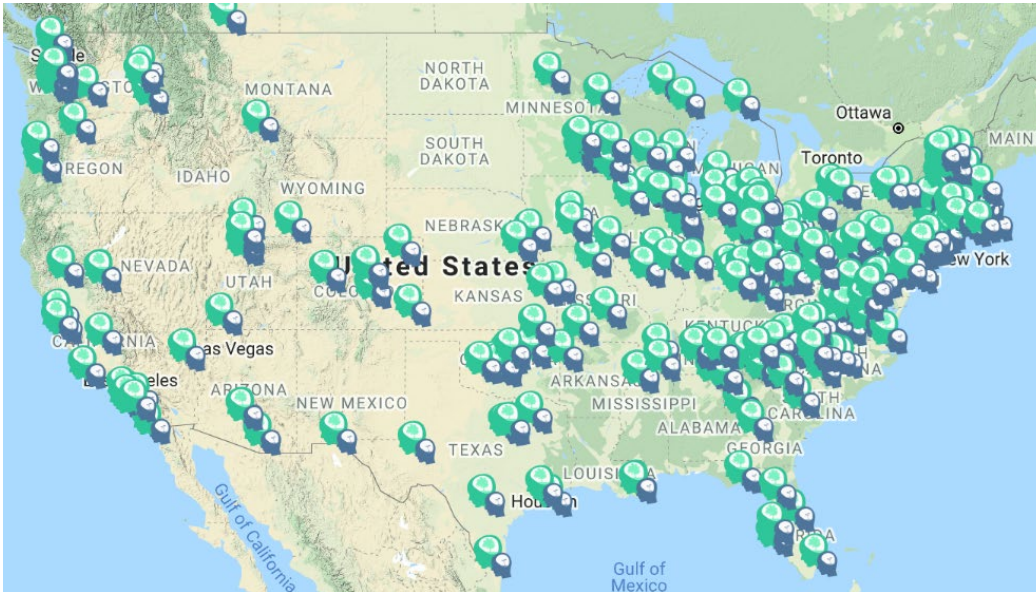
Middlebury College



# State of Campus Mental Health

*Statistics from the national  
Healthy Minds Study*

# About the Healthy Minds Study

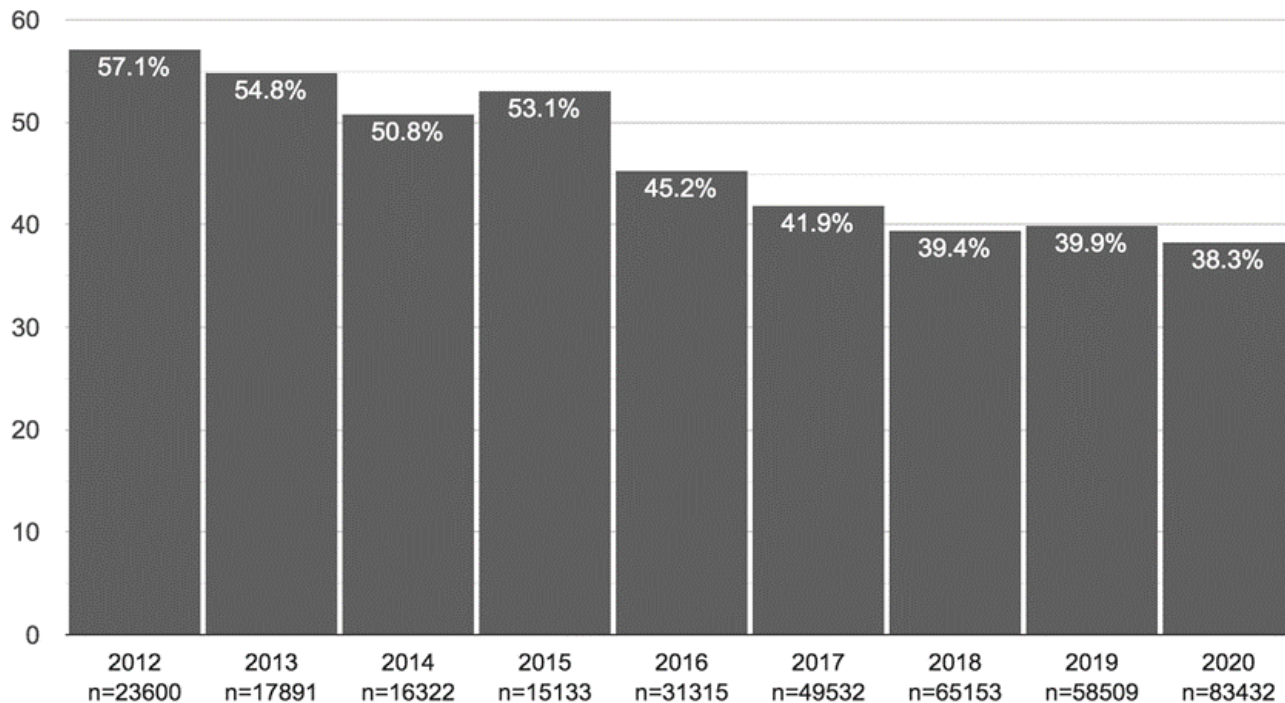


**>450 campuses**  
**>450,000 student respondents**

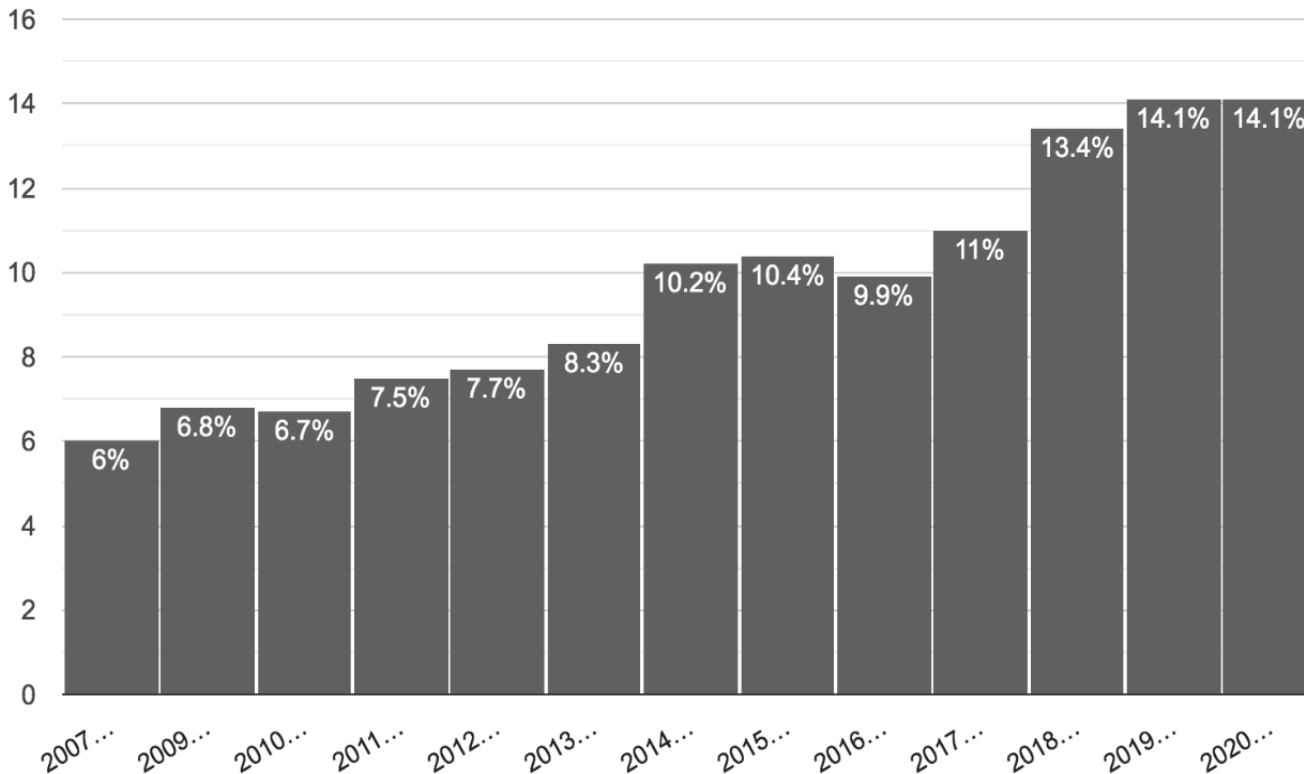
## HMS team:

- PIs: Sarah Lipson, Daniel Eisenberg, Justin Heinze
- Morgan Daugherty, Afra Kamal, Divya Manikandan, Kevin Michaels, Jasmine Morigney, Michaela Murphy, Laila Odeh, Akilah Patterson, Ellie Repp, Maithelee Sathe, Meghna Singh, Liadan Solomon, Amber Talaski, Adam Wheeler, Hidaya Zeaiter, Sasha Zhou

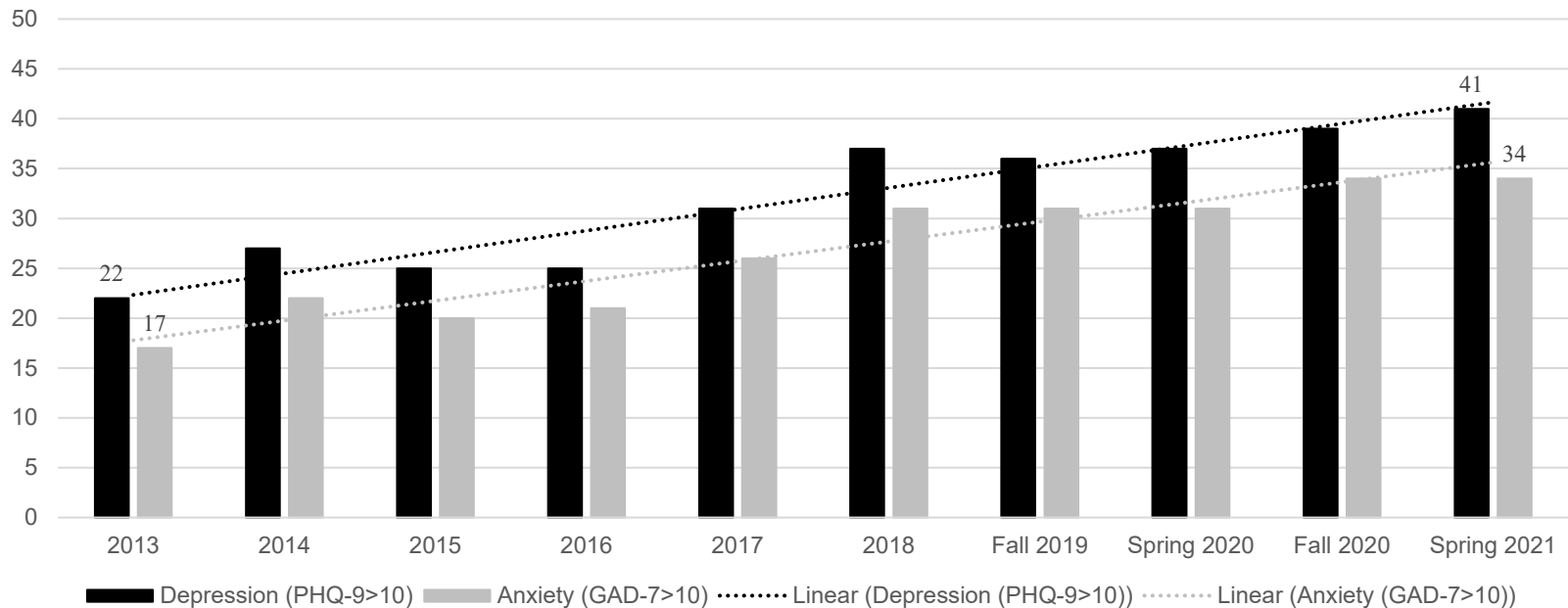
# Decreasing Rates of Flourishing (Positive Mental Health) Over Time



# Increasing Rates of Suicidal Ideation Over Time



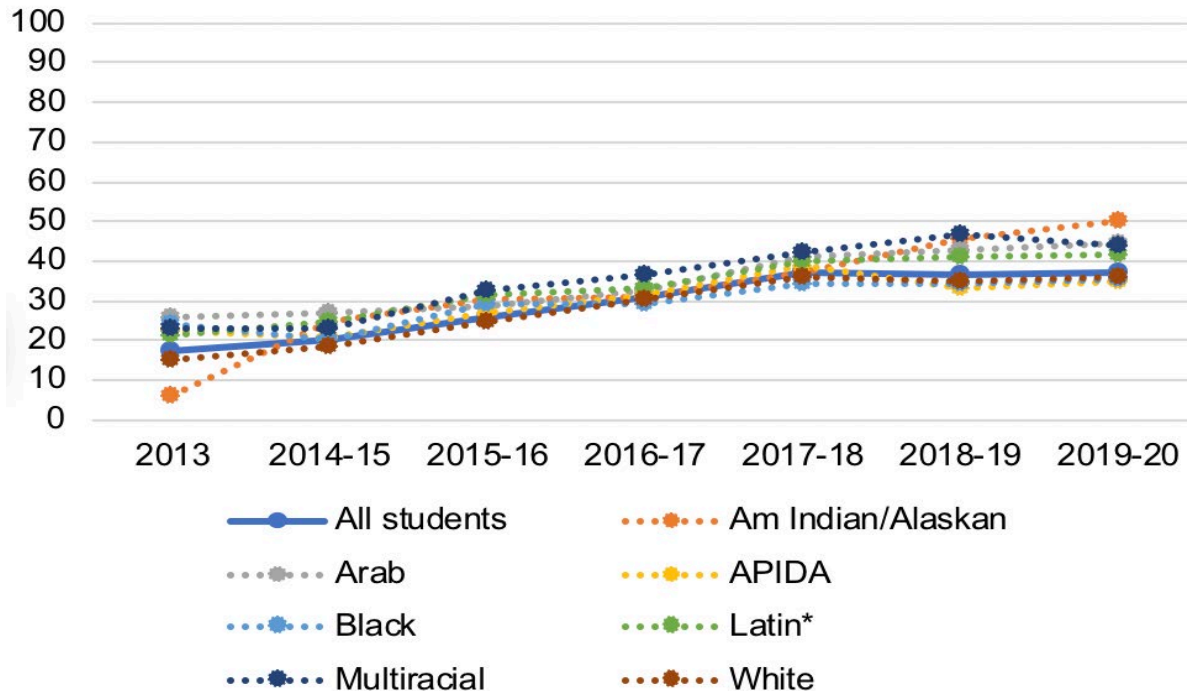
# Increasing Prevalence of Depression & Anxiety Symptoms Over Time





# Rising Depression by Race/ethnicity Over Time

Figure 1b. Depression (PHQ-9 $\geq$ 10)

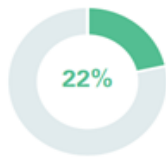


# Prevalence, Spring 2021 (N=103,748)

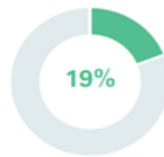
## DEPRESSION SCREEN

Depression is measured using the Patient Health Questionnaire-9 (PHQ-9), a nine-item instrument based on the symptoms provided in the Diagnostic and Statistical Manual for Mental Disorders for a major depressive episode in the past two weeks (Spitzer, Kroenke, & Williams, 1999). Following the standard algorithm for interpreting the PHQ-9, symptom levels are categorized as severe (score of 15+), moderate (score of 10-14), or mild/minimal (score <10).

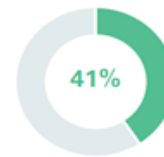
Severe depression



Moderate depression



Any depression



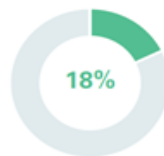
## ANXIETY SCREEN

Anxiety is measured using the GAD-7, a seven-item screening tool for screening and severity measuring of generalized anxiety disorder in the past two weeks (Spitzer, Kroenke, Williams, & Lowe, 2006). Following the standard algorithm for interpreting the GAD-7, symptom levels are categorized as severe anxiety, moderate anxiety, or neither.

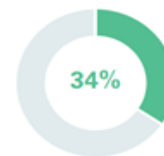
Severe anxiety



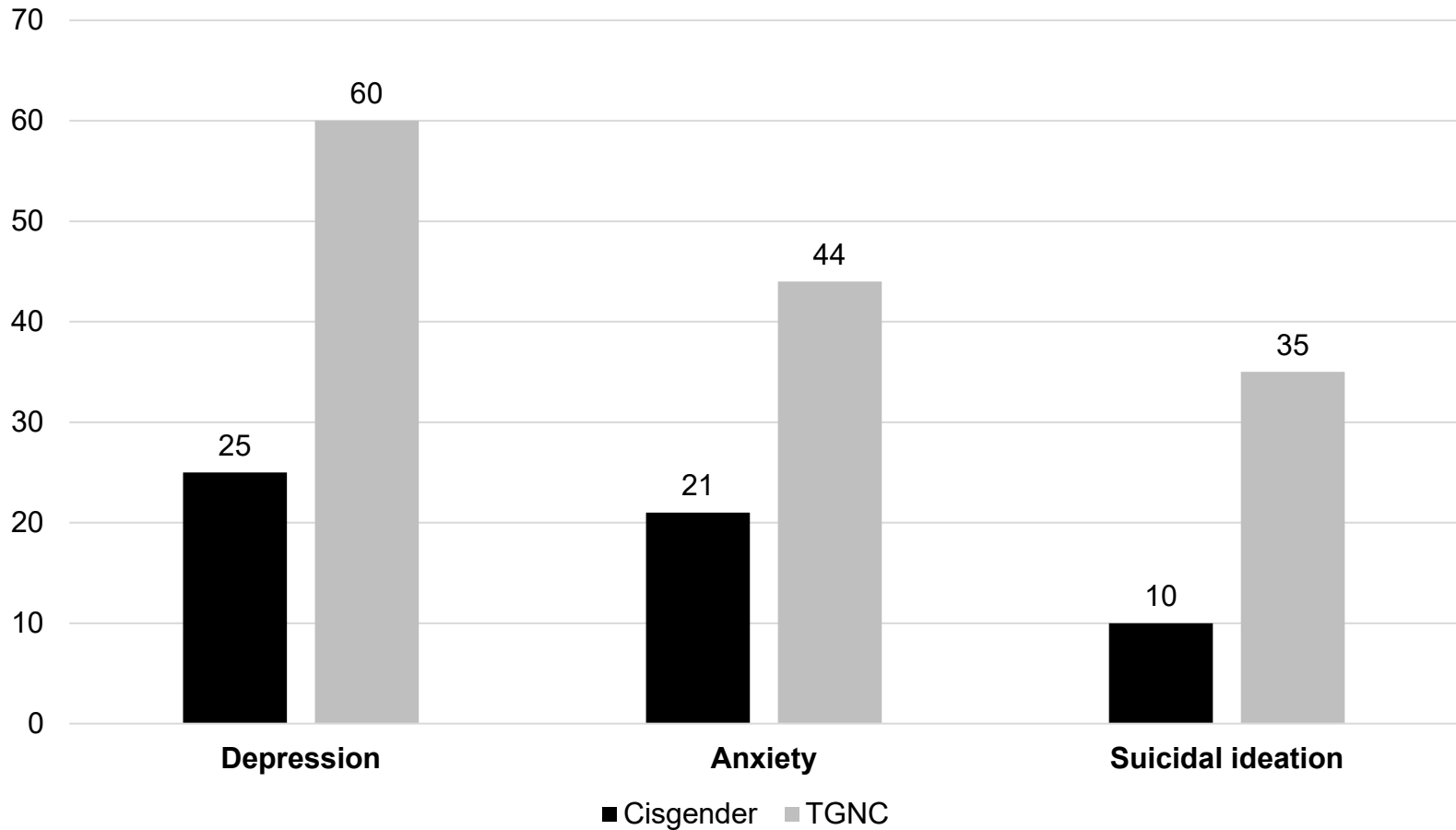
Moderate anxiety



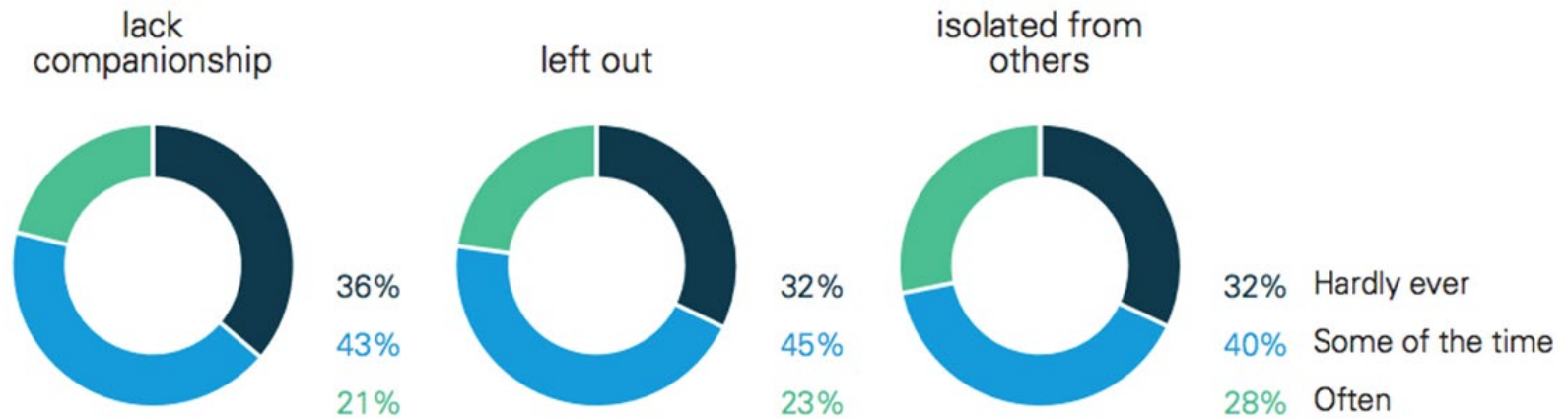
Any anxiety



# Inequalities by Gender Identity



# Loneliness, Spring 2021



# Protective Factors: Sense of Belonging

**“I feel a part of the campus community.”**

- 14% strongly agree
- 30% agree
- 27% somewhat agree
- 11% somewhat disagree
- 11% disagree
- 7% strong disagree

**Strong correlation with mental health**

- High sense of belonging (strongly agree): 27%
- Low sense of belonging (strongly disagree): 51%

# Risk Factors: Financial Stress

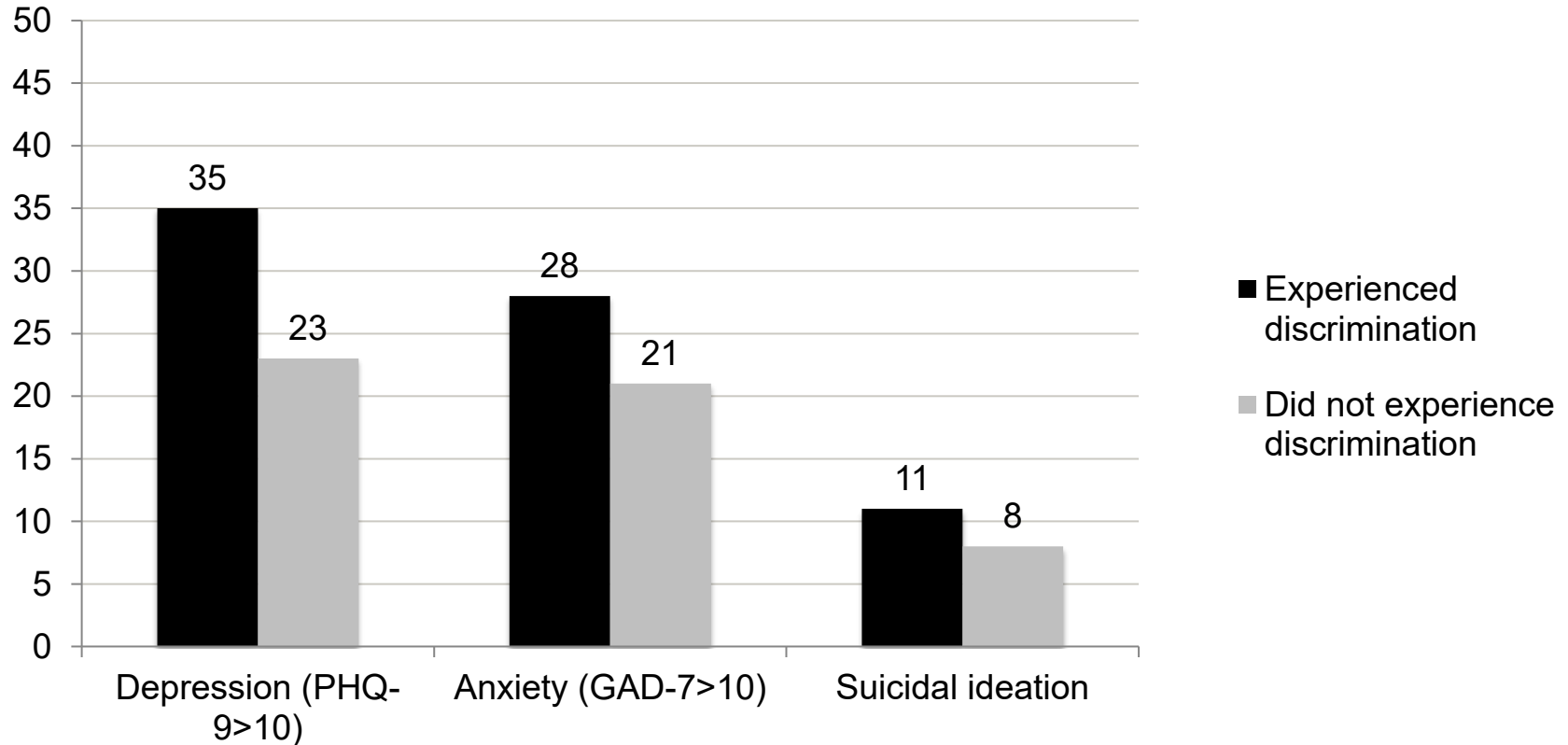
## Current frequency of financial stress

- Never stressful: 6%
- Rarely stressful: 18%
- Sometimes stressful: 37%
- Often stressful: 25%
- Always stressful: 14%

## Strong correlation with mental health

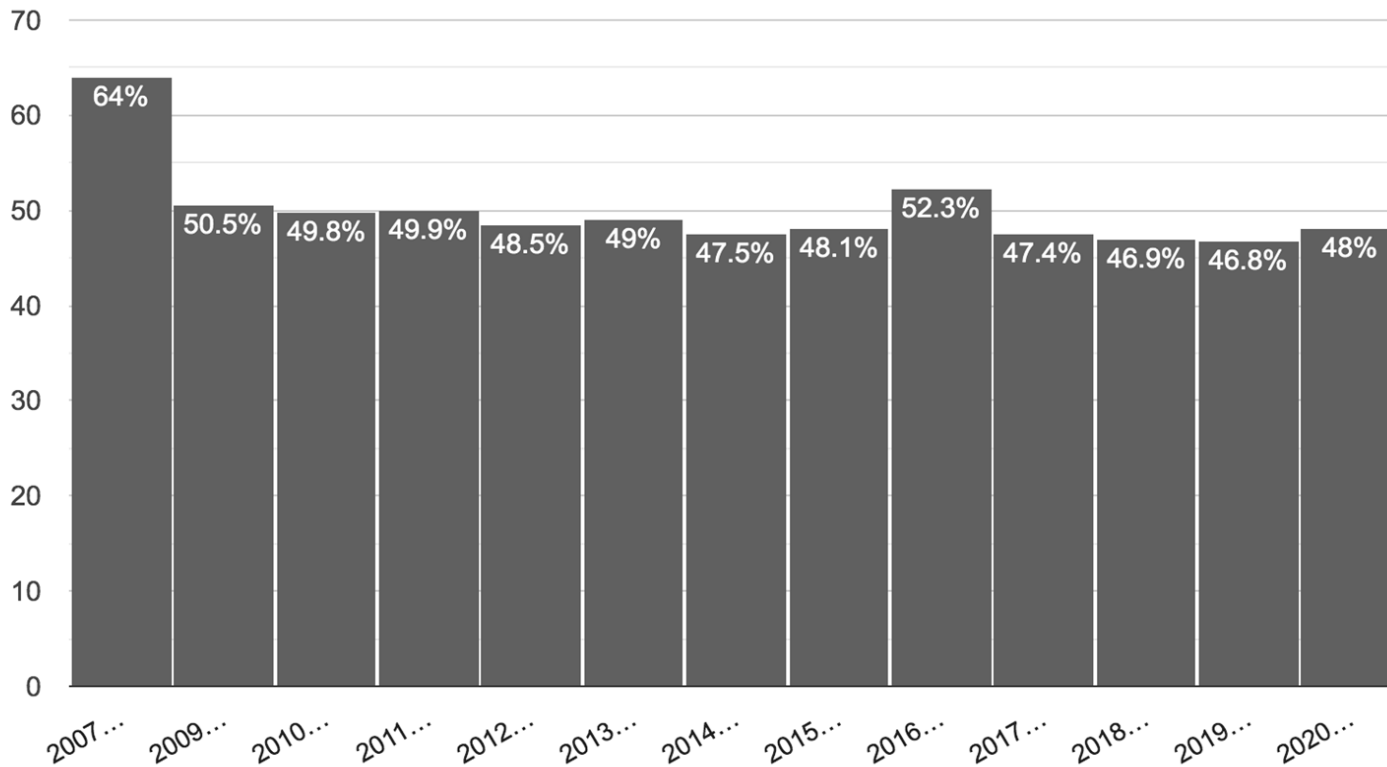
- Never stressful: 29%
- Rarely stressful: 30%
- Sometimes stressful: 32%
- Often stressful: 45%
- Always stressful: 60%

# Risk Factors: Discrimination



# Decreasing Levels of Stigma Over Time

Perceived Public Stigma by Year

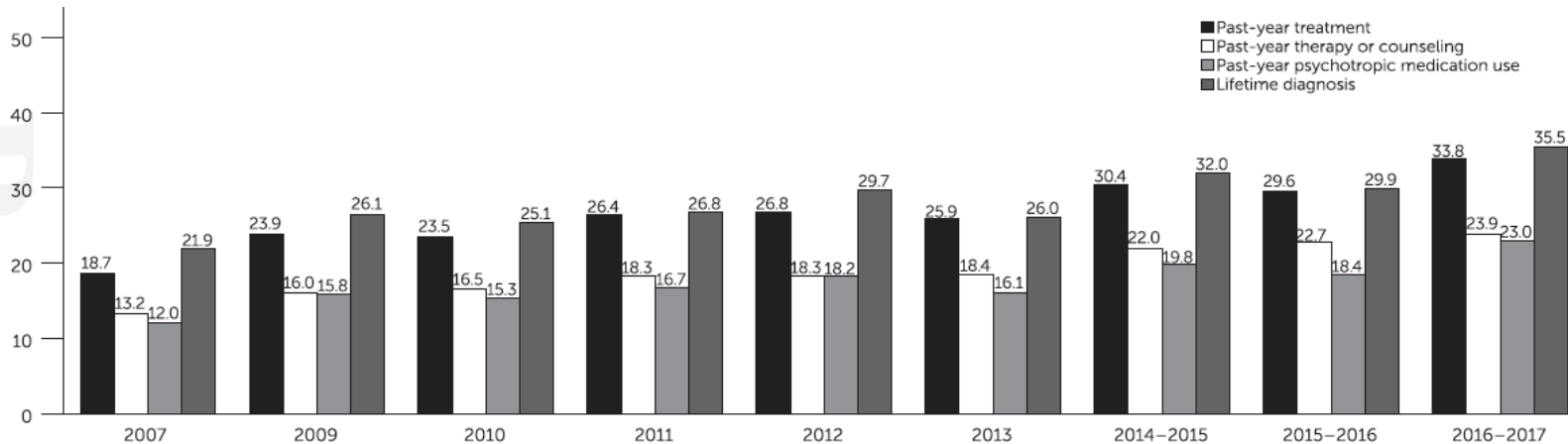




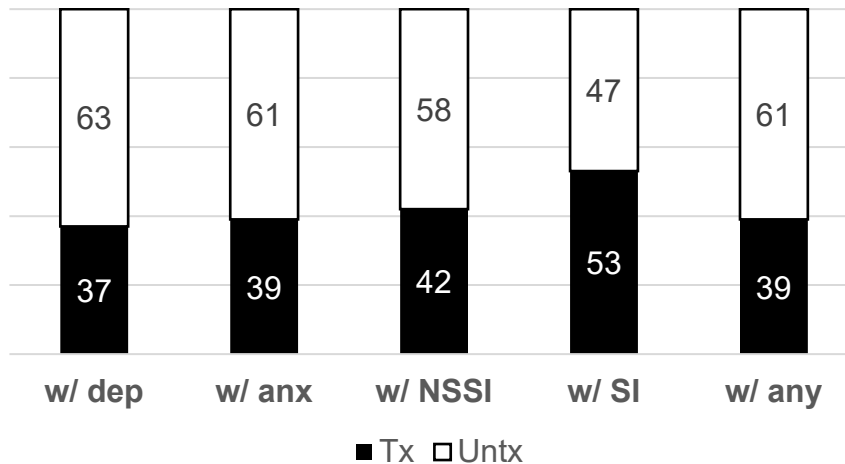
# Trends in Help-Seeking Over Time

## Increased Rates of Mental Health Service Utilization by U.S. College Students: 10-Year Population-Level Trends (2007–2017)

Sarah Ketchen Lipson, Ph.D., Ed.M., Emily G. Lattie, Ph.D., Daniel Eisenberg, Ph.D.



# Mental Health Treatment Gap



- “Treatment gap”: proportion of students with a positive screen and no treatment
- Many who seek tx do so in crisis
- Missed opportunities for early intervention
- Many identified by peers, other gatekeepers
- Stigma has gone, many students are open to talking about mental health

# Access to Mental Health Services, Pre-pandemic



ELSEVIER

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Original article

## Mental Health Disparities Among College Students of Color

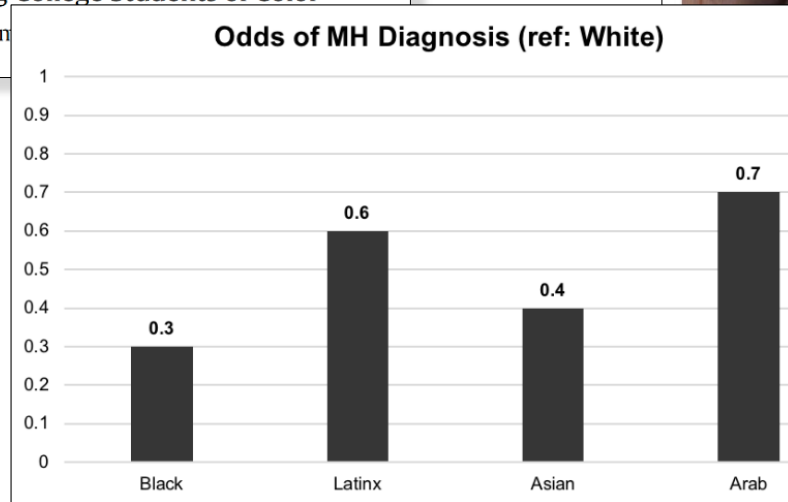
Sarah Ketchen Lipson, Ph.D., Ed.M.<sup>a,\*</sup>, Adam Alfiee M. Breland-Noble, Ph.D., M.H.Sc.<sup>d</sup>



The Boston Globe  
@BostonGlobe

Following

Racial and ethnic minorities on college campuses nationwide are less likely than white students to seek mental health services or have their problems properly diagnosed and treated, a new study has found. [bos.gl/M8jKyqt](https://www.bostonglobe.com/health-wellness/2020/07/27/college-students-mental-health-disparities/)

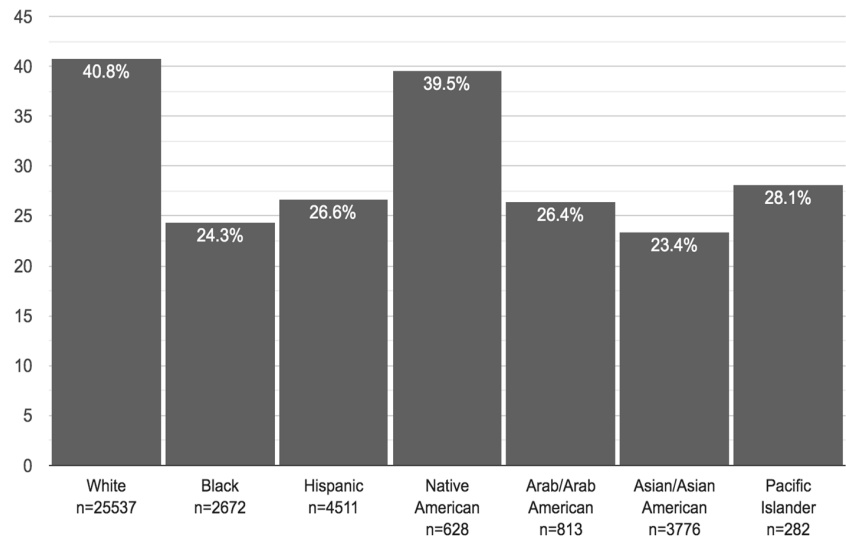


# Access to Treatment in the Pandemic

How has your access to mental health care been affected by the COVID-19 pandemic?

12%	Much more difficult or limited access
18%	Somewhat more difficult or limited access
28%	No significant change in access
2%	Somewhat less difficult or limited access
2%	Much less difficult or limited access
38%	Don't know or not applicable (have not tried to access care)

Current Medications with Positive Screen for Depression or Anxiety by Race



# Most Common Barriers

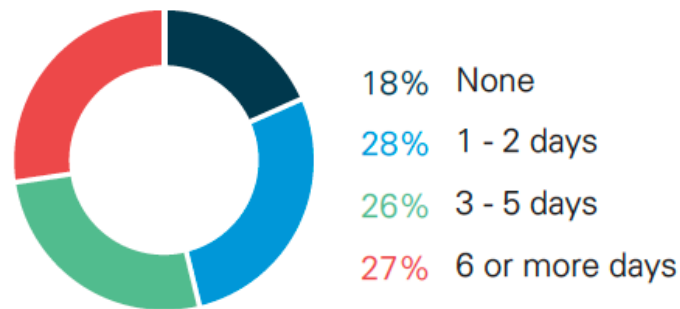
## Inertia, Lack of Urgency

- Though most students w/ untreated symptoms have positive attitudes and beliefs, task of seeking help does not appear to be salient priority
- Most commonly reported barriers among students w/ untreated symptoms:
  - Haven't had a need (31%)
  - Prefer to deal w/ issues on my own (27%)
  - Question how serious my needs are (20%)
  - Don't have time (17%)

# Highest Rates of Academic Impairment Due to Mental Health Concerns, Spring 2021

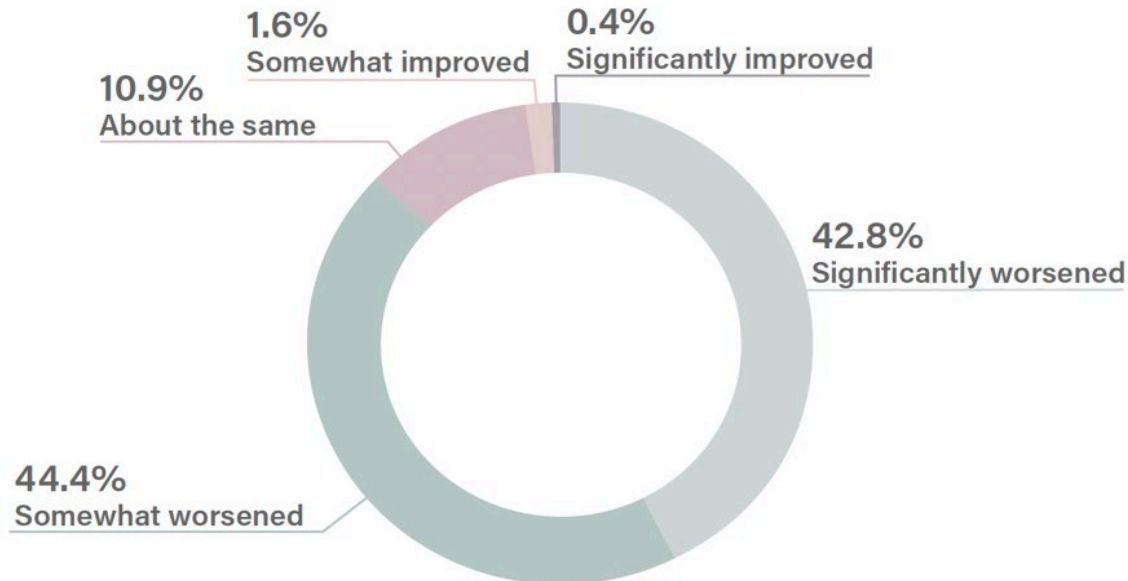
## ACADEMIC IMPAIRMENT

In the past 4 weeks, how many days have you felt that emotional or mental difficulties have hurt your academic performance?



# 87% of Faculty Observe That Student Mental Health Has Worsened in the Pandemic

*From your perspective, how if at all has student mental health changed since the COVID-19 pandemic began?*



# Practical Actions to Support Student Wellbeing

- Faculty play an enormous role in shaping student success
  - Personal connection with faculty member → higher student satisfaction and sense of belonging
  - Having supportive professor/advisor → higher retention
  - On the “front lines” in terms of being able to identify students in distress and refer to help
- Make all assignments due at 5pm
- Stop grading on a curve
- Be flexible with grading and deadlines (drop lowest grade, lay out process to request extension, remove shame)
  - Give students the benefit of the doubt
- Include mental health resources in syllabus
  - Note that addressing mental health is likely to have a positive impact on learning and academic outcomes



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# Supporting Student Mental Health on College Campuses

# Changing the Culture Around Mental Health

Active Minds is the leading nonprofit in the US working to end the silence and change the culture around mental health by mobilizing the next generation.

Over the past 18 years, the organization has reached global acclaim with partnerships and signature programs at more than 1,000 schools and communities including the Send Silence Packing® suicide prevention exhibit, Active Minds Speakers, the Healthy Campus Award, Active Minds @Work, and the Active Minds National Conference, all powered by a network of chapters at colleges, high schools, and communities nationwide.

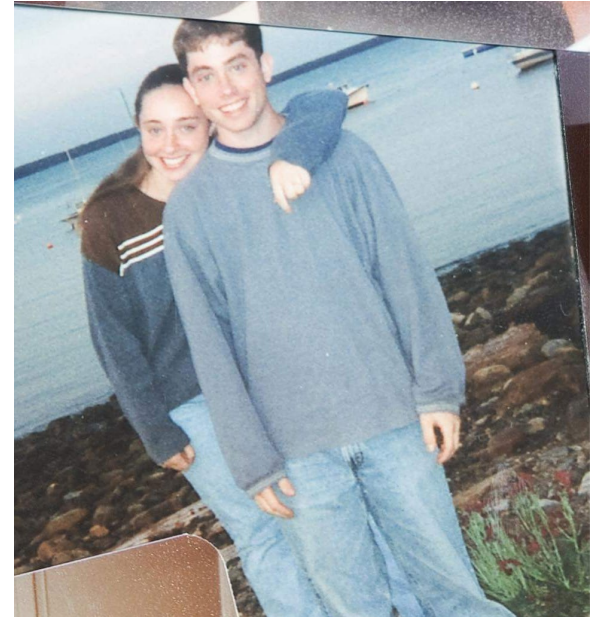
# Active Minds at a Glance

- **1.7 million** people reached by Active Minds programs
- **15,000+** volunteer leaders changing their local culture around mental health
- **3,250+** activities and events hosted “live” and virtually by the Active Minds community
- **1,700+** communities with significant Active Minds presence nationwide

\*A groundbreaking study by the RAND Corporation in 2018 validated that Active Minds’ efforts to change the climate around mental health works, and saves lives.

# Our Story

- Active Minds was established in 2003 by Alison Malmon following the tragic suicide of her only sibling – Columbia University student, Brian Malmon.
- Determined to combat the stigma that had caused her brother to suffer in silence for three years before ultimately taking his own life, Alison created the first Active Minds chapter on her campus at the University of Pennsylvania.
- Now in its 19th year, Active Minds has become the nation's premier nonprofit organization supporting mental health promotion and education for the next generation.



# Active Minds' Commitment to Anti-Racism and Inclusion

An emotionally healthy world is not possible without a just world. Systemic racism is a mental health and public health crisis: changing the culture around mental health includes ending the systemic racism in that same culture. And that change starts with each organization and each individual – including us.

Source: [www.activeminds.org/ariplan](http://www.activeminds.org/ariplan)

# This is Why We Have to Change the Conversation

- **1 in 2 of us** will experience a mental health issue in our lifetime.
- **Half** of all mental health issues begin by age 14.
- **Three quarters** begin by age 24.
- **67%** of people 18-24 experiencing anxiety or depression **don't seek treatment.**
- **Suicide** is the **second leading cause of death** for young adults.
- **Half** of students report being depressed or anxious amid the context of the COVID-19 pandemic.
- **4 in 5 adults** report the pandemic as a **significant source of stress**
- **3 in 5** report being **overwhelmed** by the number of issues America faces.

APPROXIMATELY

# 9.2 MILLION

College students are experiencing a  
diagnosable mental health concern

# Why Care?

## Early prevention, detection, and treatment:

- Saves lives
- Improves academic outcomes, career trajectories, lifetime earnings, health, relationship satisfaction and more





# Taking a Proactive Approach to Support the Whole Student

# Know the Warning Signs

- Missing classes, assignments, and/or exams
- Repeated need for extensions and/or excused absences
- Lack of responsiveness to outreach
- Statements like “I’m really stressed” or “I’m feeling overwhelmed.”



# Embed Wellbeing When Possible

- Normalize mental health issues by showing students there is an array of support available
- Promote campus mental health resources as well as immediate support after-hours, such as the National Suicide Prevention Lifeline and Crisis Text Line
- Utilize a guest lecture approach to incorporate health and wellness topics
- Set deadlines for assignments and applications at times of day that support sleep.
- Start meetings with a mindful moment.
- Assign/require proactive wellness.
- Be aware of what services are offered.
- Incorporate quick mindfulness activities into programming, such as two-minute mindfulness exercises

# Be Willing to Check-in

- Be discreet. However, do not promise confidentiality.
- Focus on observable behaviors. Share with the student what you have noticed.
- Use V-A-R (Validate-Appreciate-Refer) to engage in active listening, express concern and care, and refer students to the appropriate resources.



ACTIVE LISTENING IS ABOUT GIVING PEOPLE SPACE TO TALK, ASKING CLARIFYING QUESTIONS & VALIDATING SOMEONE'S EXPERIENCES BEFORE TRYING TO SOLVE A PROBLEM.

The graphic features a teal background with a yellow top-left corner containing a white ear icon. Below the text are two horizontal bars with colored segments (yellow, orange, blue, green) and an ampersand. At the bottom right, there is an orange ear icon and a yellow diamond-shaped sign that says "HERE FOR YOU" with a dotted line and a small star.



## VALIDATE

Let them know that what they're feeling is okay and that you believe them.



## APPRECIATE

Let them know they did the right thing by sharing and that you're here to support them.



## REFER

Let them know help is available and refer them to appropriate resources.

# A Note About Referrals

- Create and keep handy a reference sheet with mental health resources recommended by your campus counseling center.
- If you are concerned a student may need professional help, ask the student to consider speaking to a campus professional. Be sure to report your concern to your campus Behavioral Intervention Team.
- Consult with your counseling center for guidance.



# How Can Active Minds Help?

- Transform Your Campus Guides
- Active Minds Chapters
- Active Minds National Conference
- Active Minds Speakers
- After a Campus Suicide Guide
- Emerging Scholars Fellowship
- Stress Less Week and Suicide Prevention Month programming
- V-A-R Trainings
- Send Silence Packing: Behind the Backpacks

# Question & Answer #1





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# Legal Obligations and Risk Management Efforts

# The Legal Framework for Supporting High Risk Students

Non-Discrimination  
against individuals  
with disabilities



Take reasonable  
precautions to protect  
students from harm –  
to self or others

# Civil Rights Laws

## Rehabilitation Act Sec.504, Americans with Disabilities Act, and analogous state laws

- Non-discrimination laws require:
  - Make an individualized assessment of student's facts and circumstances
  - Use an interactive process – two-way street
  - Provide reasonable accommodations
    - “Reasonable” means they are not an undue burden, nor do they fundamentally alter the educational program

# Civil Rights: Enforcement

## Concurrent jurisdiction by the Department of Education, Office for Civil Rights, and the Department of Justice

- OCR principles were articulated in January 2018, and reflect OCR resolutions (as well as DOJ settlement agreements)
- Published at Helping Students At Risk of Self Harm, <https://www.higheredtoday.org/2019/09/04/helping-students-risk-self-harm-considerations-new-academic-year/>
  1. Students must be treated as individuals
  2. Institutions should be in an interactive, good-faith conversation with a student about their needs and the institution's expectations
  3. Institutions are permitted to take actions that are intended to protect the student's safety, including steps the student may oppose, such as involuntary separations from enrollment as a last resort, and individualized conditions for continued enrollment or return.

# Rutgers-OCR Resolution, April 2018

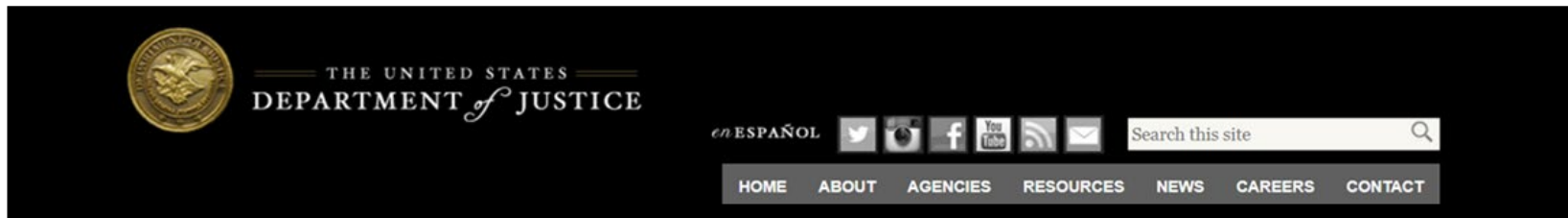
Student at Rutgers hospitalized 3x in a spring semester.

Threat Assessment and Safety Committee (TASC) conducts risk assessment.

Rutgers involuntarily withdraws student pursuant to its written "Safety Intervention Policy."

*Resolution agreement: Rutgers' Policy is permissible, as it relies on an individualized assessment of the student's circumstances, including medical information. Student may make up work or convert to withdrawn.*

# Princeton-DOJ Settlement, Dec. 2016



“Nothing in this Agreement shall be construed to be inconsistent with 28 C.F.R § 36.301(b), which states: ‘A public accommodation may impose **legitimate safety requirements** that are necessary for safe operation. Safety requirements must be based on actual risks and not on mere speculation, stereotypes, or generalizations about individuals with disabilities.’”

*No findings of non-compliance at the conclusion of 30-month investigation.*

# DOJ Settlement with Brown

*Brown and the DOJ announced a settlement in August 2021 on claims that Brown discriminated against students with disabilities returning from leaves*

- The DOJ found that students had been denied readmission after mental-health related leaves where their treating providers supported their return to Brown.
- Brown revised its policy on readmission, clarifying that it will evaluate students on an individual basis, giving serious consideration to their treating provider's recommendations, and will made readmission decisions on a rolling basis.
- No prohibition on Brown counseling or requiring students to take a leave.

# Non-Discrimination: Expectation Setting

- How does your institution set expectations for students about what is necessary to accomplish – not only academically but to support their well-being?
- How does your institution set expectations for parents about what their student needs to succeed at college and how to support their well-being?
- Are you offering a comprehensive well-being curriculum to support young adults developing skills to manage stress, engage in self-care, etc.?



# Risk of Self-Harm

The isolation, uncertainty and fear created by the COVID global pandemic has significantly increased rates of depression, anxiety the risk of our students harming themselves, especially for BIPOC young adults, LGBT and non-binary students.

## YOUR WELL-BEING



Middlebury  
College

Personal and Professional Development  
Create your ideal work-life balance.

Movement and Rest  
Get the exercise and sleep that feels right for your body.

Nutrition  
Nourish your body, strengthen your mind.

Spirituality  
Find what gives meaning, purpose, and fulfillment.

Physical Environment  
Engage with the space around you.

Mind-Body Connection  
Be fully present in your everyday life.

Community  
Foster meaningful relationships.

Well-being describes an integration of the multiple aspects of life that enables our bodies, minds, and spirits to thrive.

Attention to well-being acknowledges our desire for a life in which we balance our physical, mental, relational, spiritual and emotional needs, as a foundation for living lives of consequence.



# Case Law about Protecting Students

*The Nguyen v. MIT, Tang v. Harvard, Doe v. RISD, and Rosen v. Regents of UCLA cases all demonstrate that our communities expect us to work hard to protect our students*



# Legal Expectations for Institutions

## Massachusetts law after the *Nguyen* case:

A college must take “reasonable measures” to prevent a student’s death by suicide **IF** the college has actual knowledge of:

(1) a prior suicide attempt while enrolled or just prior to matriculation

**or**

(2) a student’s “stated plans or intentions to commit suicide” meaning

MORE THAN suicidal ideation

# A Reminder to Work Hard to Protect Our Students

MIT *did*. **No liability.**

1. Nguyen reported difficulty with exams and was referred to Disability Services for accommodations. He declined.
2. He was referred to the counseling center, had two appointments and decided they were “useless.” He told MIT he made “other arrangements for treatment.”
3. He saw nine private counseling professionals over the next 2 years, none of whom identified him as an imminent suicide risk.
4. His academic advisors understood he had medical issues and made various formal and informal accommodations.

# Reasonable Measures Include

1. Initiating a suicide protocol, if the institution has one; or
2. Arranging for clinical care, if student agrees; or
3. If care is refused, notifying the student's emergency contact(s).



# What Does This Mean?



- The *Nguyen* court was balancing different interests and stated that the duty “respects the privacy and autonomy of adult students in most circumstances, **relying in all but emergency situations on the student’s own capacity** and desire to seek professional help to address [their] mental health issues.”
- It also recognized that non-clinicians “cannot be expected to probe or discern suicidal intentions that are not expressly evident.”

# When There Are Challenges, What Is In Your Toolbox?





# Institutional Toolbox

**Your policies may expressly provide for these to operate in progressive steps, or you may mix and match.**

- Health & wellness education and resources
- Behavioral contracts
- Required evaluation
- Voluntary leaves (short or semester-long)
- Mandatory/Involuntary leaves

# Legitimate Safety Requirements

- Safety is the foundation for the residential and academic experiences we offer
- The question to ask is: “Can the student safely and effectively participate in the educational program at this time?”
- Behavioral contract terms should aim to support the student safely and effectively participating.



# When Assessing Safety, Ask:

**“What level of treatment is RECOMMENDED to reduce the risk so that the student can safely live and learn in our environment?”**

- The answers should be things like:
  - weekly psychotherapy, plus groups plus medication
  - intensive outpatient treatment,
  - partial hospitalization, OR
  - inpatient hospitalization

# Involuntary Leaves

## Fair process includes:

- Individualized Assessment
- Considering reasonable accommodation
  - Keep in mind that COVID has re-defined what is extraordinary or fundamental about our educational programs – remote learning, room quarantine, on-campus lockdowns.
- Voluntary options must be pursued first
- Student must be able to appeal an involuntary leave decision

# Practical Tip: Contact with Parents

## FERPA permits disclosure to parents:

- In a health & safety emergency
- With the student's consent
- At the institution's discretion if the student is a dependent for tax purposes
- If the information disclosed is not from an "education record," *for example*, personal observations

# Key Take-Aways

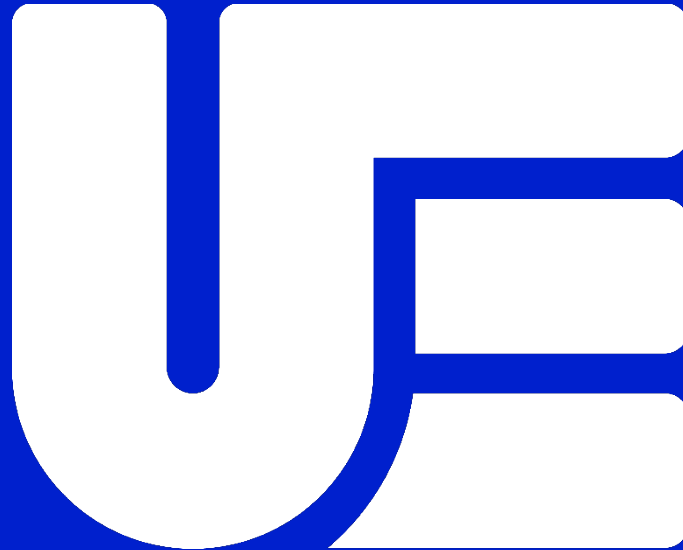
**Courts, agencies, and institutions are balancing different legal values.**

- Individualized assessments are group work – get input from all the relevant offices.
- Institutions are permitted to take actions that are designed to protect students – even if students disagree – as a last resort after seeking voluntary cooperation, and using individualized consideration.
- Striking the balance is an art, not a science. But our students' lives are more important than their uninterrupted enrollment.

# Question & Answer #2



# Stay Connected



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