Supporting College Students in a COVID-19 World

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www.nyp.org/youthanxiety
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Agenda

• About Emerging Adults…

• Anticipating Psychological Needs of Students

• Evidence-based Strategies for Young Adults struggling with anxiety and mood symptoms

• Existing and Novel models for assessing psychological stress

• Organizational strategies to meet psychological needs

• Promoting Wellness on Campus

• Maintaining developmental tasks of emerging adulthood
Jeffrey Jensen Arnett (2000) & Emerging Adults

- 18 - 29 years old
- Identity exploration
- Self-Focus
- Possibilities
- Instability
- Feeling in between
- Occurring in all developed countries across socioeconomic groups
Cultural Shift in 2000s

**Young Adults**
- Brain isn’t fully developed until 20s
- More enter college after high school (66%)- extends dependency past age 18
- More returning home after college (40%) due to economic recession / trouble finding employment
- Marriage is 5 years later than prior generation

**Caregivers**
- Values shifted to more involved parenting
- Cell phones/technology allow for constant parent/child contact (56% have daily contact)
- Children stay on insurance through 26
- Can encourage freedom/flexibility OR foster dependency and inability to move forward

Clark University Poll of Emerging Adults, 2012 & 2013
n=1,029 interviews, ages 18-29, nationwide; Margin of error +/- 3.06%
Key Developmental Milestones

- Independence
- Identity
- Responsibility
- Socialization
Balancing on developmental milestones:

The mind and emotions of college students
Physical Responses

- Body Tension
- Sweating
- Butterflies
- Restlessness
- Racing Heart
- Fatigue
- Difficulty Sleeping
- Loss of appetite
- Difficulty Concentrating
- Headaches
- Blurry vision
- Heaviness
- Upset stomach
Higher Baseline Stress
Be on the lookout for:

An increase in potentially harmful coping strategies

- Substance use
- Risky sexual behavior
- Avoidance

Inconsistent self-care routines
Looking out for Vulnerable Students

- Students at higher risk:
  - Students with pre-existing mental health, medical, or learning difficulties
  - Students of Color
  - LGBTQ
  - First generation, immigrant, and Native American
  - International Students
Treatment Options for Anxiety and Mood Symptoms

- **Cognitive Behavioral Therapy**: 12-20 weeks
- **Interpersonal Therapy**: 20 weeks
- **Medication**
Facilitating Treatment

• Offering evidence-based treatment through college counseling centers – brief or full versions

• Creating CBT or IPT groups

• Establish online referral database

• Coordinate with local providers to provide students with treatment options
Questions to ask when creating a care plan

• How do we maintain the care and services we already provide?
• How do we proactively help students cope with changes to campus life (athletics, clubs, socialization)?
• How can we support students with pre-existing mental health difficulties that are likely to be struggling right now?
• Is there anything we can do to engage high-risk students to utilize our resources?
• What ability do we have to increase access to evidence-based treatment on campus?
• How can we facilitate referrals to services we cannot provide ourselves?
Assessment Measures
Screening for Anxiety and Depression

- Brief screening tools (PHQ-9, GAD-7)
- Implement regular screening for anxiety and depression
- Columbia Suicide Screening tool (C-SSRS Screener)
- Using Technology for Screening Tools
- Integrating stress and wellness assessment into orientation
- Set up a triage and response plan for increased rate of positive screens
Psychological First Aid
Short-term, Crisis Based Help

- Psychological First Aid is a flexible, modular evidence-based response to acute stress that focuses on adaptive coping and providing psychological and logistical support.

- Use of PFA to provide short-term access to a high number of students/faculty/staff in an efficient way.

- Training Reslife/Student Counseling Services/Student leaders interested in helping.

- Triage those in need and refer for ongoing help.
Eight Core Actions of PFA

- Contact and Engagement
- Safety and Comfort
- Stabilization (if needed)
- Information Gathering on Current Needs/Concerns
- Practical Assistance
- Connection with Social Supports
- Information on Coping
- Connection with Collaborative Services
Strategies to Promote Student Wellness

• Virtual “toolkits” for coping
• Mindfulness
• Physical activity
• Social connection
• Access to academic supports
• Feeling of connectedness to the campus culture
Developmental Tasks of Emerging Adulthood in the era of COVID-19
Changing landscape of Young Adulthood

- Young adults living at home and changes in the nature of family relationships/interactions
- Restricted independence, freedom, and socialization
- Demand to adapt to virtual learning and other academic changes
- Anxiety about the world they will enter upon graduation
Young Adult Developmental Milestones

- Emotional Independence
- Complete Educational Requirements
- Short & Long Term Vocational Goals
- Cultivate Long Term Relationships
- Romantic Relationships
- Live Independently
- Financial Independence
- Personal Self-Care
  - sleep, health care, exercise, diet, self-soothing
- Behavioral Independence
  - assertiveness, initiative, task completion

- Nearly All impacted by COVID-19
- Remote Learning
- Fewer internship or job options
- Social Distancing
- Socializing and Dating online/zoom
- Many young adults at parents’ home
- Economic impact
- Need to create new routines, schedules and healthy habits
- Lack of structure, and/or increased avoidance and/or over reliance on parents may impact independence
What do students need now?

- Problem solving skills
- Social skills
- Emotion regulation skills
- Realistic thinking
- Perspective taking
- Anxiety and stress/time management skills
- Flexibility to learn from their mistakes
- Support but not overprotection
Scalable Delivery of Evidence Based Coping Skills

- Triage to “levels of care” based on assessment tools
  - Utilizing scalable available technologies
    - (CBT apps, mindfulness)
  - Virtual group based interventions
    - Bringing students together for skills and support
- Training Skills “Coaches”
- Most at risk students receive full-scale treatments
1. Assess baseline stress levels and independent functioning

2. Psychoeducation about stress and everyday life

3. Discussion of the college orientation process

4. Socio-emotional skill building

5. Academic and self-care skills

6. Anxiety exposure/independence practice

7. Discussion of seeking help

8. Review and planning ahead
Questions?

Thank You!

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