



Mountain Plains (HHS Region 8)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

Thank you for joining us today!

- Please Note:
- We all attendees are muted for the presentation portion of today's session.
 - Today's presentation will be recorded.

SAMHSA

Substance Abuse and Mental Health
Services Administration

Changing the Conversation About Mental Health; Insights on College Mental Health in 2024

Alison Malmon

Founder and Executive Director of Active Minds

March 28, 2024



Disclaimer and Funding Statement

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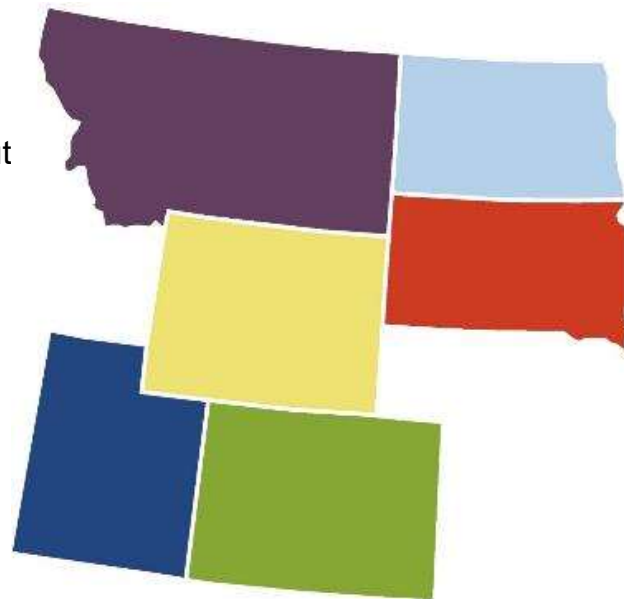
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The Mountain Plains Mental Health Technology Transfer Center

The Mountain Plains Mental Health Technology Transfer Center (Mountain Plains MHTTC) provides training and technical assistance to individuals who serve persons with mental health concerns throughout Region 8 (Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming).

We belong to the Technology Transfer Center (TTC) Network, a national network of training and technical assistance centers serving the needs of mental health, substance use, and prevention providers. The work of the TTC Network is under a cooperative agreement by the Substance Abuse and Mental Health Service Administration (SAMHSA).



Land Acknowledgement Statement

Today, the University of North Dakota rests on the ancestral lands of the Pembina and Red Lake Bands of Ojibwe and the Dakota Oyate - presently existing as composite parts of the Red Lake, Turtle Mountain, White Earth Bands, and the Dakota Tribes of Minnesota and North Dakota. We acknowledge the people who resided here for generations and recognize that the spirit of the Ojibwe and Oyate people permeates this land. As a university community, we will continue to build upon our relations with the First Nations of the State of North Dakota - the Mandan, Hidatsa, and Arikara Nation, Sisseton-Wahpeton Oyate Nation, Spirit Lake Nation, Standing Rock Sioux Tribe, and Turtle Mountain Band of Chippewa Indians.



The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED
AND HOPEFUL

INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES

HEALING-CENTERED AND
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS

PERSON-FIRST AND
FREE OF LABELS

NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS

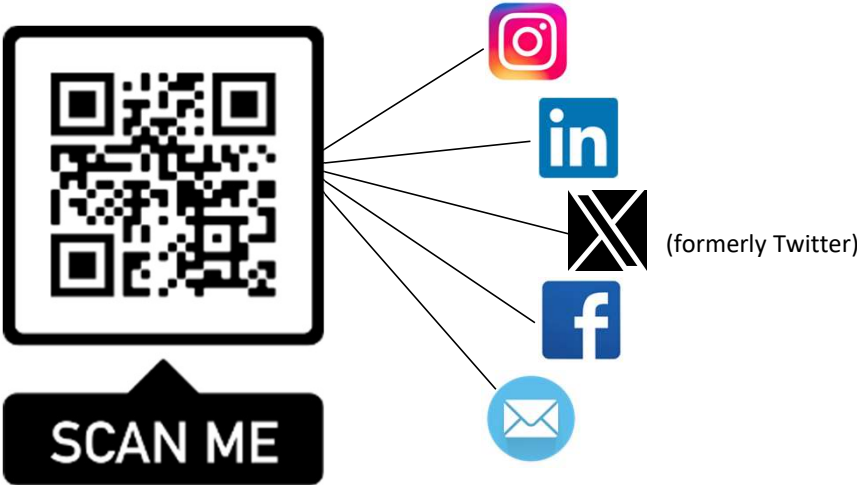
RESPECTFUL, CLEAR
AND UNDERSTANDABLE

CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS

Adapted from: https://mhcc.org.au/wp-content/uploads/2019/08/Recovery-Oriented-Language-Guide_2019ed_v1_20190809-Web.pdf

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Mountain Plains MHTTC

Alison Malmon
Founder & CEO
Active Minds

www.activeminds.org





Young adult
mental health is
**one of the most
pressing public
health issues** of
this time.



The facts.

1. From 2011-2021 **nearly all indicators** of poor mental health and suicidal thoughts and behaviors increased.*
2. Young adults aged 18-25 **had the highest prevalence of mental illness** (33.7%) compared to adults aged 26-49 (28.1%) and aged 50 and older (15.0%)
3. More than 30 percent of college students report having received **psychological or mental health services** in the last year**
4. More than a quarter of college students **had a positive suicidal screening** in the past year*
5. Young adults hold some of the **least-stigmatizing attitudes** toward mental illness and are more likely to know someone with mental illness, but they are less likely to **feel that they know how to help**** , suggesting the importance of programming that educates this group about how to be supportive and how to connect people to the resources that they need.

*Youth Risk Behavior Survey, 2011-2021," CDC **ACHA-NCHA Fall 2023 ***Healthy Minds Network

Social norms around mental health must radically improve.

This includes ensuring:

1. Youth & young adults have access to mental health information – including prevention education
2. They know what supports would be appropriate for their needs at any level.
3. They can physically and emotionally access those supports when they need them.
4. They have access to peers who can promote positive norms and beliefs about mental health

ROI: Success is about more than just access.

1. Depressive symptoms, depression diagnosis, and substance use **predict college retention problems**

- High scores on a depression inventory during the first year of college were associated with increased risk of college dropout.
- In addition, a clinical diagnosis of depression during college *tripled* a student's odds of dropping out in their first two years, and more than *doubled* odds of dropping out in the last two years

Arria, A.M., Caldeira, K.M., Vincent, K.B., Winick, E.R., Baron, R.A., O'Grady, K.E. (2013). Discontinuous college enrollment: Associations with substance use and mental health. *Psychiatric Services*. 64(2), 165-172.

The Center on Young Adult Health and Development, University of MD School of Public Health College Life Study

2. Mental health disorders are **associated with lower grades, delayed graduation, and dropping out** (Eisenberg et al, 2011)

See more at healthyminds.org.

active minds

ESTABLISHING HEALTHY CAMPUSES
DURING CHALLENGING TIMES



Take
Action

Campus climate matters.

1. Students who feel that their campus is a place where they are less likely to be stigmatized for admitting to a mental health problem — who **feel that their campus community would support them** in seeking treatment — are **over 20% more likely to receive services**, and 60% more likely to do so on campus.
2. On campuses where the **faculty and staff feel that they have adequate resources** and services to support students with mental health problems, there is significantly **higher use of mental health services by students**, both on and off campus.



*"Campus Climate Matters: Changing the Mental Health Climate on College Campuses Improves Student Outcomes and Benefits Society." Santa Monica, CA: RAND Corporation, 2016. https://www.rand.org/pubs/research_briefs/RB9904.html.

Interpersonal solutions.

1. A.S.K.

That really sounds challenging.

That sounds like a lot.

Ways to acknowledge

You're allowed to feel that way.

I appreciate you sharing that with me.

ask

What can I do for you right now?

This is a no judgment zone.

Ways to support

You're not alone. I'm here for you.

Are you open to talking to someone else who can help?

ask

Want to hang out this weekend?

Thinking of you this morning. How's it going?

Ways to keep-in-touch

How are you feeling today?

Just a friendly wellness check! You good?

ask

{Other} solutions.

2. Equity work *is* mental health work

- a) A lot of the work of doing mental health is one-in-the-same of other streams of work we are tackling: creating a greater sense of belonging and inclusion, meeting basic needs of students, increasing social connection, reducing financial strain, creating greater awareness and utilization of disability accommodations and services, prevention of health issues, etc.

3. Helpers, not clinicians

- a) The number one thing students say they value most in a professor is approachability.
- b) Pause and reflect before responding to a request. Both saying yes and saying no can be done with heart.

4. Engage students, but get rid of the kid's table

- a) They may not always have the right solutions, but they generally will always help point you in the right direction.



Mobilizing
Students:
What You
Need to
Know


Active Minds' Theory of Mobilization.

- Connect, unify, and support a network of mental health champions
- Equip them with the knowledge, tools, resources to influence their spheres now and into the future
- Activate them to share their voices publicly and mobilize them to create change amongst their peers, institutions, and communities

Ultimate goal: Prepare and organize youth and young adults to mobilize – with the goal of creating a movement of mental health champions that improve mental health norms



NEW RESEARCH

 Check for updates

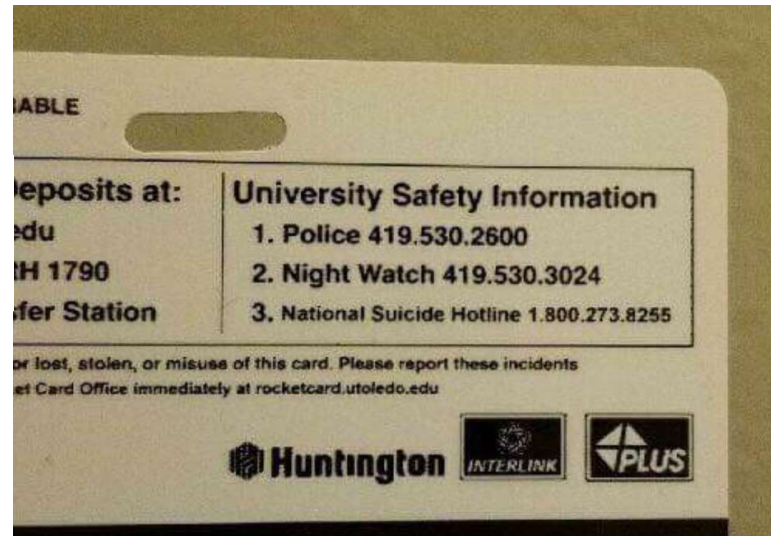
Strengthening College Students' Mental Health Knowledge, Awareness, and Helping Behaviors: The Impact of Active Minds, a Peer Mental Health Organization

Lisa Sontag-Padilla, PhD, Michael S. Dunbar, PhD, Feifei Ye, PhD, Courtney Kase, MPH, Rebecca Fein, MPH, Sara Abelson, MPH, Rachana Seelam, MPH, Bradley D. Stein, MD, PhD

What do Chapters *do*?

Generally, a range of:

- Weekly / biweekly general meetings
- Peer-facilitated workshops / discussions
- Events (stress reduction, awareness-raising, fundraising)
- Social media engagement
- School-wide events and activities
- Institutional / policy advocacy



We must not, in trying to think about how we can make a big difference, ignore the small daily differences we can make which, over time, add up to big differences that we often cannot foresee.

-Marian Wright Edelman

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Thank You for Joining Us!

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