#### The Ohio State University Commission on Mental Health: Advancing a Caring Community and Culture of Well-being

#### **Co-Chairs**

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#### **Committee Members**

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## Background

The commission members met seven times from June 7, 2021, through July 19, 2021. Each meeting focused on a deep dive into topical areas to review the current data, approach and resources related to mental health and well-being.

Topics reviewed and discussed included:

- The 2018 Suicide and Mental Health Task Force Report
- State of mental health & well-being of Ohio State students & benchmarking data from across the United States
- Multi-modal approach to mental health at Ohio State
- Harm reduction strategies & support resources offered by campus & community partners
- Opportunities for campus stakeholder collaboration
- Needs of underrepresented, minoritized and/or marginalized students
- University response to student death by suicide

# There is Now a Mental Health Pandemic Inside of the COVID-19 Pandemic

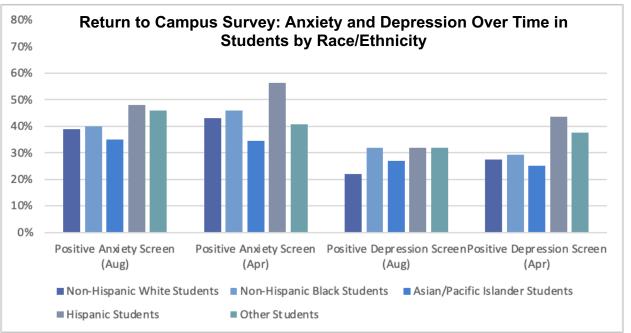
25% of 18-24 year olds have thought about suicide since the COVID-19 pandemic Suicide is the 2<sup>nd</sup> leading cause of death in 18 to 24 year olds One in three are suffering from clinical anxiety and/or depression Over 60% of college students who drop out due so because of mental health problems



# State of Mental Health and Well-being in Ohio State Students, Including Health Disparities

- The Healthy Minds Spring 2021 Study: 33%
   OSU students screened + for depression and 29% for anxiety; Nationally, 37% of students screened + for depression and 31% for anxiety
- April 2021 Return to Campus survey
  - 28% screened + for depression and 43% screened + for anxiety
- OSU takes a multimodal approach to student mental health care, providing a broad range of extraordinary services
- Despite the range of available resources, the April 2021 Return to Campus survey found low rates of student participation in wellness programming

- Mental health disparities were identified in the August 2020 & April 2021 Return to Campus surveys
- Healthy Minds OSU data demonstrated health disparities by race/ethnicity, gender, international student status, and first-generation student status



## **SCOT Analysis**

Strengths	Character-builders		
<ul> <li>Resource rich (including different avenues to access resources and effective evidence-based trainings and programs)</li> <li>Top researchers in the country on mental health and wellness</li> <li>Access to University specific data concerning various health and wellness topics (financial, mental health, etc.)</li> <li>University-wide commitment to mental health and well-being</li> <li>Connection to the broader Columbus community</li> <li>A comprehensive integrative strategy to optimizing the health and well-being of faculty, staff and students, including sustaining a culture of well-being, by The Ohio State One University Health and Wellness Council</li> </ul>	<ul> <li>Hindered student participation in programs/services</li> <li>Immense number of programs/services overwhelming for students to navigate</li> <li>Departments siloed in mental health programs/services, no "one stop shop" for access</li> <li>Work in health equity/disparities not evident to underrepresented, minoritized populations (e.g., campus change students, international students, BIPOC students, etc.)</li> <li>Dearth of representative data on marginalized campus communities</li> <li>Less access to services for regional students than central campus students</li> </ul>		
Opportunities	Threats		
<ul> <li>Embed wellness into the academic programs and majors</li> <li>Streamline communication efforts regarding mental health resources, programs and services</li> <li>Introduce programs/services early in the student experience (e.g., wellness onboarding assessment and programming)</li> <li>Efforts to reduce mental health stigma</li> <li>Offer cultural fluency programs for mental health providers and first responders</li> <li>Increase harm reduction options</li> <li>Partner with students on peer-to-peer programming and marketing</li> <li>Link mental health and well-being work to the academic side of the university, including faculty and staff</li> </ul>	<ul> <li>Burnout and lack of protected time for students to engage in self-care</li> <li>Limited resources in both personnel and funding</li> <li>Mental health stigma</li> <li>Lack of cultural sensitivity and understanding among clinicians and providers</li> <li>Competitive nature of Ohio State</li> <li>Current data sampling methods have not been fully effective in reaching underrepresented communities</li> </ul>		

### Recommendation #1: Implement an evidence-based quality improvement approach to enhancing student mental health and well-being

ACTION STRATEGIES	PROPOSED OUTCOMES	TIMELINE
Create a coordinated assessment plan to ensure continual assessment of all mental health resources and programming on an on-going basis	Comprehensive list of all mental health resources and programming	Annually, beginning fall of 2021
Monitor the mental health and well-being of students across various programs and campuses and their engagement in programming and services	Data concerning student mental health outcomes over time Rates of student engaged in programs Refine or eliminate low engagement programs	Annually
Use the data from assessments to implement and continuously improve targeted interventions to maximize outcomes	Targeted programs leading to improved related mental health outcomes	Annually

Recommendation #2: Coordinate practices for a comprehensive oneuniversity approach to optimizing student mental health that emphasizes the university-wide impact of building and sustaining a culture of care and well-being

ACTION STRATEGIES	PROPOSED OUTCOMES	TIMELINE
Develop a monthly Mental Health and Well-being	Attendance at monthly sessions and representation of	
Community of Practice sub-council as part of the One	specific areas	
University Health and Wellness Council to allow those	Reports of engagement levels for programs	Fall, 2021
doing the work to hear and coordinate what is available	Web site hub with hits tracked	
across campus and areas of opportunity	Inquiries	
Increase collaboration and partnership with providers in		
the broad campus and Columbus community as	Track numbers of partners as referral sources	Fall, 2021
students are referred to long-term counseling in the off-	Reports of student referrals	Fall, 2021
campus area		
	Percent of students who complete assessment based	
Require students to take the wellness assessment as	on admissions per semester	Fall, 2021
part of the first-year experience to set a baseline of	Growth each semester	
mental health and well-being, connecting them with	Student mental health survey data	
resources right away	Track follow up efforts	
	Graduation and drop out student rates	
Increase the number of faculty who complete the LIVE	Track participant numbers	
WELL seminar series, which is focused on	Track growth	Fall, 2021
incorporating mental health and well-being strategies	Evaluation data	
into curricula/courses by 15% annually	Evidence in course syllabi and Carmen activities	

# Recommendation #2: Coordinate practices for a comprehensive one-university approach to optimizing student mental health that emphasizes the the university-wide impact of building and sustaining a culture of care & well-being ACTION STRATEGIES PROPOSED OUTCOMES TIMELINE Track participant numbers Track participant numbers

Increase the number of faculty, staff and students who complete mental health first aid training by 15% annually	Track participant numbers Track growth Evaluation data Rates of student referrals for services Conduct study on outcomes	2021 and yearly thereafter
Expand the graduate health sciences student wellness onboarding program to all graduate students, which includes a mental health and well-being assessment and the evidence-based cognitive behavioral skills building MINDSTRONG program	Track participant numbers Track growth Evaluation data	Fall, 2021
Improve collaboration and partnership with Office of Academic Affairs and the Graduate School and Professional Schools to incorporate mental health support and resources into their process and the classroom	Track graduate and professional student well-being survey responses Include well-being/mental health content in orientations Track rates of graduate and professional student use of mental health and well-being services Track faculty survey responses regarding their role in students' well-being	Annually
Minimize the negative impact or perceptions of mental health crisis intervention by law enforcement by developing a joint response unit, including public safety and mental health/social work professionals	Survey data	2021-2022 Academic Year
Offer de-escalation and mental health first aid training for Residence Life staff	Track participant numbers; Track growth Evaluate data	Fall of 2021

# Recommendation #3: Enhance marketing and communications around mental health resources, programs and services to increase student engagement and decrease the stigma surrounding mental health

ACTION STRATEGIES	PROPOSED OUTCOMES	TIMELINE
Develop and launch a peer-to-peer campaign focused on creating a culture of care and well-being, including normalizing reaching out for help	Participant engagement numbers Inquiries Evaluation data Student mental health data	Fall, 2021
Partner with student organizations and students to create student-led educational programs that can be offered peer-to-peer	Participant engagement numbers	Fall, 2021
Create a central website/hub for all mental health resources based on distress level	Web site visits Site queries Referral and program rates	Fall, 2021
Develop and launch an awareness campaign highlighting the breadth and depth of mental health services and resources available	Program engagement data Referral numbers Web site hits Student mental health survey data	Fall, 2021
Develop a mental health outreach toolkit for consistent messaging and content to be shared across the enterprise	Toolkit access and use	Spring, 2021
Include information about the Wellness App in all comprehensive resource promotion	Track increase in app use	Annually, starting Fall, 2021
Increase the number of students across the university who engage in mental health services and programming by 10%.	Number of students who participate in our various programs from various campuses and academic programs	Annually

#### Recommendation #4: Conduct intentional outreach and engagement with BIPOC/marginalized communities, removing barriers to accessing support

ACTION STRATEGIES	PROPOSED OUTCOMES	TIMELINE
Increase embedded counselors to colleges and units that do not have them	Track numbers Track students seen	2021-2022 and annually
Continue to hire mental health and wellness professionals (counselors, wellness coaches, etc.) who look like and can relate to the BIPOC/marginalized communities they support	Track numbers Track students seen Evaluation data	Fall, 2021 and annually
Offer cultural fluency training programs to mental health and wellness professionals (counselors, wellness coaches, etc.) to help them better prepare for engaging a diverse population	Track numbers Evaluation data	Spring, 2022
Create a specified category of funding for emergency mental health needs to financially support students who are referred off-campus for long-term therapy	Track funds used Track student referrals Evaluation data	Fall, 2021
Increase survey participation among BIPOC students to provide more robust and actionable data for decision-making, understanding need	Track percentage participation among specific populations	Fall, 2021 and annually

Recommendation #5: Enhance mental health services, programs and resources currently available, with a focus on prevention by building coping and resiliency skills and reinforcing the importance of mental health and well-being.

ACTION STRATEGIES;	PROPOSED OUTCOMES	TIMELINE
Develop and implement the Buckeye C.A.R.E initiative which provides a student with access to resources/information as they on-board to the university (interdisciplinary team of students, faculty, staff, clinicians, etc. that provide support in all nine- dimension areas of wellness), starting with a pilot program.	Student evaluation data Track Student meetings Track Student outreach to team Track access and use of programs and services	Early as possible- resource intense
Create and incorporate a wellness plan alongside an academic plan for each student	Percent of students who engage in wellness plan – advisor tracking; Growth each semester; Evaluation data Student mental health survey data Graduation and drop out student rates	Fall, 2021
Add content, including the new micro-learning modules funded by CARES that are in production, to the Ohio State Wellness: App focused on loneliness, resiliency, coping and harm reduction	Access rates Evaluation data Student mental health survey data Resilience ratings	Fall, 2021
Include texting option for the Buckeye Peer Access Line (PAL)	Use rates; Referral rates; Evaluation data	Fall, 2021
Review currently offered trainings and educational programs and expand use of certificate programs for mental health support	Completion numbers Program engagement numbers Evaluation data	2021-2022
Increase student engagement in evidence-based mental health promotion, coping and resiliency programming	Student evaluation data Track student access and use of programs and services	Annually
Require wellness programming completion as a component of the First Year Success program	Student evaluation data	2021-2022 Academic Year

# A Paradigm Shift is Needed from Crisis to Prevention and Early Intervention

An Ounce of Prevention is Worth a Pound of Cure – Ben Franklin

