

Promoting, protecting, and restoring health and well-being

Health Care Advisory Committee February 21, 2017 4:00PM - 5:00 PMJD Kabler Conference Room – (8003) UHS - 333 East Campus Mall

Annalise Panthofer, Johnny Uelmen, Madeline Ford, Nathan Stack, Jordan Madden, Madeline Ford, Andrew Ruis, Kim Pinch, Manish Patankar, Randall Brown, Paul Kelleher, Jennifer Powell, Manish Patankar, Sarah Van Orman(UHS), Arnie Jennerman(UHS), Marlena Holden(UHS), Andrea Lawson(UHS), Jim Morrison(UHS)

Guest: Agustina Marconi, LeAnna Rice

- 1. 17-18 Budget Update-UHS reviewed that the UHS 17-18 budget as presented to the HCAC was endorsed by the SSFC unanimously. Support was strong for increased mental health services.
- 2. Healthy Minds Survey-Leanna Rice from UHS reviewed the results of the Healthy Minds Survey which was completed by UHS in the spring of 2016. Healthy Mins is a national instrument that collects information about student mental health. Significant findings were reviewed including information about the overall prevalence of mental health symptoms, access to treatment and other help-seeking, academic impacts, and student perceptions around campus climate and stigma. Of note were significant disparities for many historically underrepresented and marginalized student groups in both mental health symptoms as well as experience of bias and discrimination on campus and the intersections between various identities.

The committee discussed how these findings mirror some current campus climate and how they can be utilized to both inform programs and services for students but also to inform programs and initiatives aimed at addressing the underlying root causes of discrimination and bias. The imperative of addressing bias and discrimination as a public health issue and increasing the effectiveness of current campus efforts was reviewed. Various opportunities to share this information with campus leaderships as well as students, faculty, and staff were discussed.

Next Meeting: April 18th, 2017



University of Wisconsin-Madison

The Healthy Minds Study

The intersection of mental health and student success is vital to the health and growth of the UW–Madison campus community. Mental health issues can negatively impact a student's academic and social experiences in college, and may result in a student leaving the university before completing their academic career.

In February 2016, the University of Wisconsin-Madison participated in the Healthy Minds Study to examine student mental health, service utilization, and related issues among undergraduate and graduate students. The survey was administered to all undergraduate and graduate students (43,000)

and 7,400 students—17 percent—responded.

For students of color and underrepresented students, mental health issues can be augmented by discrimination on campus, and can result in increased anxiety or depressive symptoms, feelings of isolation, and impact their ability to succeed in college.

To best serve and support the mental health of all UW–Madison students, the university community and its health center are committed to building a healthy and thriving environment for students that supports positive mental health and advocates for students' overall health and well-being.

WHAT DID THE SURVEY FIND?

Key findings on overall mental health

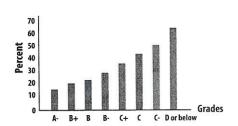
- 21 percent of students scored positively for depression overall
- 16 percent of students scored positively for an anxiety disorder
- 9 percent of students indicated they experienced suicide ideation in the last year.
- 27 percent of students have been diagnosed with a mental health disorder during their lifetime

Historically underrepresented and marginalized students were more likely to score positively for anxiety, depression, and suicide ideation.

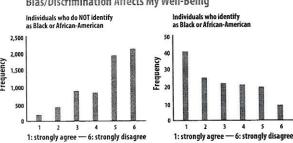
- Students who identified themselves as financially struggling were two times more likely to score positively for depression and anxiety and overwhelmingly more likely to endorse suicide ideation. They were also less likely to seek out services. African American, Latino, Hawaiian Native, and "other" were overly represented in this group. Transgender and gender non-conforming are also highly represented compared to cisgender students.
- African American students were more likely than other race/ethnicity to score positively for depression and anxiety, and endorse suicide ideation.

- Students who identified as transgender or gender non-conforming were overwhelmingly more likely to endorse suicide ideation than their cisgender counterparts.
- Students who described themselves as gay, lesbian, or bisexual, where more likely to score positively for depression and anxiety, and endorse suicide ideation as compared to their heterosexual counterparts.
- African American, Latino, Asian, and lesbian, gay, and questioning students were more likely to agree that their peers thought less of a person seeking help, indicating stigma within communities around help-seeking behavior.

Figure 1
Percent of + score for depression related to GPA score







Treatment

 40 percent of students with positive depression or anxiety screens indicated they have received mental health therapy, counseling, or psychiatric medication in the last year.

Mental health issues affected academic success as measured by GPA. (Figure 1)

 Elevated depression and anxiety scores correlated with lower grade point average. Students with higher depression and anxiety scores had lower GPAs.

Perceived Public Stigma

 40 percent of students agreed that 'most people would think less of someone who has received mental health treatment.'

Historically underrepresented and marginalized students were more like to describe experiences in which they did not feel they belonged or connected to the UW-Madison campus community. (Figure 2)

 Students of color overwhelmingly reported that bias and discrimination on campus have negatively

- impacted their health and well-being compared to their white counterparts.
- LGBTQ students were more likely to endorse changing their appearance in order to be accepted by their peers.
- Black, Latino, students identified as "other," LGBTQ students, and transgender or gender non-conforming students were more likely to disagree that they felt and saw themselves as part of the campus community.

Informal help-seeking

In the past 12 months, students received counseling or support for mental or emotional help from informal sources.

- · 40% friend who is not a roommate
- · 38% family member
- 29% significant other
- · 20% roommate
- 3% religious counselor
- 2% support group
- 1% other non-clinical source

NEXT STEPS

Prevention & Education

- Take a definitive stance that discrimination/bias negatively impact emotional and mental well-being.
- Increase students' ability to navigate and bounce back from difficult situations through mental health awareness programming.
- Train faculty and staff to recognize and intervene students in distress.
- Increase faculty/staff/student awareness of the effect of discrimination and oppression on mental health
- Evaluate and expand comprehensive suicide prevention programs
- Develop a mental health awareness peer education program that is reflective of diverse student body

UHS Services

- Evaluate the mental health triage system and its effectiveness for marginalized groups accessing mental health care.
- Implement an easier pathway for students seen in outreach sessions to pursue ongoing counseling
- Increase awareness and skills of staff to identify and support students impacted by bias/oppression.
- Consider offering after hours mental health services

- Six additional counselors will be hired in 2017 to meet the recommended staff-to-student ratio and to expand access and availability (Mandarin-speaking and LGBTQ-focused).
- Continue to hire staff with diverse backgrounds

Campus Recommendations

- · Identify students who struggle financially and provide specific outreach about no-cost campus services.
- Evaluate mental health resources and services available to graduate and professional students, review gaps and barriers, and develop adequate services.
- Develop and review specific protocols for postvention activities around, but not limited to, suicide, hate and bias incidents, and other critical incidents that may impact the emotional and mental well-being of the campus community.
- Conduct and compile results of exit interviews with students who withdraw from school to understand if or to what extent mental health issues, financial issues, bias/discrimination impacted their decision.
- · Support students who leave school for mental health issues by providing transparency around leave and return policies.
- With campus partners, evaluate, align and enhance systems and strategies to identify and support isolated and disconnected students, including students of underrepresented backgrounds.