

Faculty Preparation to Work with College Students with Mental Health Issues

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Abstract: *In this paper, we provide general information about college student mental health, including common mental health issues, contributing factors, and barriers to help-seeking. We then suggest research-based practices college campuses at large, and specifically higher education faculty, may take to address student mental health concerns.*

Key Words: College students, Mental health, Faculty role

Mental health issues are on the rise for college students and thus are of increasing concern in higher education (Condra, Dineen, Gauthier, Gills, Jack-Davies, & Condra, 2015; Giamos, Lee, Suleiman, Stuart, & Chen, 2017). For example, Cheng, Wang, McDermott, Kridel, and Rislin's (2018) online survey of 1,535 college students showed that almost 30% had sought psychological help in the previous 12 months, with the proportion being even higher when that period was extended. Mental health issues can affect students' intellectual and emotional abilities and their manner of functioning, all of which influences readiness to learn (Douce & Keeling, 2014; Giamos et al., 2017). Douce and Keeling (2014) note:

Mental health problems...can impair the quality and quantity of learning. They decrease students' intellectual and emotional flexibility, weaken their creativity, and undermine their interest in new knowledge, ideas, and experiences. Mental and behavioral health problems are also learning problems. (p. 1)

Despite greater awareness of mental health issues on college campuses (Bonfiglio, 2016; Giamos et al., 2017) and acknowledgment of the important role faculty can play to support students in this regard, faculty feel ill-equipped to assume this role (Condra et al., 2015). They might feel uncomfortable interacting with students with mental health issues, lack knowledge of appropriate actions and resources, and even have negative attitudes toward these students (Condra et al., 2015). Nevertheless, it is important for higher education faculty to attend to the whole person in order to support students' academic success (Bonfiglio, 2016; Condra et al., 2015; Rosenbaum & Liebert, 2015; Wyatt, Oswald, & Ochoa, 2017). Douce and Keeling (2014) duly note, "We cannot effectively educate students or prepare them to be leaders, innovators, and entrepreneurs without responding to the factors that affect their ability to learn" (p. 3).

In this paper, we discuss the most common mental health issues that students experience, factors that contribute to these issues, and barriers to students seeking mental health services. We then draw on extant literature to suggest approaches college campuses at large, and specifically higher education faculty, may take to address student mental health concerns.

CONDITIONS, CAUSES, AND BARRIERS IN RELATION TO COLLEGE STUDENT MENTAL HEALTH

Mental health issues identified most often in college students are depression and anxiety, followed by several others that involve lower psychosocial and physical well-being (Barton & Hirsch, 2016; Bezyak & Clark, 2016; Condra et al., 2015; McKenzie, 2018). Students who experience more than one condition can have compounded symptoms (Douce & Keeling, 2014; Villatte, Marcotte, & Potvin, 2017). One way mental health issues tend to differ from disabilities is that they can be permanent or temporary, and they might arise suddenly (Condra et al., 2015).

Rosenbaum and Liebert (2015) state, “College is replete with psychosocial challenges to be navigated and balanced” (p. 186), one of which is personal identity development (Bonfiglio, 2016). Variables that can contribute to mental health problems in college students’ complex lives often relate to academics (e.g., pressure to perform in a success-oriented world), finances, relationships and interactions with others, and traumatic events (Barton & Hirsch, 2016; Brownson, Drum, Swanbrow Becker, Saathoff, & Hentschel, 2016; Douce & Keeling, 2014; Nobiling & Maykrantz, 2017; Rosenbaum & Liebert, 2015; Villatte et al., 2017). A number of other potential contributors have been identified, including permissive parenting (Barton & Hirsch, 2016). The life transition itself that requires various types of adjustment to college can be a stressor that challenges mental health (Brownson et al., 2016; Condra et al., 2015; Villatte et al., 2017; Wyatt et al., 2017), leading Wyatt et al. (2017) to suggest the first year of college as an important time to address mental health within a wider focus on students’ academic and non-academic needs.

Some identity groups have been shown to have greater mental health needs and thus need more targeted attention. Students with gender identity or sexual orientation concerns are one such group (Brownson et al., 2016; Rosenbaum & Liebert, 2015; Villatte et al., 2017). Females appear to be more likely than males to experience depression and anxiety (Villatte et al. 2017; Wyatt et al., 2017), and males are less likely than females to seek psychological help (Cheng et al., 2018). Race/ethnicity and national origin, too, are important to consider collectively and specifically for different identity groups (Albright & Hurd, 2018; Corona, Rodríguez, McDonald, Velazquez, Rodríguez, & Fuentes, 2017; Giamos et al., 2017).

Three reasons seem to top the list for why college students might avoid seeking mental health services. These include: stigma (self-stigma and perceived stigma from others); insufficient mental health support (in terms of resources and timely availability of services); and cost (Bezyak & Clark, 2016; Cheng et al., 2018; Condra et al., 2015; Giamos et al., 2017; Lannin, Vogel, Brenner, Abraham, & Heath, 2016; Levin, Stocke, Pierce, & Levin, 2018; Marsh & Wilcoxon, 2015; Nobiling & Maykrantz, 2017; Sontag-Padilla et al., 2018). However, students show interest in improving their physical and mental health in general (Bezyak & Clark, 2016), and positive attitudes about getting professional help have been shown to correlate with actually seeking such help (Marsh & Wilcoxon, 2015).

STRATEGIES FOR FACULTY TO SUPPORT COLLEGE STUDENTS’ MENTAL HEALTH

Faculty can play a vital role in supporting students with mental health issues. Preventive measures and clinical services are important (Brownson et al., 2016). In the latter case, non-mental-health individuals might observe a student's need for help (Rosenbaum & Liebert, 2015), as they "may be among the first to notice changes or problems students may be experiencing, be it acting up in class, slipping grades, or changes in social interactions" (Carmack, Nelson, Hocke-Mirzashvili, & Fife, 2018, p. 75). Counseling services can only be effective when students seek them; faculty can contribute to students taking this action, but they need education on how to support students in this regard, including general information about mental health and specific information about appropriate classroom accommodations, relevant policies (e.g., on confidentiality), and available resources (Condra et al., 2015; Douce & Keeling, 2014). Such training has been shown to contribute to enhanced student success (Condra et al., 2015). Key preventive and reactive support strategies are discussed next.

PREVENTIVE MEASURES

Proactive measures can help prevent mental health concerns for college students. Efforts to raise awareness about mental health issues and available services and resources for addressing them, as well as to reduce stigma and promote better attitudes toward help-seeking, via open communications on campus at large and in individual classrooms provide one mechanism for supporting good mental health in college students (Bohon, Cotter, Kravitz, Cello Jr., & Fernandez y Garcia, 2016; Bonfiglio, 2016; Carmack et al., 2018; Condra et al., 2015; Giamos et al., 2017). Relevant information might be included in the college curriculum and greater exposure to individuals with mental health issues might be arranged (Bezyak & Clark, 2016; Bonfiglio, 2016; Jones, Brown, & Keys, 2015). These approaches can increase students' awareness about and comfort level with seeking needed help (Carmack et al., 2018). Educative measures to help "normalize" and raise awareness and acceptance of mental health issues should include the college campus at large, in addition to the wider society, in order to create a broad network of support and active involvement (Douce & Keeling, 2014; Nobiling & Maykrantz, 2017; Wyatt et al., 2017). Outreach must be culturally sensitive and include efforts to target specific identity groups known to face greater mental health challenges, as noted earlier in this paper (e.g., Douce & Keeling, 2014; Wyatt et al., 2017). Accordingly, issues that can affect students' mental health, such as discrimination and sexual harassment, should be addressed to create a campus climate that is conducive to better mental health (Brownson et al., 2016).

Another proactive approach for addressing college students' mental health in a preventive sense is teaching students to use their own agency to support themselves. Examples include teaching self-regulatory strategies for stress reduction and academic success (Barton & Hirsch, 2016; Bezyak & Clark, 2016). Finally, another key preventive measure is to help students build healthy connections on and off campus, and thus a sense of inclusion, by encouraging collaborative work and support communities, membership in peer organizations, and other means of helping students interact with other students and faculty (Brownson et al., 2016; Jones et al., 2015; Wyatt et al., 2017).

REACTIVE MEASURES

Although students tend to seek informal, non-professional help for their mental health needs, such as friends, romantic partners, family, school staff, coaches, and church personnel, professional treatment—especially that which takes place face to face—is important (Levin et al., 2018; Nobiling & Maykrantz, 2017). Nevertheless, some less traditional methods for providing

mental health support, such as online resources (including social media) and texting, can be useful (Levin et al., 2018; Wyatt et al., 2017).

Faculty can play an important part in identifying student needs, encouraging help-seeking, and providing information on mental health services, and they might suggest or help institute useful campus resources, such as peer-support methods (Giamos et al., 2017). Further, they should become knowledgeable about accommodations for students with mental health diagnoses in order to make appropriate classroom adaptations (Giamos et al., 2017), and—although rare—consider use of retroactive accommodation after a diagnosis (Condra et al., 2015).

CLOSING COMMENTS

One challenge in striving to support good mental health for college students is how to reach students who do not seek help or do not know they need it (McKenzie, 2018). However, some of the methods suggested here, especially those aimed at prevention, can help in that regard. Bonfiglio (2016) states, “How students with mental health issues are served across an institution may come to be a litmus test for an institution’s commitment to its core values” (p. 104). Indeed, therein lies an important challenge to all institutions of higher education.

Note: Some useful resources for pursuing further information include: American College Health Association; The Center for Collegiate Mental Health; Higher Education Mental Health Alliance; YOU at College.

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