MAKING SPACE FOR MENTAL HEALTH ON CAMPUS

COLLEGIATE MENTAL HEALTH INNOVATION COUNCIL

2019 Summary Report and Program Highlight



ACKNOWLEDGEMENTS

Mental Health America (MHA), formerly the National Mental Health Association, was founded in 1909 and is the nation's leading community-based nonprofit dedicated to helping all Americans achieve wellness by living mentally healthier lives. Our work is driven by our commitment to promote mental health as a critical part of overall wellness, including prevention services for all, early identification and intervention for those at risk, integrated care and treatment for those who need it, with recovery as the goal.

MHA dedicates this report to the student advocates and youth leaders across the country and globe who are working to improve the well-being of their peers and communities. Their leadership and creativity will continue to shape and transform the way we engage and support youth and young adults by creating and improving services and supports to meet the wants and needs of their peers in a changing world.

This report was researched, written, and prepared by Kelly Davis and Danielle Fritze, along with the ideas, work, and support of the Collegiate Mental Health Innovation Council 2018-2019 members.



500 Montgomery St, Suite 820 Alexandria, VA 22314-1520 www.mhanational.org Copyright 2019 by Mental Health America, Inc.

CONTENTS

04	INIT	\Box	וחי	JCT	ION

- 05 COLLEGIATE MENTAL HEALTH INNOVATION COUNCIL
- 06 MENTAL HEALTH ACROSS CAMPUS GROUPS
- 07 PEER SUPPORT ON CAMPUS
- 08 DROP-IN RESOURCES AND ANYTIME SUPPORT
- 08 DISABILITY SUPPORTS AND DISABILITY CULTURAL CENTERS
- 09 CONCLUSION

10 PROGRAM SUMMARY APPENDIX

77 OWN YOUR ROAR

An awareness and support organization dedicated to normalizing and addressing mental health among student athletes at Towson University by Olivia Lubarsky.

13 EMORY DARK ARTS

A club that allows students to fully express all of their mental health experiences—positive and negative—through art at Emory University by Chloe Camp.

16 JOELLE BRUIN

A student-developed chat bot that helps students navigate mental health resources and supports on campus at The University of California, Los Angeles by Cat Wang.

79 YOU ARE NOT ALONE: CLEMSON

A peer support program that provides weekly opportunities to receive support and discuss mental health topics at Clemson University by Daniel Solomon.

27 MENTAL HEALTH AWARENESS CLUB

A student-developed and driven program that provides group-based emotional support on campus at Spokane Community College in Washington state by Oluwanifemi Shola-Dare.

23 LEAN ON ME

A chapter-based program that trains students to provide anonymous text-based peer support to others on campus at Boston College by Kaileigh Conti.

25 THE BROWN HALL PROJECT

A dedicated space in a residence hall where students can go to relax and utilize wellness practices at The College of William & Mary by Anu Goel.

27 ENDNOTES

INTRODUCTION

In recent years, there have been important changes in campus mental health. Thanks to the work of students, advocates, and researchers, more and more Americans know about the increasing mental health challenges faced by college students. The high demand for mental health services in higher education and increased public pressure on colleges to provide those services are having an impact on administrators and decisionmakers.

A 2019 survey conducted by the American Council on Education quantified some of this impact. In the study, more than 80 percent of college presidents stated that their strategic plan included a focus on student wellbeing. Over 40 percent of college presidents stated that their plans included mental health specifically with more than two-thirds saying that they spent more money on mental health services than they had 3 years prior. Thanks to increasing awareness, pressure, and advocacy, many schools are investing in additional counseling services and support groups, mental health mobile apps and technology, and well-being classes and workshops.

While this is important progress, there is much more that is needed to meet student needs. Recent research from the America College Health Association found that 46 percent of college students felt so depressed it was difficult to function within the previous 12 months, and 14 percent seriously considered suicide within the previous 12 months. A 2018 report from the Center for Collegiate Mental Health found that reports of depression and previous self-harm, suicidal ideation, and suicide attempts are continuing to increase among students accessing campus counseling services.

Although administrators are demonstrating increased commitment to addressing mental health, many colleges and universities are still failing students, whether through lack of services, inadequate or inaccessible supports and accommodations, or discriminatory leave of absence policies. Many students have limited access to traditional services like counseling or medications due to waitlists and lack of capacity on campus, and unavailability or high costs of services off campus. Students report gaps in comprehensive services and unwillingness among schools to invest in student-led initiatives like formal peer support programs. Additionally, students report being unaware or afraid of accessing reasonable accommodations through campus disability support services.

The barriers to and absence of support can lead to unnecessary suffering, disrupted academic performance, school drop-outs, and even suicide. Vi Supporting mental health on campus is not an added bonus. It is a necessary part of ensuring colleges are accessible and that young people are equipped with support and tools to succeed on campus and beyond. Even as schools increase investment in mental health and well-being, it is unclear if they are emphasizing the resources that students themselves feel would make the biggest impact. With a rapidly changing world and a growing focus on meeting students' needs, the best way for colleges to decide where to start and what to emphasize is to go to those most familiar with the challenges—the students themselves.

Before discussing specific mental health services and supports on campus, it is important to note the broader issues that impact student well-being that need to be addressed within and beyond mental health-specific resources. Racism, sexism, transphobia, and other forms of discrimination impact mental health. VIIVIIII Housing instability, lack of regular access to healthy food, student loan debt, and community and sexual violence are also among the issues many students are facing that can impact their education and well-being. X Student mental health does not exist separately from all of these problems, and these issues must be considered in all that we do as advocates, on- and off-campus.

MENTAL HEALTH AMERICA'S (MHA's) COLLEGIATE MENTAL HEALTH INNOVATION COUNCIL

With schools lagging to catch up to students' needs, students across the country are stepping up to not only hold campuses accountable but to also develop solutions that are relevant and engaging for their peers. The leadership and ideas of students are key in pushing change with decision makers and pushing boundaries with traditional mental health on campus.

Since its founding by Clifford W. Beers, a person with lived experience of mental health challenges and hospitalizations, in 1909, MHA has been guided by the belief that consumers and people experiencing mental health challenges should not just be considered as having valuable perspectives but should be at the forefront of developing and leading solutions to address and improve mental health. With that in mind, MHA launched the Collegiate Mental Health Innovation Council (CMHIC) in 2017 to identify college students who have developed and led programs that fill gaps in traditional supports and services on their campuses.

This second annual CMHIC report incorporates research, members' perspectives and programs, and trends in campus mental health across the country. The report highlights major themes from students including: the importance of mental health programs developed within different campus communities; the need for peer support programs on every campus; the option for dropin and anytime support; and the need for more disability resources.

CMHIC members are selected annually from applicants across the country for their ideas, leadership, and programs. Through CMHIC, MHA:



Convenes

a select group of students and recent graduates with diverse backgrounds, locations, and experiences in monthly meetings over the course of one academic year;



Identifies

students' perceptions of problems and solutions to address issues in mental health on campus; and



Promotes

solutions and implementation of student-led solutions across additional campuses through annual reports, web content, and technical assistance.

MENTAL HEALTH ACROSS CAMPUS COMMUNITIES

There are a growing number of student-led mental health groups and organizations on college campuses, as more students are getting involved in advocacy to educate others about mental health, host story sharing events, and partner with campus resources like the counseling center to refer individuals looking for help.

In addition to general education, stigma reduction, and referrals, students are also creating mental health organizations and resources specific to different communities on campus. This includes groups and events designed by and for student athletes, Greek life, graduate students, students of color, artists, and others. Students can feel unrepresented by existing mental health organizations that may not consider the needs, demands, and norms across different campus groups. What's more, it can be easier to engage with people and resources when you either know or identify with them. Instead of having to go out of their way to find information and support, these resources come directly from their peers, informed by their values and experiences in ways that make the most sense for them.

One example of a community-specific organization is Own Your Roar, created by CMHIC member Olivia Lubarsky at Towson University. Being a student athlete comes with significant demands on time and energy, and there are many beliefs and ideas in the community that can prevent people from reaching out if they are struggling. An emphasis on doing everything yourself and never showing vulnerability, or "weakness," can keep student athletes suffering in silence. Own Your Roar, which has since been replicated on other campuses like James Madison University and University of California, Los Angeles (UCLA), started as a way to empower student athletes to share their mental health stories - and has now grown into a newly launched mentorship program that will match participants with other athletes who are trained in support and teaching mental health skills.

Another example is **Emory Dark Arts**, an art-focused organization co-founded by CMHIC Member Chloe Camp at Emory University. Emory Dark Arts creates an open space for students to express their mental health experiences, from exciting to devastating. Its founders felt limited by traditional mental health advocacy, which often focuses on recovery stories that seemed to discourage talking about some of the more challenging and painful parts of people's experiences. The campus club provides a number of platforms, including group meetings and shows on campus, that create spaces for individuals to use art to express themselves in uncensored ways that may not exist or be promoted in other settings.

Because different communities have different considerations, universities should support students in developing specifically-tailored resources. Students from existing campus mental health organizations should reach out to other campus groups to see how they might work together and support one another's work, and students interested in creating something new should look to their peers at other schools for ideas, advice, and community.

With all of this growth, it's also important to make sure there are easy ways to navigate the emerging resources. One solution created by CMHIC member Cat Wang at UCLA is a chatbot named Joelle Bruin. This chatbot was developed to make it easy for students to navigate not only the traditional mental health resources on campus and in the community but also the different student organizations focused on mental health. Students can message Joelle Bruin to ask about what is available, share their interests, and receive tips on dealing with things like stress and anxiety. By creating an engaging way to sort through everything that college has to offer, students can get connected with supports and communities they may not have known existed. Because even if there are many resources, if they are not easily accessible for students then they will have limited impact.

PEER SUPPORT ON CAMPUS

Peer-to-peer approaches are important in outreach and the development of resources, but formal peer support programs that train students - often with lived experience of mental health challenges or trauma themselves - to create spaces to provide one-on-one and group-based support for others are essential for every campus.xiii These programs are currently on the rise as students and schools recognize the value of creating space for emotional support, connection, and community. From organizations like Project LETS and The Support Network to the many Collegiate Recovery Communities and Programs that are part of the Association for Recovery in Higher Education, students are launching and sustaining formal peer support programs.

Many students who are dealing with mental health challenges report feeling alone or as if they have no one with whom they can share their experiences. They may feel overwhelmed at the amount of work that needs to be done to address mental health at their school and the limited connections that they have to make a difference. Yet, student leaders who have started peer support programs often report that it can take something as simple as a social media post to find others who can relate and who want to do similar things.

This was the case for CMHIC member Daniel Solomon when his tweet about better addressing mental health at Clemson University was seen by another student who formerly lived down the hall from him. This conversation turned into a peer support organization, **You Are Not Alone: Clemson (YNA)**, that creates space for students to meet weekly and discuss selected topics that are important to them. By focusing meetings on student-selected topics, YNA is able to combine peer support meetings with discussions of issues that are pressing for members, like LGBTQ+ support on campus or toxic masculinity.

A similar program that provides themed weekly support groups was developed by CMHIC member Oluwanifemi (Nife) Shola-Dare through the **Mental Health Awareness Club at Spokane Community College (MHAC)** in Washington State. The organization, which supported students ages 17-50, provided weekly Therapy Thursday events where members could come to be vulnerable and connect with others.

Like many existing or potential peer support organizations, both YNA and MHAC were faced with questions about liability and safety from their college administrators. Both organizations offer suicide prevention trainings and have relationships with their counseling centers and local resources to refer students looking for more supports or who may be in crisis. Additionally, YNA was able to address the concerns of their administration by creating a statement in their club constitution that specifies that they are not mental health professionals and that their peer support meetings are not group therapy. They make sure this was consistent in all of their messaging to members and the campus community. As a compromise with the university, MHAC chose to invite counseling center staff to attend and participate in-but not facilitate—their Therapy Thursday meetings and other on-campus events.

With peer support programs continuing to demonstrate their value and impact, administrative concerns and resistance can be addressed over time. To further support this effort, more research should be done to determine what makes a successful peer support program and how different models of peer support can fit within the campus and local context.

DROP-IN RESOURCES AND ANYTIME SUPPORT

Students have incredibly stressful schedules with classes, internships, jobs, and other obligations that can include caretaking for children or family members. Waiting for services might not make sense. They might want support immediately or need support to be flexible with their constantly changing demands. Here, drop-in and anytime support and resources are key. Whether inperson or online, many students want immediate access to services, may want to reach out on their own terms, or may not have anywhere else to turn to in a moment of distress.

Many schools have in-person drop-in support for students through the counseling center or through their peer support programs. Additional broader options for immediate support that are not in-person include things like <u>Crisis Text Line</u> or other <u>mobile apps or virtual communities</u>. At colleges, students are also created their own campus-specific virtual support organizations, like **Lean On Me**.

Started at MIT, this anonymous text line allows students to receive emotional support from a trained peer from their college on any topic 24/7. Since its founding in 2016, Lean on Me has active chapters on seven campuses, including Boston College - where CMHIC member Kaileigh Conti provided support as part of the organization. Chapters receive the information, training, and technology to operate their own campus-based

anonymous text lines from the Lean On Me umbrella organization.

In addition to providing direct support whenever students need it, schools should provide supportive physical spaces for wellness as well. Many schools are doing this with wellness rooms on campus, but a way to make them as accessible as possible is to embed them into traditional parts of student life, as CMHIC member Anu Goel is doing in the **Brown Hall Project** at William & Mary. The project created a space in one of the freshman residence halls on campus and was specifically dedicated to mental health and well-being. By utilizing old kitchenettes no longer being used by students, the students and staff involved in the project created a room that includes items like blackout curtains, essential oils, and massage chairs that do not require students to leave their homes on campus. The project is one of the first of its kind in the United States.

With the lack of privacy available to many students in dorm life and the importance of having space to calm down, process feelings, and take a break, physical spaces for well-being fill a major gap for students in student housing. Future planned expansion of the project that could be replicated at other schools includes ensuring the availability of these spaces across residence halls and academic buildings.

DISABILITY SUPPORTS AND DISABILITY CULTURAL CENTERS

As discussed in the 2018 CMHIC report, <u>Beyond Awareness: Student-led Innovation in Campus Mental Health</u>, students with psychiatric disabilities face many barriers to accessing accommodations on campus. They may not know that mental health conditions can be considered disabilities or may have concerns about privacy if they disclose a mental health diagnosis. XIV Students also report having to confront complicated feelings about what it means to identify as having a disability or beliefs that they do not "deserve" the accommodations. These are all problems noted by this year's CMHIC council as well, with the important note that students report significant

improvements from their accommodations once the hurdles - like lack of information or awareness and identity - have been navigated.

Many students access disability resource centers on campus that provide direct support from staff and offer workshops and other resources. Recommendations from last year's report on improving disability resources and utilization included outreach efforts from students with disabilities to let others know that the resources are available and to provide support in navigating them. Utilizing peers in this way and encouraging public

dialogue around mental health conditions and disability supports are essential to making sure students who have the legal right to supports in school get to stay in school with their classmates. Making them aware of their rights can also help mobilize students around the all-too-common discriminatory practices among universities for students with disabilities.*

Another way to engage and support more students with disabilities is through Disability Cultural Centers (DCCs). DCCs are physical spaces on campus, open to students with any type of disability, that acknowledge disability as a form of diversity, destignatize disability, and celebrate disability culture. The centers have a history intertwined with the civil rights movement and have been on campuses for the last few decades. Centers now exist or are being started on at least 13 campuses across the US, with a noticeable increase in recent years.*

Similar to the LGBTQ+ and women's cultural centers on campuses, DCCs can create a way to celebrate and share identities for students who are interested, not as a way to keep people separate but as a way to build community.^{xvii} With identity as a major concern for students, spaces that see disability from a social justice perspective and as an affirmed identity, as opposed to an impairment, can help. While many students get the message that disability is just something to be accommodated in isolation, a DCC can create space and the message to students, even if they are not participating, that challenges negative beliefs about what it means to have a disability and shows them that they do not have to go through their experience alone.^{xviii}

CONCLUSION

Mental health on campus should not be treated as a luxury. Students deserve inclusive, healthy environments that empower them to succeed in higher education and beyond. To do this, MHA believes it is critical to listen to and support the ideas of students themselves. The following section highlights the programs and ideas of MHA's 2018-2019 CMHIC cohort that students, administrators, and advocates can use to better inform the work on their campuses. By learning from, sharing, and building upon their ideas, MHA is dedicated to supporting current and future leaders to build a world where every student is better off.

PROGRAM SUMMARY APPENDIX

OWN YOUR ROAR

Own Your Roar is an initiative created by student athletes for student athletes that unites mental health and athletics to utilize sport as a platform to increase mental health awareness. The nature of the NCAA conditions student-athletes to withhold displays of weakness, while balancing the stressors that accompany performing at a high level academically, athletically, and socially. While there may be no tangible, physical proof to accompany mental and emotional pain or setbacks, mental illnesses are just as valid, and just as detrimental to performance as physical injuries. Athletes have access to top physical therapists, athletic trainers, massage therapists, and other modes of healing for physical injuries, but what they lack is the support for the injuries, illnesses, and struggles that we face internally. At Towson, and across the NCAA, many student-athletes do not have mental health professionals to see within the confines of their athletic department.

Own Your Roar aims to eradicate the glaring disconnect between the support

and treatment received for physical injuries versus those for mental health illnesses. Mental health challenges are elevated in the realm of athletics, and with a slogan of "Mental Health. Cultivate Resilience." Own Your Roar works to achieve mental wellness and build mental strength. Every day, student-athletes take care of their bodies to be able to excel in practice and competition, under the care of a plethora of athletic trainers and physical therapists, so why do we neglect to take care of our mental health to the same extent? Own Your Roar exemplifies its mission of cultivating resilience by hosting studentathlete forums to reciprocate support, creating events, bringing national speakers, and dedicating athletic games to mental health awareness. Creating an environment in which student-athletes are comfortable to openly express themselves serves to increase their competitive advantage on and off the field.

Own Your Roar has earned national social media attention for its unique efforts as a

model for other institutions. It has inspired the creation of similar initiatives such as James Madison University Athletics' "Dukes Let's Talk," and University of California - Los Angeles Athletics' "Bruin Brave." Starting in the Fall 2019 semester, Own Your Roar will expand through implementation of a trained mentorship program. The program is designed to equip student-athlete mentors with enhanced leadership skills and resiliency tailored to athletics to extend to their mentees. While financial budgetary restrictions prohibit manv departments from increasing support staff for mental illness, implementing a program to advance peer support is a strong alternative. Own Your Roar is prioritizing eradicating stigma by increasing awareness with a model campaign and aiming to develop, fulfill, and evaluate a mentorship program with curriculum to improve wellbeing and self-efficacy of student-athletes.



- Own Your Roar has united over seventy student-athletes of all grades and sports at Towson University for a mentorship program.
- Own Your Roar hosts relaxation nights with de-stress activities on a semesterly basis to promote student-athlete well-being before final exams and dedicates multiple athletic events and games to mental health awareness.
- Own Your Roar serves as a model for other institutions, inspiring the creation of UCLA Athletics' "Bruin Brave" and James Madison University Athletics' "Dukes Let's Talk."



OLIVIA LUBARSKY



@ownyourroar



EDUCATION IS THE AGENT TO **REDUCING STIGMA** AND CHANGING **NORMS THAT GOVERN SOCIETY. ADDRESSING** CAMPUS MENTAL **HEALTH WITH UNITY** IS PARAMOUNT TO SUPPORTING YOUTH **AS WE PROGRESS** INTO OUR CAREERS.

GETTING STARTED

The nature of a highly-competitive athletic environment conditions student-athletes to withhold displays of weakness while facing the stressors that accompany performing at a high level academically and athletically. Immersed in this aura, I suffered serious depression during my freshman year. Mental illness is a hidden epidemic; that simple phrase speaks volumes. As I hid it from the world, I relentlessly tried to hide it from myself. Unable to satisfy my perfectionistic standards, I believed I was worthless. Through my journey to wellness, I learned to utilize athletics as my outlet, releasing my mental struggles into the freedom of my physical sport. That is, before I ruptured my Achilles tendon two days before my NCAA debut in my sophomore year. Immediately, I noticed a glaringly obvious disconnect between the support and treatment that I received from my struggles with depression versus my torn Achilles. Less than 12 hours after my Achilles was surgically repaired, this frustration propelled me to phone the university administration to begin concrete planning for a mental health initiative I was determined to create. I founded Own Your Roar: a program devoted to eradicating the disparity between how mental illness and physical injury are portrayed and perceived.

Conversations break barriers. With an understanding of the power of social media in communication delivery, a campaign video was created with the help of my fellow student-athletes. This video received national attention and boosted Own Your Roar in its launch. In its first month of existence, Own Your Roar worked with Towson Athletics to dedicate several team games to mental health awareness. In September 2018, my application, on behalf of the university, prompted Towson to be chosen as one of fifteen universities for a campus tour centered around mental health awareness by the nonprofit organization, We're All A Little Crazy. I was invited to be a keynote speaker at the event, alongside the company's CEO, ESPN reporter Darren Rovell, WNBA player Imani McGee Stafford and NFL player Hayden Hurst. The opportunity to express my personal experiences, observations, and ambition behind the Own Your Roar initiative was invaluable. Additionally, it was remarkable to participate in a compelling panel discussion about mental health disparities from professional, cultural, economic, and media-driven social perspectives. Starting the conversation and creating an environment in which student-athletes are comfortable to openly express themselves will only serve to increase their competitive advantage on and off the field. Furthermore, building solidarity to get rid of obstacles that athletes from various communities face is of paramount importance. It was gratifying to have several of my fellow student-athletes approach me following the event, vulnerably sharing their struggles and noting that hearing my words gave them the confidence to acknowledge their truth and seek help. This event, which shed light on mental health struggles and the journey to overcoming them, increased Own Your Roar support and meeting attendance tremendously. Leading Towson Athletics in the movement to ending the stigma around mental illness is unifying our community and setting an example across the NCAA about the validity of mental illness and necessity for support and resources.

POTENTIAL BARRIERS

During development, it may be tough to acquire support from administration. Stigma fuels societal indifference and lack of concern about mental illness, which is reflected by tendencies to not prioritize mental health initiatives. However, while one in five adults suffer mental illness, all people have mental health, and we do not want to isolate subgroups. Fortunately, Own Your Roar caught the interest of key administrators all over campus and beyond, who assisted in driving change to boost Own Your Roar to its potential. It is valuable to be persistent, and work to connect with campus leaders across different sectors.

Regarding athletics, it is challenging to engage student-athletes due to the demands of their daily schedules. Between practice, weight room conditioning, classes, study hall, and more, student-athletes are hesitant to add something else to their busy lives. It is sometimes difficult to present meetings and events as opportunities, rather than obligations, especially due to the sensitivity of the topic of mental health. To combat this, try to schedule meetings and events in locations that are convenient and customize the topics discussed.

EMORY DARK ARTS

Emory Dark Arts is a collective of individuals - artists and not, those with mental illness and not - who believe in the value of artistic platforms for meaningful, honest communication about mental health. In short, we are an advocacy group which creates and promotes initiatives that destigmatize mental illness and generate impactful change on campus and beyond. We welcome everyone regardless of background in the arts or mental health, and with whatever level of interest in being open or not about their experiences.

Emory Dark Arts holds weekly meetings during which members discuss relevant mental health issues - from suicide rates among college students to maintaining positive body image - during critical dialogues and are encouraged to share their own lived experiences as they feel comfortable. In addition to meetings, Dark Arts has several keystone initiatives which are enacted every academic year. Most prominent is the Mental Health and Well-Being Showcase, a 90-minute performance in which students display an artistic piece they have created and workshopped

with other performers throughout the semester. These pieces range from singing and dancing to monologues and spoken word poetry. Through weekly workshops, performers are provided a space to process through the mental health experiences which inspire their work and gain feedback from their fellow performers. Further, visual artists are provided the opportunity to showcase their artwork in our gallery the day of the performance. Another signature event is Mental Health Monologues, a theater production structured similarly to The Vagina Monologues in which students write and perform short scenes about their experiences with mental health. Other initiatives include mental health town halls, vigils for Suicide Prevention Month, film screenings and discussions, and open mic nights.

Perhaps most importantly, Dark Arts serves as a large network of informal peer mental health support. With over 200 members in our GroupMe, requests for support and encouragement are always met, and when a Dark Arts member falls ill or struggles, the community rallies—offering care packages,

therapist recommendations, and oncampus resources. Dark Arts aims to fill the gaps in support and services on campus by providing a space for students to share their experiences without having to sanitize their reality and stories. Dark Arts recognizes that while society has begun to embrace remedies such as meditation, yoga, and even therapy, too often we fail to provide room to simply sit with and accept people as they are in a given moment, even when it is less comfortable than hearing the happy ending of a story that happened long ago. While we do not attempt to be therapists, we feel there is tremendous value in providing a space for students to walk into a club meeting and say "I had a terrible panic attack last night, and I'm still really shaken up" or stand on stage and reveal how hard it is for them not selfharm every day, without feeling judged or shamed. At its core, Dark Arts is a caring and supportive community which utilizes art as a tool for authentic expression and honest dialogue surrounding lived mental health experiences.



- The Emory Dark Arts name is inspired by the notion that we need not shy away from the "dark" and broken parts of our lives but can instead illuminate these aspects of ourselves in a way that can connect with and inspire others and ourselves to achieve healing and peace. It is also a play on words from Harry Potter and has the same abbreviation as Dumbledore's Army.
- During the 2018-2019 school year, Emory Dark Arts reached over 600 students through showcases, theater productions, visual art galleries, panels, and collaborations.



CHLOE CAMP



f /em<u>orydarkarts</u>



@emorydarkarts

WHEN WE FAIL TO **ADDRESS CAMPUS** MENTAL HEALTH, **OUR FRIENDS AND LOVED ONES SUFFER** IN SILENCE. BUT WHEN WE BRING **CONVERSATIONS** AND EXPERIENCES TO LIGHT, WE **OPEN PATHWAYS** FOR HEALING AND RECOVERY.

GETTING STARTED

Emory Dark Arts started in the fall of 2016 as a small, unchartered organization on Emory University's campus. It began through the efforts of three seniors who recognized the need for a space for engaging in authentic dialogue about mental health as well as utilizing the subversive power of art to resist the stigma and silence surrounding these topics. Initially weekly meetings centered around creating new initiatives on campus to establish a presence in the Emory community. Each week members gathered in a small classroom to organize events that have since become signature projects of Dark Arts. Dark Arts had its first Mental Health and Well-Being Showcase in November 2016. Close to 100 students, faculty, and Emory employees were in attendance. The showcase was used not only as a platform for students' expression but also as a means to draw attention to significant gaps in Emory's mental health resources. For example, speeches were given about students' experiences spending months on the Counseling and Psychological Services (CAPS) waitlist prior to being seen regularly by a counselor. Additionally, students spoke to the lack of diversity within CAPS as well as the inadequacy in offering students only seven free counseling sessions. Furthermore, in its first year, Emory Dark Arts leaders spent significant time meeting with Emory personnel to increase transparency in the CAPS process, illuminate alternative resources on campus, influence disability services policy as it relates to mental health, and increase training of Residence Life student staff regarding mental health crises response.

In the spring of 2017, the seniors who began Dark Arts passed the torch of leadership onto a small group of first year students who took on the challenge of further establishing Dark Arts has a legitimate student group on Emory's campus. Throughout its conception year, Dark Arts had little organizational structure with no executive board or staff positions. It was in the fall of 2017 Dark Arts gained its first official Executive Director along with two Directors of Performance, one Director of Campus Collaborations, one Director of Communications, Treasurer, and 10 additional staff members. This structure allowed the organization to undertake significantly more events including a theater production entitled Mental Health Monologues, collaborations with Delta Phi

Epsilon Sorority for Anorexia Nervosa and Related Disorders Week, and a film screening of the Clay Center for Young Healthy Minds' documentary Looking for Luke among many others. Dark Arts gained its official chartership in the fall of 2018 and is continuing to expand its breadth into the Emory community and beyond.

POTENTIAL BARRIERS

One of the biggest challenges in creating a mental health group on campus is establishing an organizational structure that holds team members accountable while also respecting each individual's limitations and how these limitations might be affected by each member's own mental health conditions. In establishing Dark Arts' organizational structure, I found that oftentimes leadership team members were unable to complete tasks and attend events because mental health conditions such as depression and social anxiety impacted their ability to contribute in the ways they envisioned and hoped for themselves. As a mental health advocacy group, all members understand and have great empathy toward these challenges; however, from a logistical standpoint, meeting organizational goals proved exceedingly challenging as often times the burden of responsibility for an event or project would fall on only one or two leaders who might sacrifice their own mental health in order to compensate for others. As time goes on, the leadership team began to establish a philosophy that supporting the mental health of one another and also protecting our own mental health was far more important than any event or project we might do as an organization. While this sometimes results in a different outcome than originally envisioned, we believe that a postponed showcase or small turnout is a far better outcome than compromising our own self-care for the sake of advocacy. Establishing a culture which invites clear communication about boundaries and limits has allowed for both a successful organization and also mutual, healthy support among leadership members.

Another challenge in establishing a mental health organization stems from administrative fears from the university that we as student mental health advocates are unequipped to handle the potential consequences that could result from discussing such difficult and personal topics. Initially, Emory administration

pushed back against Dark Arts' meetings and showcases in fear that we were posing ourselves as "art therapists," stepping outside of our scope and role as students. This mistrust was perpetuated by Dark Arts drawing attention and providing a platform to speak about the flaws in Emory's approaches to mental health care for its students. However, with time, Emory Counseling and Psychological Services began to remedy some of the causes of student complaints, and with these improvements, Emory Dark Arts began to refer more members to their services and invite CAPS staff to showcases and other events. This partnership allowed more collaborative forms of advocacy to take place and eventually led to a strong relationship between the organization and Emory personnel.

Finally, a significant challenge in serving as a mental health organization leader is setting personal boundaries while also supporting members through mental health challenges. This proves especially difficult when members have had negative experiences with on-campus resources. Setting clear expectations and communicating limits with peers is essential, and I have found that creating networks of mutual support within the organization can help tremendously. For example, the Emory Dark Arts GroupMe is often used as a mean to share resources, offer encouragement, and develop friendships within the community.

JOELLE BRUIN

Joelle Bruin is an artificial intelligence (AI) chatbot that aims to help UCLA students easily navigate and access the university's mental health resources. In its current stage, Joelle Bruin has three main functions. First, Joelle Bruin is capable of directing users to the on-campus mental health resources and student groups that best suit them, based on the users' responses to questions about their needs and preferences. To follow up, Joelle Bruin can respond to specific guestions that a student may ask about the details of these mental health resources and student groups. Second, Joelle Bruin can respond to basic statements that the student enters by recommending basic mental health tips. As an example, if a student tells Joelle that "I feel anxious," Joelle can respond with examples of meditation exercises that can help to alleviate symptoms of anxiety. Third, Joelle Bruin can answer questions that students may have about how to contact emergency hotlines or mental health services if they or someone they know is in crisis. It is

important to note, though, that Joelle Bruin cannot be used as a replacement for a human therapist, nor can it be used in place of a crisis hotline.

At the end of the day, the goal of Joelle Bruin is to connect students with the support they need. Joelle Bruin is designed to help address the challenges that many UCLA students face when searching for mental health support at UCLA. UCLA is a large public university with a population of close to 31,000 undergraduate students and a campus size of 419 acres. As a result of the university's size, the mental health resources available to UCLA students are characterized by two key problems: limited resources in comparison to the size of the student body and lack of awareness of existing resources. In terms of the second issue, the mental health services and groups currently available to students are often not well-promoted and are also spread out across campus. As a result, students at UCLA who need mental health support may not always be able to find the best means of treatment when they most need it.

For instance, a UCLA student struggling with symptoms of depression may not know that due to the sheer number of students seeking CAPS counseling, each new intake student may wait months before being able to see a therapist, and even then, can only schedule three appointments per academic year. This same student may not be aware of other support options such as the STAND program that provides mental health tracking and treatment options offered by the UCLA Depression Grand Challenge or peer support initiatives on campus, such as the GRIT program that trains students to provide support and wellbeing coaching. Joelle Bruin seeks to address the lack of awareness about UCLA's mental health resources and to that end, bridge the divide between students and the support that they need.



- There are over 100 different clubs and resources collected on Joelle Bruin.
- The initial pilot includes 70+ users.
- The retention rate (the percentage of users who returned to Joelle Bruin on a monthly basis over the trial period) during the pilot was 72 percent.



CAT WANGjoellebruin.com

IN COLLEGE,
ADDRESSING
MENTAL HEALTH IS
MUCH MORE THAN
SHARING MEMES
ABOUT FEELING
'STRESSY AND
DEPRESS-Y.' JUST AS
MENTAL HEALTH
IS MULTIFACETED,
SUPPORT FOR
MENTAL HEALTH
SHOULD BE AS WELL.

GETTING STARTED

Joelle Bruin got started thanks to a dedicated team of creatives. At first, Joelle Bruin was a passion project that I worked on individually. In addition to researching platforms for hosting chatbots, I began drafting out the framework of how interactions with Joelle Bruin would run - for instance, what would be key terms in the user's input that are essential for the chatbot to recognize? I also began to compile information about UCLA's mental health support resources, from counseling options to student-led wellness clubs. As someone with limited coding experience, I knew that in order to fully realize Joelle Bruin, I would need to find qualified developers to join me. It just so happened that during this time, I was working on another mental health project in collaboration with fellow students from Creative Labs UCLA, a creative community that connects designers, managers, and developers to create projects that address issues in the UCLA community or in the wider Los Angeles community. Our resulting project from Creative Labs, called Glia, is a basic mental health journal that students can use to keep track of their daily moods. Thanks to the expansive Creative Labs network of developers and designers who expressed interest in Glia, I was able to form a team of highly capable individuals who were also dedicated to the cause of making mental health resources at UCLA easier to access. We began to develop Joelle Bruin and briefly tested out the chatbot during the 2018-19 academic year. Subsequently, Joelle Bruin was recognized by the UCLA student government as a growing resource for UCLA students. Although we are not formally registered as a club, owing to the fact that we have a very small team and do not need large spaces on campus to congregate, Joelle Bruin is in the process of pursuing potential funding support in order to further expand the chatbot's capacities based on the feedback we have received during Joelle Bruin's initial run. Naturally, there are some issues that cannot easily be resolved due to the current constraints on chatbot technology, but for the most part, we received suggestions that could inform tangible improvements to Joelle Bruin's operations. For instance, while we received feedback that Joelle Bruin is not capable of construing the meanings of long sentences, this is a shortcoming that cannot easily be addressed because of the way that the Al chatbot scans through sentences in order to parse them. However, we received another piece of feedback that Joelle Bruin was not capable of recognizing several common emoji inputs that express emotions (such as the "big grin" face to convey excitement or joy), which we have begun to integrate. We continue to use feedback gathered by the users who tested Joelle Bruin to improve.

POTENTIAL BARRIERS

To implement a chatbot similar to Joelle Bruin, the three main issues that students might face are the chatbot's practicality, administrative resistance, and technical issues. In terms of practicality, I would advise students to be aware that there are significant limits on what artificial intelligence can do, and that these limits might require to scale down one's vision for an ideal chatbot. Despite its name, artificial intelligence isn't necessarily always intelligent in conversation - for an example, look no further than Siri, Alexa, or any automated customer service chat. It's important to remember that in the process of bringing one's idea for a chatbot to reality, forgoing certain elements of the initial design does not mean that the final product will be useless. Therefore, don't be afraid of compromising your initial chatbot goal and instead focus on aligning your vision with the technological tools available in order to create the best chatbot possible.

When it comes to introducing a mental healthrelated chatbot to any administrative body, it is important to remember that universities tend to be very wary of groups or services that may create a liability risk for the institution at large. As we pitched Joelle Bruin, we had to explain Joelle Bruin is neither capable of nor designed to replace human medical professionals, and integrated this important point into our chatbot's design: When a user opens Joelle Bruin for the first time, Joelle "says" that it cannot be used in place of counselors or emergency services. I would guess that a lot of the administrative pushback stemmed from a lack of understanding about the nature of artificial intelligence chatbots, which can only be used to mimic human interaction, not to replace it. Students implementing a mental health-related chatbot would need to be able to clearly express the nature of the technology as well as the necessary disclaimers for users. Finally, for any chatbot, technical issues can arise easily and impact the way that the chatbot functions. There are bound to be glitches, and

each upgrade of the chatbot may unexpectedly reveal problems that were not previously evident. I would advise students interested in implementing a chatbot program to be aware of how it will likely not work. For students with no coding experience, to get started on a chatbot, I would suggest looking at chatbot tutorials online and seeing what solution suits best. Additionally, for a very simple chatbot, there is a wide variety of no-code-required platforms that easily integrate into Facebook Messenger. Of course, the process may be time-consuming, but ultimately, it can be very rewarding!

YOU'RE NOT ALONE: CLEMSON

The program I helped start at Clemson University is You're Not Alone (YNA). It's a peer-led, mental health awareness club that provides a safe space for people to talk about their experiences and be heard in a non-judgmental fashion. There are chapters at the University of Georgia in Athens, Samford University in Alabama, and Florida State University in Tallahassee.

What we do as a club varies from week-to-week. Some weeks we have topics provided anonymously by the members that help guide a conversation related to mental health, while other weeks we simply do check-ins to see how everyone is holding up in the at-times crazed college environment. We also spend some of our time pursuing projects, such as writing inspiring cards to people who are part of an in-patient mental

health program. This idea was brought to me by a fellow member of YNA and we call it "Project Affirmations." However, the biggest annual project for YNA is raising money for the Out of the Darkness Campus Walk put on by the American Foundation for Suicide Prevention at our campus every Spring. This past spring, YNA contributed \$2,500 to an overall record-shattering \$16,000 for suicide prevention efforts and research. These walks happen every weekend all across the United States so I highly encourage hosting one or getting involved if you are trying to form a club similar to ours!

Our program fills the need for student support for mental health at Clemson University. Our counseling center does a great job in treating mental illness, but the center is unfortunately understaffed, so many students are put on a waitlist to see a therapist or psychiatrist. This lack of consistent professional support has left a gaping hole in our student's ability to get the help they need, making YNA a safety net of sorts for the students who could not get immediate treatment. However, it is crucial to highlight that we, the peer leaders, are not professionals in what we do. We are not clinically trained to treat mental illness like those at the counseling center are, but we provide a safe place for students to simply talk with like-minded and supportive people. Many students who are struggling want is to simply be heard, and we do exactly that.



- YNA has over 75 registered student members.
- Raised over \$5,000 for suicide prevention efforts in the past two years.
- Sent over 300 inspiring cards to local in-patient mental health facilities in the spring semester.



DANIEL SOLOMON



COLLEGES
ABSOLUTELY NEED
TO ADDRESS THE
MENTAL HEALTH
CRISIS THEIR
STUDENTS ARE
HAVING. HAPPIER
STUDENTS EXCEL IN
SCHOOL AND IMPACT
THEIR CAMPUSES IN
A POSITIVE LIGHT.

GETTING STARTED

After taking a leave of absence to address my mental health, I returned to campus frustrated by the way mental illness was still stigmatized and not discussed among students. I tweeted to see if anyone else felt the same way, and a person who had lived in my residence hall responded that they wanted to do something as well. We then looked for other students who wanted to create something new on campus, and developed an executive team to explore what resources would be the best fit at Clemson.

We determined it was necessary to create a space for students to receive support, especially if they did not have access to counseling services. By combining specific topics with time for check-ins, we brought together the traditional elements of a peer support group with space to explore specific ideas selected by students. We created a mission statement and developed a constitution that laid out everything about the club, including our how new executive members can be added, how we would get funds, who our faculty advisor would be, and more. We took special care to address liability concerns by noting that we are not a clinical service and making sure that was clear in our groups and messaging. From there, we got approval and started scheduling our meetings.

To get our name out there and students involved, we tabled at events for incoming freshman to learn about clubs on campus and at busy places on campus. We also engaged our group by making sure to also have fun! YNA is as much of a community as it is a safe place. We all hang out outside of club meetings, get ice cream, and have social events. Talking about mental health all the time can weigh heavily on the conscience, so it's great to hold events like this frequently to further build the bond between the members and executive board.

POTENTIAL BARRIERS

One major issue is safe messaging. When facilitating a group of students who are opening up about their experiences, you want them to be as open and honest as they are comfortable being. However, it's important to keep in mind that when a student begins to open up about an experience they had in a rather graphic manner, it can be triggering to other members of the group and can have consequences. This is why we aim to keep the atmosphere of the club solution-focused.

Another issue is staying on topic. As a college student, it is extremely easy to get sidetracked from the topic and begin talking about the stress that the academic workload is causing. While this does in fact effect many students' mental health, everyone is dealing with the stresses of school and we want to focus on more specific issues related to mental health (such as developing healthy coping mechanisms, how your physical and mental health are related, etc.) There's no need to forcefully control the conversation when someone gets sidetracked talking about school, last week's football game, or the season finale of a show. It is ok to let the conversations roll for a bit because it's part of the bonding aspect to the club, but it certainly shouldn't take up the majority of the hour you spend together. I like to keep things at about a 40/20 ratio (40 minutes focusing on topic/ 20 minutes talking about miscellaneous things). It gives those people who have had a rough week plenty of time to talk, but also gives some time to lighten the mood for those who haven't.

One last issue to keep in mind is if you feel a member is a threat to themselves or somebody else, get a professional involved. While our counseling center is understaffed, if a student is in crisis or suicidal, they will see you immediately regardless of their schedule. So, it is important to check in with members to make sure they're doing okay mentally and if they're really struggling, again, get a professional involved. Remember that you merely a student too, not a licensed counselor or therapist.

MENTAL HEALTH AWARENESS CLUB

The Mental Health Awareness Club (MHAC) at Spokane Community College (SCC) is a student-led organization whose mission is to eradicate mental health stigma and foster a community that exemplifies the true meaning of peer support - a community where fellow students can show up without fear of judgement and exist in a frequency in which they are allowed to shine. This organization aims to encourage open conversation amongst students and equity in access to mental health resources. It is no longer news that mental health issues are prevalent on college campuses. The question is, have college campuses been able to keep up with the increasing need for mental health resources? On a community college campus with limited funding like SCC, the answer is no. With only one psychiatric nurse practitioner who comes in once a week for a few hours, and two mental health interns, students are left stranded and frustrated having to wait for weeks if not months to get an appointment. Additionally, the mental health interns available can only provide 10 free sessions throughout a student's time on campus.

MHAC compensating limited services by organizing Therapy Thursdays—a weekly themed group therapy free for students and faculty. Therapy Thursdays is interactive and has two main focuses: addressing the major risk factors of depression, isolation and loneliness, and providing opportunities for participants to develop life skills. We have seen that building supportive social relationships amongst students has reduced isolation and promoted a sense of belonging. Too often, mental health challenges are reduced to just chemical imbalances in the brain when in reality most college students are overwhelmed by stress, confusion, existential crises, financial problems, and academic responsibilities. For this reason, we devote one-hour sessions to learning life-coping skills like effective communication, dealing with stress, building healthy relationships, and conflict resolution. We also encourage students to attend other workshops on campus that focus on test anxiety, goal setting, and time management.

Statistics show that one in four young

adults between the ages of 18 and 24 have a diagnosable mental illness. What is unique about this organization is that because it was founded at a community college, most of our members do not fall within this age group. In fact, the age of members range from 17 to 50 years of age and members have a unique lived experience that has shaped their lives in one way or the other. It was important that we catered to the needs of all our members and that we ensured vulnerability and made everyone feel heard and seen.

Due to the sudden loss of the local mental health help line, the club took on a project inspired by Active Minds to update the SCC student ID card with National Suicide Prevention crisis text line and the direct contact information of the health clinic. This update is set to begin in the fall of 2019 and will hopefully make mental health resources more accessible.

The club also represented students on the first-ever SCC Suicide Prevention Advisory Board.



- MHACC Started a one hour weekly themed group therapy (Therapy Thursdays) to compensate the free but limited ten sessions available to students.
- MHACC's advocacy led professors to include mental health information in course syllabi and the school to include crisis lines on student ID cards.
- MHACC caters to the needs of men and women ranging from ages 17-50!



OLUWANIFEMI SHOLA-DARE

IT IS NO LONGER
NEWS THAT MENTAL
HEALTH ISSUES
ARE PREVALENT
ON COLLEGE
CAMPUSES. THE
QUESTION IS, HAVE
COLLEGE CAMPUSES
BEEN ABLE TO
KEEP UP WITH THE
INCREASING NEED
FOR MENTAL HEALTH
RESOURCES?

GETTING STARTED

Having grown up with a brother who lives with epilepsy in Nigeria, I always had a connection to mental health advocacy; however, I did not feel the urgency to pursue this actively until I was faced with the idea of killing myself multiple times. For the first 18 years of my life, everything went according to my plan, everything seemed certain, and I felt completely in control of my life. That is until my life took a detour. From being temporarily homeless to dealing with the possibility of being deported back home, I was living with major depression and could not sum up the courage to seek help. For months, I contemplated killing myself, but I also knew I needed to get help.

With courage and shame at the same time, I decided to seek help. I made a call to the health clinic and was told that seeing the psychiatric nurse practitioner was on a walk-in basis only. A week later, I walked to the health clinic and was once again told that I needed to make an appointment. After having to wait a full month before my first appointment with the only psychiatric nurse practitioner on campus, I knew I needed to do something. I needed to draw awareness to the ways in which the school had been complicit in mental health stigmatization unintentionally, but impactfully. I knew I could not be the only student living with depression, so I did some research and found out that mental illness and homelessness are more common than I thought.

From there I started the journey of creating a club devoted to peer support and eradicating mental health stigma. I asked around and was dissuaded because "the school would prefer to avoid isolating a group of people." I persisted and eventually was told to recruit five students and an advisor to become an established club on campus. After a week, I succeeded in recruiting seven members and two advisors and became an established club!

POTENTIAL BARRIERS

The biggest issue we faced was getting the school administration to overcome their fear of liability. Every time a peer-facilitated support group was proposed, we were often met with the question of what to do if a student ever mentioned killing themselves or someone else. This is undeniably an important question, so the club worked with the Suicide Prevention Advisory Board to provide mental health first aid trainings and suicide prevention trainings. Even with trained students, we were always required to have a mental health professional on grounds during our events. This was something we had to live with to make a compromise with the school.

Creating a sustainable program especially at a community college might be the hardest journey you will ever embark upon. Because almost every student has two to three other jobs besides school, it becomes difficult to get students involved in extracurricular activities, especially mental health awareness. Being persistent and showing other students how passionate you are about helping them and other students will help. Free food and drinks will also help!

Another issue a student might face is the feeling of inadequacy. There will be times when no student will show up to the club meetings and there will be times when many students will show up. There are times you will feel like giving up but be patient with yourself. Never be too critical of your work. Give it your best and trust that your best is good enough. I know I enjoyed Therapy Thursdays and I know my fellow students did too. I enjoyed the opportunity of nurturing and being nurtured by the MHAC community. I enjoyed walking my fellow students down to the health clinic to make appointments. These moments kept me going in my fight for mental health awareness on my campus.

LEAN ON ME

Initially developed at MIT in 2016, Lean On Me is a student-run, chapter-based anonymous service that provides text-based emotional support to students 24/7. My involvement with Lean On Me was with a chapter at Boston College (BC). With many students hesitant to ask for help, limited mental health resources on campus, and the stress of being in college, an anytime resource that requires a text for support from trained peers makes a huge difference in addressing some of the barriers to support - including distances to services, time-limited support, and stigma around seeking help.

As a peer supporter for the organization, I attended a comprehensive online training followed by an in-person workshop where I learned additional skills and role-played real and potential text line scenarios with a mental health professional. All supporters are trained in providing non-advice giving support, empathic listening, understanding common issues students face, and self-care. After training, supporters complete initial and ongoing assessments.

Through its technology, Lean On Me creates campus-specific text lines for students that make anonymous both

the texter and the supporter's numbers. By providing a non-judgmental stranger available any time someone wants to reach out, the text line helps students get through challenging times and can help guide them toward additional resources. While Lean On Me is a non-crisis text line, embedded in the technology is also the option for a supporter to connect a user to a crisis line or resources.



- Lean On Me has 7 active chapters across different colleges and is growing!
- Lean On Me has an average wait time of just under 5 minutes and a 4.8/5 average user rating.
- Across its campus chapters, Lean On Me has exchanged over 16,000 messages.



KAILEIGH CONTI

f /lean0n lean0n.me/bc

IT IS CRUCIAL TO
REMEMBER THAT
ONE PERSON
CANNOT FIX EVERY
PROBLEM ALONE.
TEAMING UP WITH
PEERS IS A FANTASTIC
WAY TO PINPOINT
THE BEST WAY TO
CONTRIBUTE TO
YOUR COMMUNITY.

GETTING STARTED

To form a chapter, a group of student leaders came together. Lean On Me suggests having individuals to fill each of the following roles: Chapter Coordinator, Recruitment Coordinator, Training Coordinator, Supporter Coordinator, and Marketing Coordinator.

It is helpful to obtain support from your university, as it can support marketing, and additional training resources. The school may be especially helpful with financial support to help cover the \$2,000 annual chapter fee that includes a marketing package, training manual, online training platform, hotline text service, liability protection in the form of legal infrastructure and insurance coverage, and a back-end panel for monitoring supporters, applicants and conversations. The national organization provides support in working with administrators and addressing legal concerns; however, they also work with students outside of university administrations.

The first step to providing support was recruiting and training supporters. Chapters must launch online applications and evaluate applications with in-person interviews. Once the supporters are selected, chapters assign the online training, conduct in-person workshop training and assign and evaluate post-training assessments. Schools generally train 50-80 students.

We then marketed and launched our text line at BC. Many members were concerned that students would not utilize the service, but we were all pleasantly surprised by the number of people who reached out in the first few weeks.

POTENTIAL BARRIERS

College students looking to start a chapter of Lean On Me, or any new mental health organization, should first research what is already available on their campuses. One of the biggest problems that I have seen is that many different individuals and groups have great ideas and intentions but end up working completely separately because they are so focused on their own projects. Before creating anything new, connect with existing clubs and reach out to other students for their input and ideas. From these conversations you can decide if it is best to start a new organization or to join forces with an existing group. It is crucial to remember that one person cannot fix every problem alone. Teaming up with peers is a fantastic way to pinpoint the best way to contribute to your community.

Additionally, you may want to reach out to administrators or faculty and have an honest conversation about your plans, concerns, and need for assistance. For Lean On Me specifically, you will likely encounter concern from administrators about contracting with a third party to provide mental health resources. The national chapter is available to provide support and guidance on answering these questions.

THE BROWN HALL PROJECT

2018 marked not only 100 years of women at William and Mary, but it was the year we welcomed our first female president, Katherine Rowe, and opened the doors to our new McLeod Tyler Wellness Center, a state-of-the-art resource facility to affirm wellness throughout the community. President Rowe has challenged those dedicated to wellness to take action, by creating new initiatives to affirm wellness throughout campus. Residence halls are the heart and home of William and Mary, and the perfect place to start. The Brown Hall Project was initiated by Residence Life staff who recognized the stress that comes with everyday life, particularly as a college student, and the importance of a safe space to recuperate. William and Mary is known for its aged, small-spaced dorms, that typically house two to three students in a room. Because of this, students seldom

have a personal, safe space to unwind or cool down in times of stress that are quickly accessible.

The Brown Hall Project is a new and innovative project in process at William and Mary that is reconstructing old kitchenettes that were being unused in the dormitories, starting with Brown Hall, into "safe spaces," known as Wellness Rooms. The room will consist of furniture to relax in, along with items to enhance meditation such as aromatherapy supplies, salt lamps, lava lamps, and more. Additionally, the rooms will consist of soft lighting and blackout curtains to create a calming experience. Taking advantage of these spaces is an effort from the William and Mary community, and particularly the Wellness Committee in Residence Life, to bring wellness throughout campus, in creative and accessible ways. The project also hopes to create a similar space outside of residence halls, consisting of sitting rocks, Adirondack chairs, gazebos, as well as with essential herbs and blooms such as lavender in a garden. This project is an effort to make self-care more accessible throughout campus, as well as normalize the need for such structures to help destigmatize mental health, particularly in such a stressful environment.

Aside from a safe space, William and Mary hopes that this room will also be accessible for students as a prayer room, as similar concepts in the Wellness Center have been often used for these purposes. As the Brown Hall Project goes into motion, we are hopeful to expand it to more living spaces, becoming one of the first schools in the nation to have meditation halls in residence halls, and later academic buildings as well.



- These will be the first rooms to introduce therapeutic and massage chairs in a student space.
- William and Mary is one of the only schools in the nation that has "Wellness Rooms" in Residence Halls.
- The colors being used for the spaces are all research-based: teals, grays, and golds.



ANU GOEL @wmreslife

YOUNG ADULTS
AND STUDENTS
ARE THE FUTURE.
A COMMITMENT
TO WELLNESS
PRACTICES AND
MENTAL HEALTH IN
ALL FACETS OF LIFE
AS EARLY AND AS
OFTEN AS POSSIBLE,
IS A DEDICATED
COMMITMENT TO
A SUCCESSFUL AND
HEALTHY FUTURE.

GETTING STARTED

Although often overlooked, Residence Life at William and Mary has filled in many gaps in terms of understanding and providing support for mental health on campus. Residence Life staff work tirelessly to support, accommodate, and direct students who are struggling to resources. As a Residence Life staff member, I was tasked to work with others in Residence Life to create a wellness committee. The Brown Hall Project came to be a program as almost a "happy accident."

A parent of an incoming freshman student voiced concern about the aged structures in the Residence Hall, Brown Hall, and its safety. Upon inspection, staff found that updates were definitely required in order to maintain the safety of students and the building. At the same time, the Wellness Center had just opened its doors and was seeing a lot of success with students using their resources regularly. Residence Life had received a lot of feedback from students who said they did not have a quiet space in residence halls. Inspired by the need for change and the support that students were beginning to find on campus, the Wellness Committee devised to upgrade these spaces into Wellness Rooms by working closely with the Hall Council of the dormitory, a pillar of self-determination at the College. The students and the committee devised a plan for the outdated spaces and how to remodel them into useful and calming spaces for students to use. The Wellness Center was generous with offering materials, research, and support to help promote the project as well. As the idea evolved, it found support throughout the community, including our William & Mary President.

POTENTIAL BARRIERS

The most prominent issue students might face when implementing a similar idea would be finding spaces to start this project. This idea originated from the necessary remodeling and removal of already existing, outdated spaces at William and Mary. The best way students can address this is to research and communicate with campus staff, as well as residents, about the spaces in residence halls, gathering information about usage, availability - and even if code requirements are being met - so if renovations are required, this idea can be a part of the conversation. Additionally, students can look to change the purpose or designation of a space. For example, they could take a dorm room offline, if they are unable to get creative with other spaces.

Another potential barrier would be budget and construction limitations. Due to the lack of code compliance, renovating the space was already a priority with regards to this project, so inspections of a space are a great place to start. Additionally, spreading the costs amongst departments is a way to dispersing the budget requirements. While Residence Life pays for the renovation, the Wellness Center offers materials, furniture, etc. to build the new spaces, and Hall Council (a studentelected group for each residence hall) funds the items in the rooms such as lava lamps, aromatherapy, etc. By rallying campus support, not only can a project like this be made a priority, but several departments can alleviate the burden of funding requirements.

ENDNOTES

- i Chessman, H., & Taylor, M. (2019, August 12). College Student Mental Health and Well-Being: A Survey of Presidents. Retrieved from https://www.higheredtoday.org/2019/08/12/college-student-mental-health-well-survey-college-presidents/
- ii American College Health Association National College Health Assessment II: Undergraduate Student Reference Group Executive Summary. (2019). Retrieved from https://www.acha.org/documents/ncha/NCHA-II_SPRING_2019_UNDERGRADUATE_REFERENCE _GROUP_EXECUTIVE_SUMMARY.pdf
- iii Center for Collegiate Mental Health. (2019, January). 2018 Annual Report (Publication No. STA 19-180).
- iv Ruderman Family Foundation. (2018). The Ruderman White Paper on Mental Health in the Ivy League. Retrieved from: https://rudermanfoundation.org/white_papers/the-ruderman-white-paper-reveals-ivy-league-schools-fail-students-with-mental-illness/
- v National Alliance on Mental Illness (2012). College Students Speak: A Survey Report on Mental Health. Retrieced from: https://www.nami.org/About-NAMI/Publications-Reports/Survey-Reports/College-Students-Speak_A-Survey-Report-on-Mental-H.pdf
- vi Koch, L.C., Mamiseishvili, K. & Swerdlow, N.R. (2016) Integrated postsecondary services and supports for college students with psychiatric disabilities. *Journal of Applied Rehabilitation Counseling* (48).1. 16-51.
- vii Jochman, Joseph C., et al. "Mental Health Outcomes of Discrimination among College Students on a Predominately White Campus: A Prospective Study." Socius 5 (2019): 2378023119842728.
- viii Hackett, R. A., Steptoe, A., & Jackson, S. E. (2019). Sex discrimination and mental health in women: A prospective analysis. *Health Psychology*.
- ix Lipson, S.K., et al. (2019). Gender Minority Mental Health in the U.S.: Results of a National Survey on College Campuses. *American Journal of Preventive Medicine*. (57), 3, 293-301.
- x Goldrick-Rab, S., Richardson, J., Schneider, J., Hernadnex, A, and Cady, C. (2018) Still Hungry and Homeless in College. Retrieved from: http://wihopelab.com/publications/Wisconsin-HOPE-Lab-Still-Hungry-and-Homeless.pdf
- xi Pew Research Center. (2017). 5 facts about student loans. http://www.pewresearch.org/fact-tank/2017/08/24/5-facts-about-student-loans/
- xii U.S. Department of Health & Human Services Office of Women's Health (2018). Sexual assault on college campuses. Retrieved from: https://www.womenshealth.gov/relationships-and-safety/sexual-assault-and-rape/college-sexual-assault
- xiii Ansell, D. I., & Insley, S. E. (2013). Youth peer-to-peer support: A review of the literature. Retrieved from https://gucchdtacenter.georgetown.edu/resources/Webinar%20and%20Audio%20Files/Youth%20Peer%20to%20Peer_pubs%20-%20Literature%20Review%20FINAL.pdf
- xiv National Alliance on Mental Illness (2012). College Students Speak: A Survey Report on Mental Health. Retrieced from: https://www.nami.org/About-NAMI/Publications-Reports/Survey-Reports/College-Students-Speak_A-Survey-Report-on-Mental-H.pdf
- xv National Council on Disability. (2017). Mental Health on College Campuses: Investments, Accommodations Needed to Address Student Needs. https://ncd.gov/sites/default/files/NCD_Mental_Health_Report_508_0.pdf
- xvi Elmore, K., Edelstein, J., & Thomson, L. (2019). Cripping Campus: Disabled Student Activism and Leadership in Disability Cultural Centers in Higher Education. AHEAD National Conference.
- xvii Miami University Students with Disabilities Advisory Council. (2018). Creating a Disability Cultural Center. Retrieved from https://www.slideshare.net/miamisdac/creating-a-disability-cultural-center-86614167?from_action=save xviii Elmore, K., Edelstein, J., & Thomson, L. (2019). Cripping Campus: Disabled Student Activism and Leadership in Disability Cultural Centers in Higher Education. AHEAD National Conference.