

PROTECTING STUDENT MENTAL HEALTH ON COLLEGE CAMPUSES

Report of JED Campus Impact
July 2020



The Jed Foundation

EXECUTIVE SUMMARY

The Jed Foundation (JED) is a nonprofit that protects emotional health and prevents suicide for our nation's teens and young adults. JED partners with high schools and colleges to help assess and strengthen their mental health, substance misuse, and suicide prevention programs and systems.

The aim of **JED Campus**¹ is to help ensure that schools have comprehensive systems, programs, policies, and supports in place in order to prioritize student mental health and create positive systemic change in the campus community. JED Campus is supported by the **Comprehensive Approach to Mental Health Promotion and Suicide Prevention for Colleges and Universities (Comprehensive Approach)**.²

Our evaluation of 56 schools that completed participation in JED Campus from 2014 to 2020 shows evidence of improvement across program, policy, and systems change indicators that support and protect student mental health and prevent suicide, across all domains in the Comprehensive Approach. Among these schools that participated in JED Campus, as compared to their baseline activities, more schools are:

- Integrating mental health into their school's strategic planning activities
- Developing task forces devoted to student mental health with representation from various campus offices including leadership offices
- Improving and scaling training programs for students and faculty/staff members to identify, reach out to, and refer students who might be in distress
- Implementing standardized screenings by health service clinicians for common mental health problems, substance misuse, and suicidal ideation
- Developing and deploying campaigns that de-stigmatize mental health and inform students about campus mental health resources
- Expanding clinical support for students by providing faster and more flexible clinical care to students and ensuring access to 24/7 crisis call or text centers for students in need of immediate help
- Conducting regular environmental scans on campus properties to identify and limit access to potentially lethal means for self-harm, which is empirically linked to fewer student suicides on college campuses

These systems-level changes strengthen the safety net for students on campuses by ensuring that students are gaining life skills, are able to connect to others, and are protected by a system that can provide the mental health support and treatment they need while they lead their lives during college and beyond.

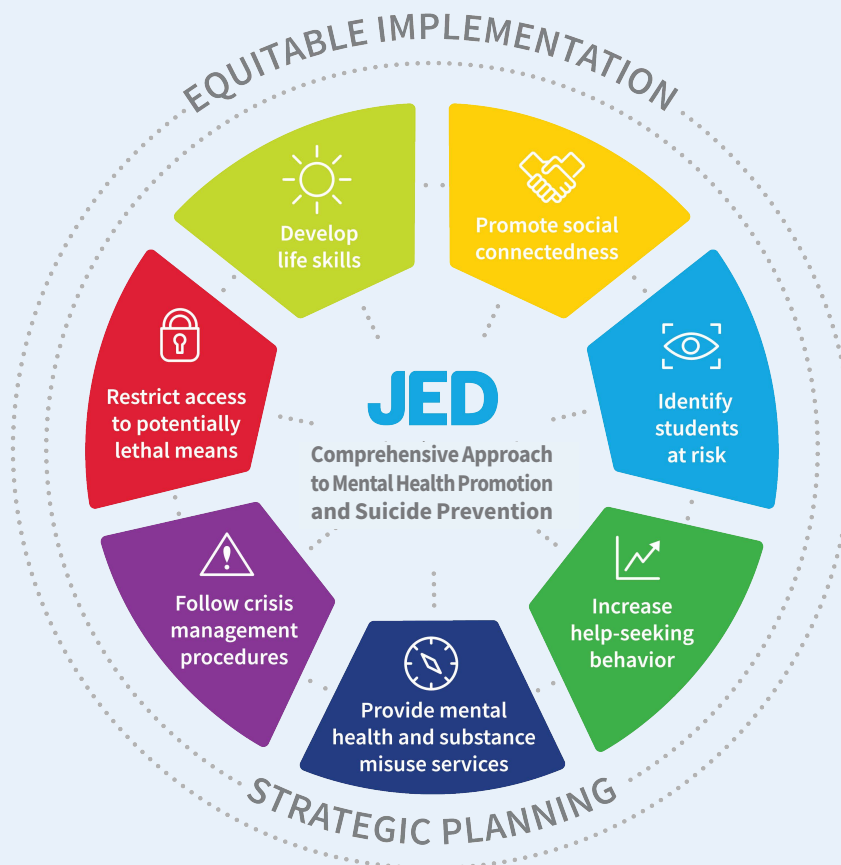
¹<https://www.jedcampus.org/about/>

² <https://www.jedfoundation.org/what-we-do/>

BACKGROUND

JED is a nonprofit that protects emotional health and prevents suicide for our nation's teens and young adults. JED partners with high schools and colleges to help assess and strengthen their mental health, substance misuse, and suicide prevention programs and systems. At JED, we believe in a comprehensive, public health approach to promoting emotional well-being and preventing suicide and serious substance misuse. This means deploying preventative, upstream approaches that increase protective factors and reduce risk factors for mental health challenges and suicide, in addition to ensuring access to high quality care and treatment.

In 1998, Phil and Donna Satow lost their youngest son, Jed, to suicide. Since then, they have worked to understand and prevent suicide among young people. In 2000, the Satows founded JED to launch a blueprint for teen and young adult mental health promotion and suicide prevention. The [Comprehensive Approach](#)³ along with the major college programming initiatives of JED, since its founding, has been supported by a model derived from the published suicide prevention study conducted by the U.S. Air Force⁴. In 2013, JED Campus was launched, incorporating this model, as a structured multi-year college initiative to promote mental health and reduce the risk of substance misuse and suicide.



³ JED's Comprehensive Approach to Mental Health Promotion and Suicide Prevention (2019)

⁴ Knox, K.L., Litts, D.A., Talcott, G.W., Feig, J.C., & Caine, E.D. (2003). Risk of suicide and related adverse outcomes after exposure to a suicide prevention programme in the US Air Force: cohort study. *BMJ*, 327, 1376-1380.

Support for the Comprehensive Approach to Mental Health Promotion and Suicide Prevention

JED's programs are grounded in our Comprehensive Approach, which is divided into seven strategic areas or domains that should be addressed in any community-wide effort to support mental health and limit substance misuse and suicide. This approach built on protective factors and environmental safety measures provides support for early interventions, and strengthens treatment and care in order to save lives.



DEVELOP LIFE SKILLS

Research has shown that promoting students' social and emotional life skills can support mental health and academic achievement.⁵ Some of the life skills that are important to a student's well-being include managing friendships and relationships; exploring identities and values; having productive approaches to problem solving and decision making; identifying and managing emotions; healthy living; and finding life purpose and meaning.

die by suicide did not receive mental health treatment.⁷ Identifying students at risk for mental health problems and/or suicidal behavior is a central pillar of any robust campus suicide prevention and mental health promotion initiative. Preparing "gatekeepers" -- those who interact with students the most such as residence hall staff, academic advisors, faculty and even fellow students to both detect suicide risk and to promote emotional health awareness is vital for these people to be able to recognize and refer a student who might be in distress.



PROMOTE SOCIAL CONNECTEDNESS

Research has shown that loneliness and isolation are significant risk factors for mental health problems and/or suicidal behavior.⁶ Therefore, supportive social relationships and feeling connected to campus, family and friends are protective factors that can help lower risk of suicide and other mental health challenges.



INCREASE HELP-SEEKING BEHAVIOR

Students are more likely to reach out to their friends or family about distressing feelings than mental health professionals. Many students who need help may be reluctant or unsure of how to seek it out. Obstacles to help-seeking include lack of awareness of mental health services, skepticism about the effectiveness of treatment, prejudices associated with mental illness, and uncertainty about costs or insurance coverage. Campuses should engage in a variety of activities designed to address these and other locally identified barriers to increase the likelihood that a student in need will seek help.



IDENTIFY STUDENTS AT RISK

Early intervention is critical for preventing suicide. Research shows that a vast majority of students who

⁵Durlak, J.A., Weissberg, R.P., Dymnicki, A.B., Taylor, & Schellinger, K.B. (2011). The Impact of Enhancing Students' Social and Emotional Learning: A Meta-Analysis of School-Based Universal Interventions. *Child Development*, 82(1), 405-432. <https://srcd.onlinelibrary.wiley.com/doi/abs/10.1111/j.1467-8624.2010.01564.x>

⁶Mental Health Foundation. (2010). *The Lonely Society*. London, UK.

⁷Drum, D. J., Brownson, C., Denmark, A. B., & Smith, S. E. (2009). New data on the nature of suicidal crises in college students: Shifting the paradigm. *Professional Psychology: Research and Practice*, 40(3), 213-222.



PROVIDE MENTAL HEALTH AND SUBSTANCE MISUSE SERVICES

Many students who need mental health care do not receive it. It is essential to offer accessible, consistent and high-quality mental health services to students, especially those who are at high risk of suicide. To make mental health and substance misuse care more comprehensive, approaches to care should include adequate staffing levels and staff diversity reflective of the student population, flexibility in treatment approaches, and clinic hours that are reflective of student schedules. The length of treatment is often limited in college clinics. Therefore, it is important that campus mental health services can assist students in finding off-campus resources that can provide long-term care if needed.



FOLLOW CRISIS MANAGEMENT PROCEDURES

Crisis management consists of having campus-wide emergency and postvention protocols, policies relevant to students experiencing mental health or substance-related crises, and support and clinical services for students experiencing an acute crisis. The campus should have access to a well-publicized 24/7 crisis phone and/or chat line either through campus resources or local/national services. There should be a process in place

to share information (as legally appropriate) between local emergency rooms and school health and/or counseling services.



RESTRICT ACCESS TO POTENTIALLY LETHAL MEANS

It has been well established that if the means to self-harm are removed or limited in an environment, it can prevent suicide and even limit accidental deaths. This is called “means restriction.” Limiting students’ access to weapons, poisonous chemicals and rooftops, windows or other high places are all means restriction activities. Each campus should do an environmental scan for potential access to lethal or dangerous means.



STRATEGIC PLANNING

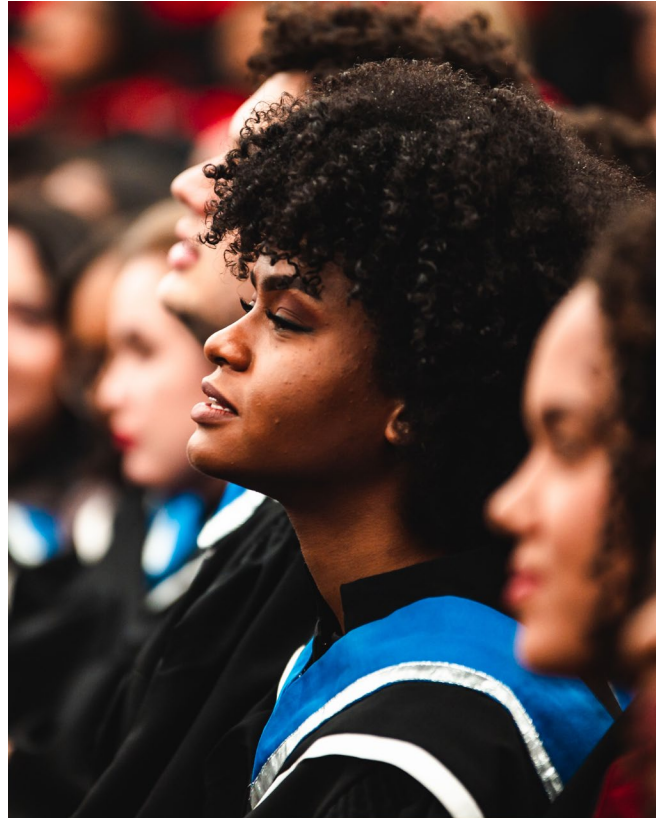
Strategic Planning is an overarching critical step encompassing all seven domains to ensure that sustainable change is successfully implemented in a higher education setting. Lessons learned from the first few years of JED Campus highlighted the need for the strategic planning process, particularly for schools to create a team of administrators, faculty, staff, and students from across departments at the institution to oversee the effort and ensure institutional support to implement the recommendations provided by the program.

JED CAMPUS PROGRAM

JED Campus is the signature program of JED designed to guide colleges and universities through a collaborative process of comprehensive systems, program, policy assessment and development with customized support to build upon existing student mental health, substance misuse and suicide prevention efforts.

JED Campus is a structured intervention that provides schools with targeted recommendations to promote mental health and prevent suicide among students. JED Campus schools participate in a four-year strategic collaboration with JED. During that time, we work together to assess and enhance efforts currently underway and focused on supporting positive, lasting, systemic change in the campus community related to suicide prevention and mental health promotion. All JED Campus schools receive individualized assessments, strategic plans, and ongoing guidance and support from JED to help ensure system change efforts. While executing the strategic plan, JED Campuses are provided with ongoing support and technical assistance from a dedicated JED Campus Advisor. JED Campuses also have the opportunity to share information and resources with other schools in the program through a Learning Community, which includes webinars, newsletters, an online resource center, and a discussion forum.

This work is done with the belief that appropriate system-level changes will bring about an increase in positive mental health attitudes and behaviors among students, which together will result in students being provided with and accessing care at a greater capacity. Increased access to help and support, along with



strengthened attitudes and behaviors, will help improve students' mental health (or mitigate the impact of problems related to students' mental health), which will contribute to better retention and graduation rates for participating schools and improved mental health and life outcomes for students.

JED CAMPUS EVALUATION

The JED Campus evaluation uses several tools to measure and track progress, mapping to the Comprehensive Approach as well as broader student- and campus-level outcomes:

Pre-and-Post Assessments

Comprehensive surveys tracking schools' current programs, services, and policies to support student mental health and reduce risks for substance misuse and suicide. These surveys are administered at baseline and program completion.

Healthy Minds Study (HMS) Survey

Comprehensive student survey on mental health and service utilization administered at baseline and program completion.

Annual Data Survey

Yearly surveys that assess student incident data (hospitalizations, deaths), service utilization data (student use of counseling and health services), retention and graduation data.

Strategic Plan Analysis

A progress tracker of each school's strategic plans designed to support student mental health, using a tiered rubric for each action step mapped onto the Comprehensive Approach.

This report shares the first phase of impact data from the JED Campus program, examining data from the JED Campus pre-and-post assessments. Additional data analyses examining how JED Campus program participation impacts student mental health outcomes are underway and will serve as the second phase of the JED Campus program evaluation. As of May 2020, 56 schools that have completed the JED Campus program have completed pre-and-post assessments. These schools represent a total of 654,144 college students. These schools represent a mix of two- and four-year public and private universities from across the United States.

RESULTS

Results from the first set of completed JED Campuses show statistically significant improvements across several key indicators regarding school policies, programs, and systems that support student mental health on college campuses. These significant improvements map to strategic planning activities, as well as the following Comprehensive Approach domains: identifying students at risk, providing mental health and substance misuse services, and restrict access to potentially lethal means. Additional improvements are documented throughout this section.



STRATEGIC PLANNING

Upon completion of JED Campus, more schools have a strategic plan in place for student emotional health (65% versus 26% at baseline), as well as task forces devoted to improving student emotional health, with participation from campus leadership offices (95% versus 64% at baseline).⁸ Creating (or forming) a collaborative mental health leadership team of administrators, faculty, and students on campuses, including participation from the school's senior leadership, ensures that there is adequate institutional support to implement and sustain the recommendations that are given.

Schools are also more likely to report that student emotional health is viewed as a campus-wide issue that lives beyond the walls of their Counseling Center, involving significant input from multiple campus departments and stakeholders (76% versus 57% at baseline).

Campus Spotlight: Montana State University

"We have a Committee for Mental Health that meets annually. We have a separate committee for substance use issues, but these issues are also certainly discussed on the Committee for Mental Health as well. We have a Mental Health Resources & Campus Protocol that outlines preventive, clinical, and postvention services, which is based on the JED Comprehensive Approach. We have worked with the Board of Regents and the entire Montana University System to create some strategic planning to enhance mental health services, gatekeeper training, screening, and means reduction at all campuses in the Montana University System, and our plan is in alignment with this vision."

⁸Beginning in 2017, JED Campus schools have co-created a strategic plan with JED Campus Advisors. This integration ensures that all (100%) JED Campuses currently have a strategic plan in place for student emotional health.



STRATEGIC PLANNING cont.

Campus Spotlight: Binghamton University

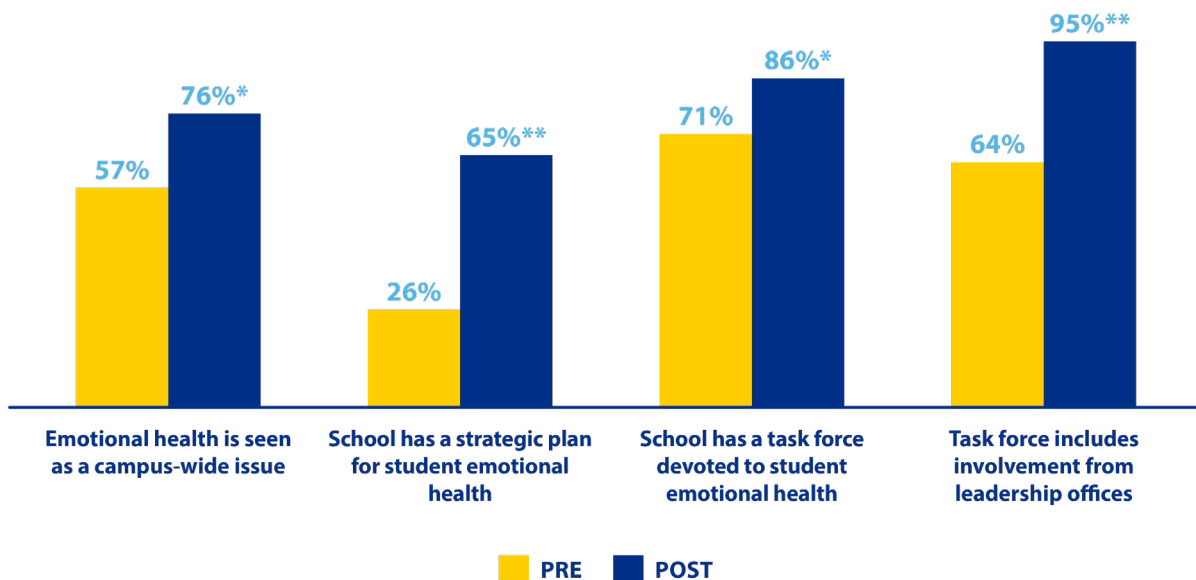
“During the time of participation in JED Campus, Binghamton University has been moving towards viewing mental health as a campus-wide issue. Health and Counseling, which includes the Counseling Center, carries significant responsibility for emotional well-being on campus, however a focus on mental health is becoming more integrated throughout Student Affairs and the broader campus and seen as a responsibility of all stakeholders. This was clearly evident at a recent meeting of campus leaders, during a discussion of end of the semester student stress. Various groups from all Divisions shared initiatives they were engaged in to support emotional/mental well-being of students as well as faculty/staff. From the Division of Student Affairs, the Dean of Students, Health Promotion and Prevention Services, and Services for Students with Disabilities are departments outside of Counseling involved in supporting the mental health of students.

Since beginning the JED consultation process, the Office of Health Promotion and Prevention (HPP) Services has been created with a full time Director to integrate health prevention and promotion across multiple areas such as physical health, mental health, Alcohol and Other Drugs, and interpersonal violence. HPP hired a full time coordinator to focus on mental health promotion and outreach. This new staff member replaces a .5 FTE position that had previously been housed in the Counseling Center.”

Changes Made to Support Mental Health on Campus:

Before and After JED Campus

STRATEGIC PLANNING



*Pre/post findings are statistically significant, $P < .05$

**Pre/post findings are statistically significant, $P < .01$



DEVELOP LIFE SKILLS

While many schools reported having several life skills programs in place at the start of JED Campus, these programs have continued to develop and expand their reach over time in JED Campus – particularly programs that address links between students’ physical health, emotional health, and academic success (91% versus 80% at baseline), programs that teach bystander training (94% versus 83% at baseline), and programs that support resilience, identification and regulation of emotions,

and mindfulness (67% versus 61% at baseline). One of the goals of JED Campus is to encourage schools to be more intentional and strategic about the timing, coordination, and implementation of these programs.

Campus Spotlight: Santa Clara University

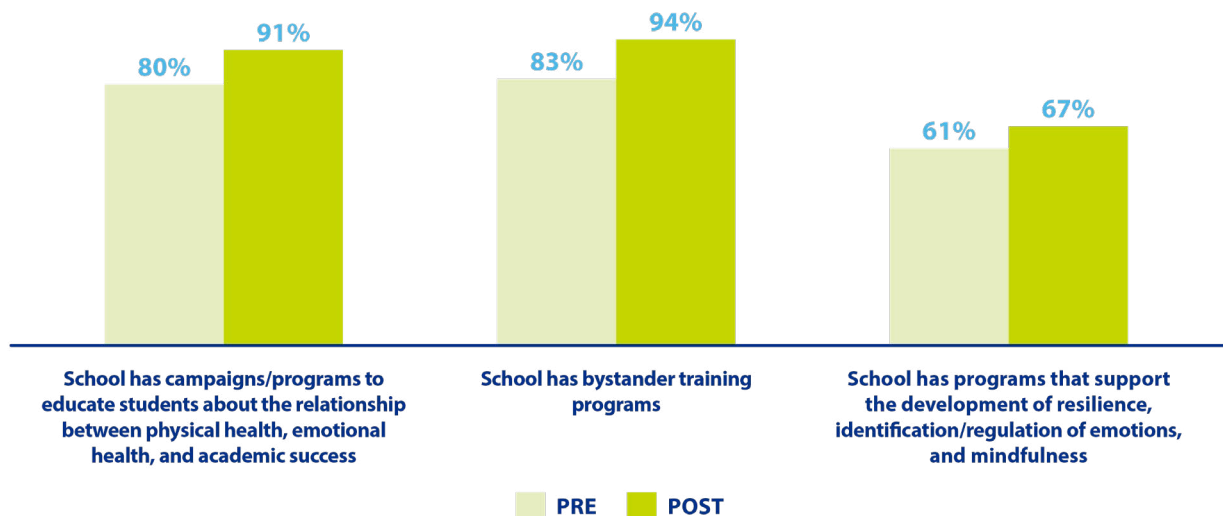
“We know there is a strong relationship between physical and emotional health and academic success. To support a balanced, healthy lifestyle, beginning in the fall, we made all fitness center classes free to students. Over 700 students used their free fitness passes 1,843 times in the fall quarter, a 92% increase in use over last fall.”

Campus Spotlight: University of Notre Dame

“In 2017, the Notre Dame Alumni Association completed a months-long strategic planning process for young alumni and current student engagement. As part of the execution of that plan, the Alumni Association, in partnership with the Senior Class Council, introduced a new large-scale, life skills event on Feb. 11th, 2018. Life Beyond the ND Bubble is designed specifically for graduating seniors who will be leaving Notre Dame at the conclusion of the academic year. It aims to prepare them for life in the ‘real world’ through a variety of expert speakers and useful resources.”

Changes Made to Support Mental Health on Campus: Before and After JED Campus

DEVELOP LIFE SKILLS





PROMOTE SOCIAL CONNECTEDNESS

Upon completion of JED Campus, 100% of schools have programs or activities to promote tolerance and inclusiveness on campus (versus 96% at baseline). Among JED Campus schools that had systems/strategies in place to help to identify and support disconnected or isolated students, more schools engage in Resident Advisor training and dorm programming focused on connecting to isolated students (93% versus 85% at baseline) and Academic Advisors who are trained to reach out to disconnected or isolated students (65% versus 57% at baseline).

Campus Spotlight: Saint Francis College

“Our SOAR (Summer Orientation/Academic Registration) programs, required of every Freshman, introduces the theme of connectedness at several levels: student and family to university, student to Academic Advisor, and student to student. Our three day orientation for students in late August continues this theme, but further develops relationship building, social development, and awareness of key developmental issues, which is reflected through programming throughout the year. It also presents numerous educational programs on important first-year issues such as acquaintance rape, dating violence, Alcohol, Tobacco, and Other Drug abuse, adjustment issues, mental health issues, time management, etc. Throughout the Orientation, first-year students are mentored by upper-class Orientation Counselors, Resident Assistants, and Peer Ministers. All freshmen are required to meet with first-year advisors during this orientation.”

Campus Spotlight: Kent State University

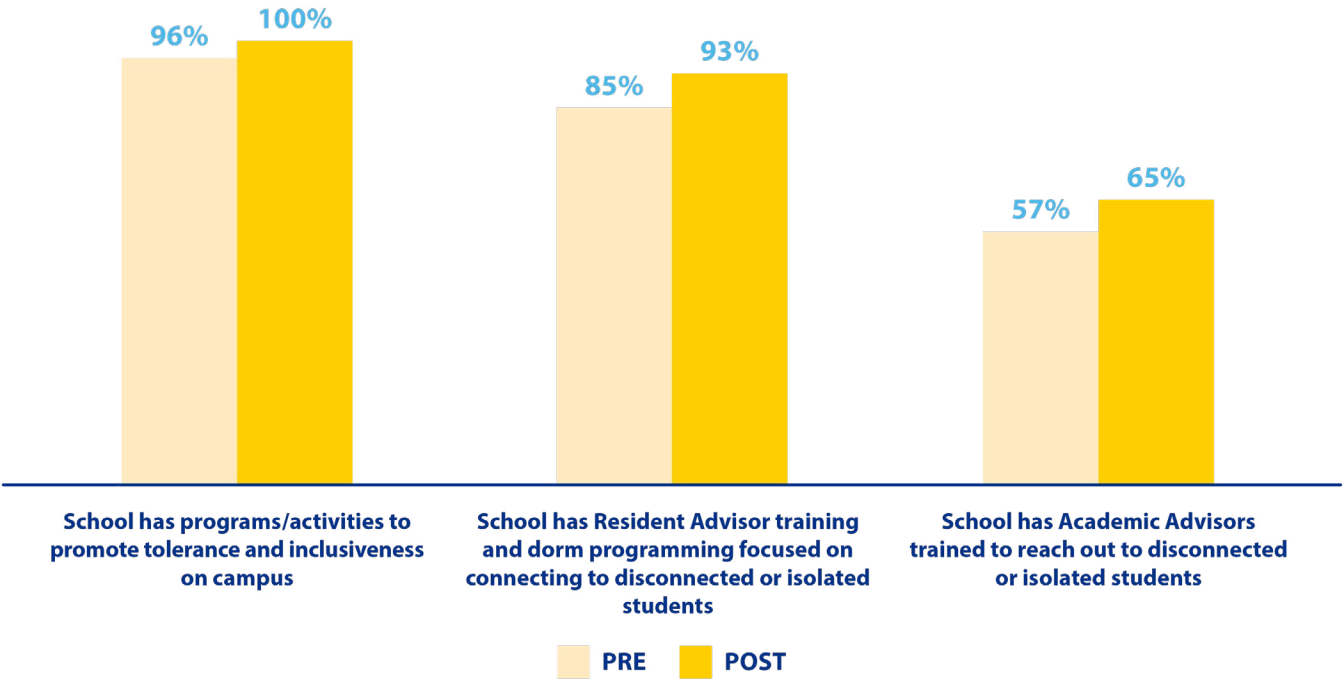
“Kent State’s regional campuses created targeted outreach for student populations based on the culture of their campuses. This includes LGBTQ+ students, non-traditional students that are parents, veterans, and students that have been impacted by the opioid epidemic in the state. Increased attention is now being paid to supporting international students as well, including programming about what mental wellness is at their temporary housing during evening hours. Mental health services offices also increased their visibility and outreach to students including non-clinical programs such as Coloring for Calmness and Stressbuster Week. The Dogs on Campus program, which brings teams of therapy dogs to campus for students, is an unexpected avenue of student connectedness. Students often end up talking to each other or in small groups around a dog about their own pets and make a connection with one another.”



PROMOTE SOCIAL CONNECTEDNESS cont.

Changes Made to Support Mental Health on Campus: Before and After JED Campus

PROMOTE SOCIAL CONNECTEDNESS





IDENTIFY STUDENTS AT RISK

More schools are identifying students at risk by implementing standardized screenings for common mental health problems and suicidal ideation by health service clinicians at primary care visits (81% versus 59% at baseline); offering more gatekeeper training programs that train faculty and staff to identify students at-risk and refer them to counseling services (95% versus 82% at baseline); and making screening tools, which help students better identify their mental health symptoms in order to reach out for counseling services, more readily available (96% versus 76% at baseline).

Campus Spotlight: Fort Hays State University

“Our campus initiative resulting from JED Campus created, implemented or modified institutional policies and practices to improve the university’s environment and enhance our mental health and student adjustment services. For instance, the committee looked for ways to identify risks and begin dealing with them early. The health form that incoming students complete for the Campus Health Center now includes questions about mental health and alcohol and drug histories. Students who self-identify as having mild or moderate mental health issues get an email outlining services available on campus, and campus care providers follow that up by helping students develop self-care plans.”

Campus Spotlight: Binghamton University

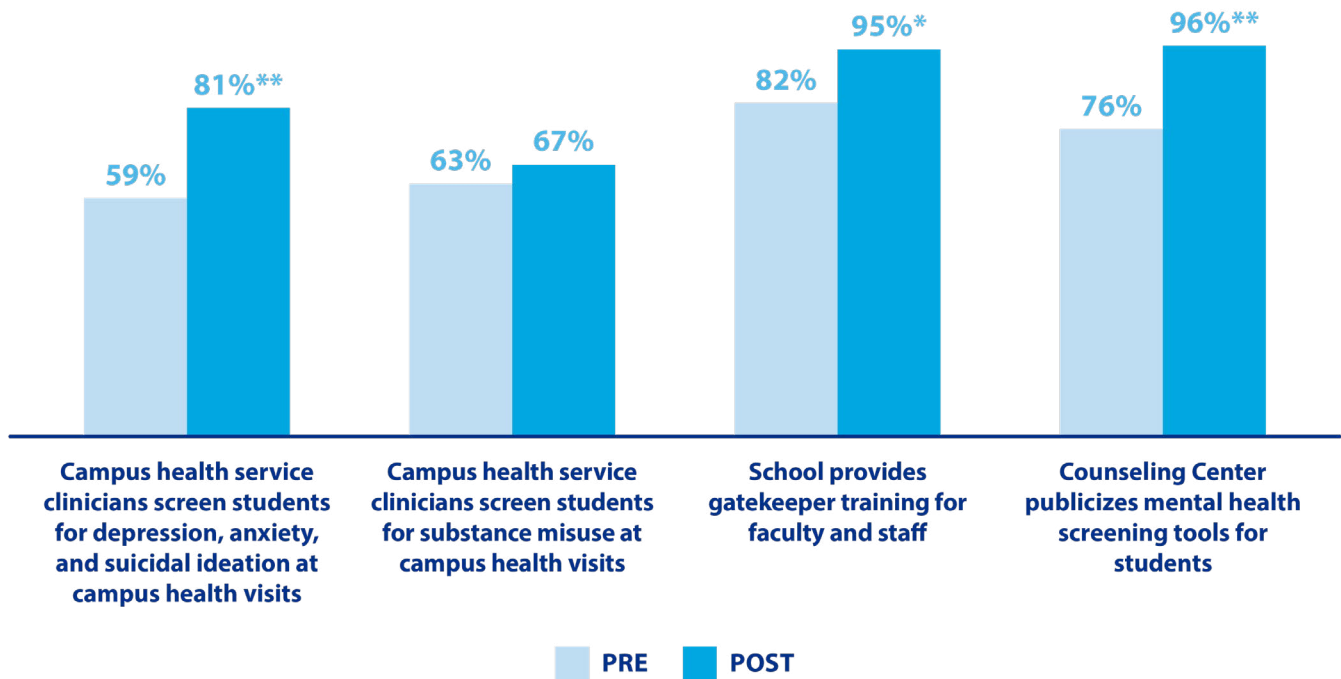
“Binghamton University has several programs that encourage students to understand when and how it is appropriate to refer their friends to the University Counseling Center. Several outreach programs include information about identifying warning signs and symptoms of suicidality, depression, and anxiety. In an effort to ensure at-risk students are identified, a robust staff in the Dean of Students office actively communicates with families regarding mental health and substance use concerns when appropriate.”



IDENTIFY STUDENTS AT RISK cont.

Changes Made to Support Mental Health on Campus: Before and After JED Campus

IDENTIFY STUDENTS AT RISK



*Pre/post findings are statistically significant, $P < .05$

**Pre/post findings are statistically significant, $P < .01$



INCREASE HELP-SEEKING BEHAVIOR

More schools are also implementing campaigns on campus to destigmatize mental health (87% versus 76% at baseline) and campaigns to inform students about campus resources for emotional support (87% versus 81% at baseline).

Campus Spotlight: Virginia Commonwealth University

"Syllabus statement:

1. At VCU, we acknowledge that you juggle many roles, including being a student. While your academics are a top priority, we know that sometimes finding balance among all the roles you have can be a challenge, especially when dealing with unexpected life events like illness or the loss of a loved one.

2. Please take care of yourself. The best time to practice self-care and manage stress is when you aren't overwhelmed or in distress. You can visit thewell.vcu.edu to learn more about ways to practice self-care or find upcoming programs you can attend.

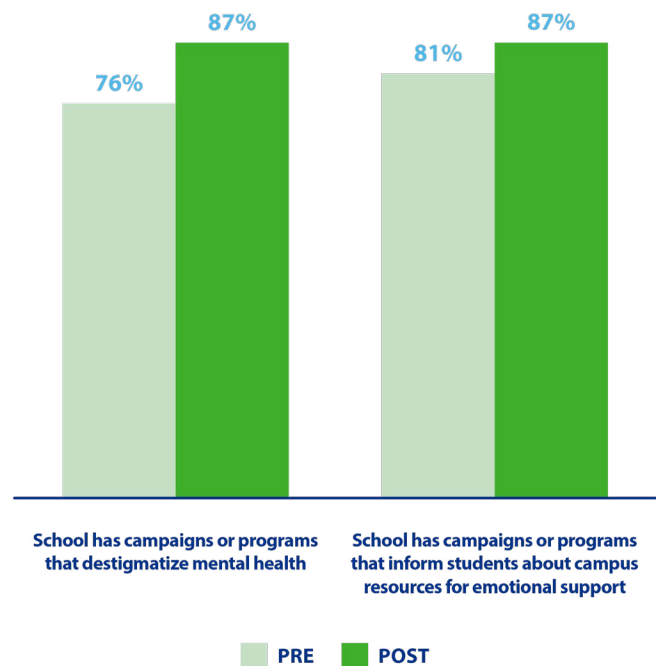
3. Please take care of each other. If you are concerned about one of your classmates, please share that concern with me or through students.vcu.edu/find-resources/dean-of-students/ so that we can connect that student to additional support.

4. Please ask for help from me, [insert program specific supports here] or from one of the many resources here to help. Being proactive about help-seeking can make sure that you receive the support that you need before your academics are negatively impacted.

5. There are many resources at VCU and in the surrounding community available to assist you with non-academic concerns that you might have, so that you can be successful academically. Visit jed.vcu.edu/resources to learn more about how and when to access these resources."

Changes Made to Support Mental Health on Campus: Before and After JED Campus

INCREASE HELP-SEEKING BEHAVIOR





PROVIDE MENTAL HEALTH AND SUBSTANCE MISUSE SERVICES

Improvements are being made by many schools to ensure that Counseling Centers are providing more support, including providing clear information on Counseling Center webpages on how to respond to mental health emergencies (96% vs. 89% at baseline); improving staff to student ratios (43% have “ideal” staff to student ratios at 1:1000, versus 30% at baseline); adding clinical services offered outside of regular center hours (89% versus 65% at baseline); and providing walk-in hours (87% versus 80% at baseline).

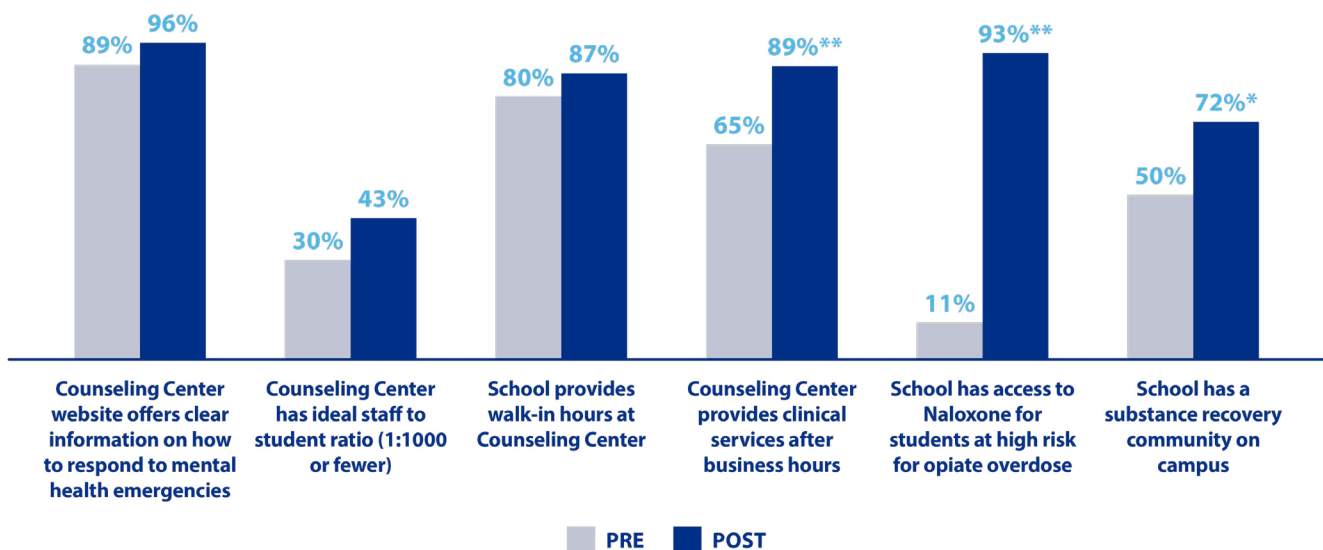
More campuses have access to Naloxone for students deemed high-risk of opiate overdose (93% versus 11% at baseline). There is also an increase in the number of schools that have a recovery community on campus to support students with substance misuse challenges (72% versus 50% at baseline).

Campus Spotlight: University of Minnesota

“As a result of our partnership with the JED Campus program, every department across campus has a designated mental health liaison that provides students with easier access to support in places on campus where they feel most comfortable. Additionally, students who present to the Counseling Center are now seen within 24-48 hours in order to more quickly service students who present with urgent concerns.”

Changes Made to Support Mental Health on Campus: Before and After JED Campus

PROVIDE MENTAL HEALTH AND SUBSTANCE MISUSE SERVICES



*Pre/post findings are statistically significant, $P < .05$

**Pre/post findings are statistically significant, $P < .01$



FOLLOW CRISIS MANAGEMENT PROCEDURES

Nearly all JED Campus participating schools (98%) report having a 24/7 crisis line for college students in emergency situations, up from 90% at baseline. Additionally, nearly all schools (98%) have an “at risk” or “Behavioral Intervention” team on their campus to receive and respond to reports of students of concern (versus 96% at baseline). More schools have a postvention protocol (91% versus 80% at baseline), which puts in place resources and interventions that provide emotional support, crisis intervention, and assistance to those affected by a student death on campus.

Campus Spotlight: Stony Brook University

“We created our new Red Book ([stonybrook.edu/redbook](https://www.stonybrook.edu/redbook)). It includes signs to look for and how to respond to student situations including emotional distress, disruptive behavior, medical emergency, or other concern that requires support or intervention.

Our new CARE Team (<https://www.stonybrook.edu/commcms/studentaffairs/care/>) addresses student behavior that may pose a threat to health and safety or disrupts University activity. The CARE Team responds to reports of these concerns through an individualized, coordinated, and thoughtful process that is intended to gather relevant information and intervene when appropriate.”

Campus Spotlight: University of Pennsylvania

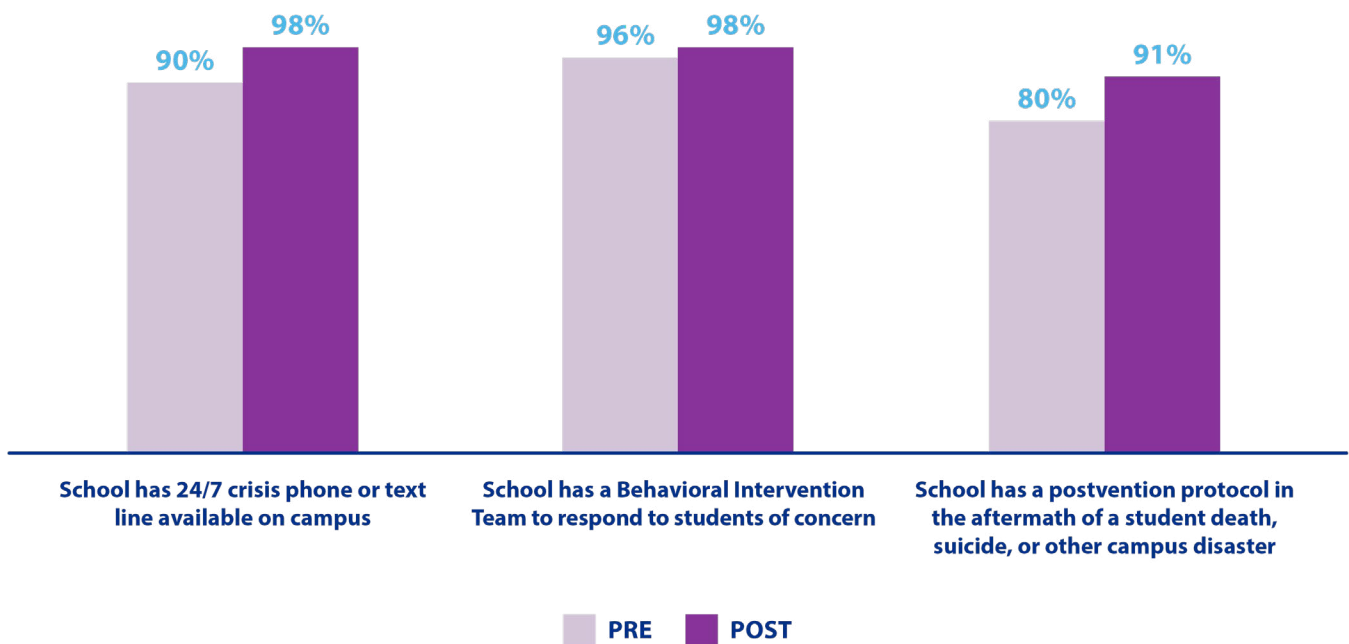
“As a result of our partnership with the JED Campus program, we have implemented a case management system, enhanced our triage and referral systems, decreased wait times for first appointments, and increased staff to more quickly respond to and support our students. We have also instituted a 24/7 on-call service for students to access care in the event of an emergency. One of our students created an app that provides students with on-campus mental health resources 24/7.”



FOLLOW CRISIS MANAGEMENT PROCEDURES^{cont.}

Changes Made to Support Mental Health on Campus: Before and After JED Campus

FOLLOW CRISIS MANAGEMENT PROCEDURES





RESTRICT ACCESS TO POTENTIALLY LETHAL MEANS

As the most empirically supported measure to prevent suicide⁹, it is essential to implement means restriction activities on college campuses. As compared to baseline, more JED Campuses have conducted a yearly campus environmental scan to identify potential access to lethal means (70% versus 27%). Environmental scans require planning and coordination with various campus offices. An improvement of this magnitude shows great promise.

More schools have installed breakaway closet rods in residence halls (20% versus 4% at baseline). More JED Campuses also have prescription drug collection or return programs on campus (45% versus 29%) to limit accessibility to prescription medication misuse or overdose. These and other means restriction measures are critical to ensuring safety to students and preventing suicides on college campuses.

Campus Spotlight: University of California, Davis

“JED has helped us to develop a Campus Action Plan with deliverables that are specifically tailored to our needs and our campus. In efforts to jump start our means restriction process, we’ve identified hot spot areas on campus and will be installing permanent signage with Crisis Text Line information. Our first phase and priority includes all parking structures as data from campus partners (including students, UC Davis Police and the Crisis Response Team) all highlight parking structures as a high-risk, hot spot area for UC Davis. Over the summer, we plan to refine our means restriction instrument to implement and conduct the environmental scan. We use a grassroots approach in building campus relationships in order to build a small team of key partners all who are very interested and eager to help with this scan when the time comes.”

Campus Spotlight: Pennsylvania College of Technology

“Penn College, in partnership with the Lycoming County District Attorney’s Office, is pleased to announce the placement of a pill collection box in the office of College Health Services. With the heroin epidemic that we have seen not only in Lycoming County but across the nation impacting the lives of many, we know that many turn to heroin after abusing prescription medication. We also know that having unused medication in homes creates a danger for young children and presents easy access to people thinking about self-harm. By providing a safe place to dispose of unused medication, we are providing a service to our College Community, while reducing risk of accidental or intentional overdose.”

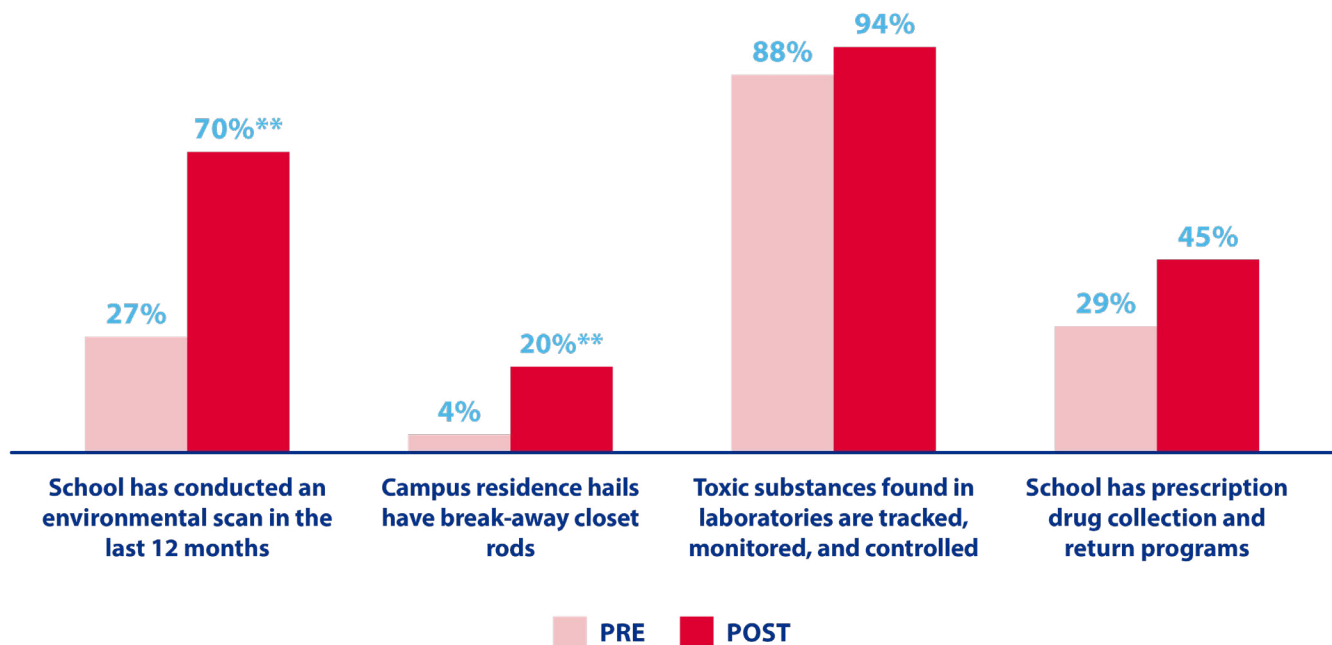
⁹<https://www.hsph.harvard.edu/means-matter/means-matter/saves-lives/>



RESTRICT ACCESS TO POTENTIALLY LETHAL MEANS cont.

Changes Made to Support Mental Health on Campus: Before and After JED Campus

RESTRICT ACCESS TO POTENTIALLY LETHAL MEANS



**Pre/post findings are statistically significant, $P < .01$

CONCLUSION

Overall, this data from the first group of colleges and universities to complete the JED Campus program is very promising to the field of college mental health and suicide prevention. Future analyses will consider the impact of these systems-level changes on student mental health indicators. As more schools progress through JED Campus, this data set will grow considerably and we will continue to report on systems and student level outcomes.

These systems-level changes strengthen the safety net for students on campuses by ensuring that students are gaining life skills, are able to connect to others, are protected by a system that has mechanisms in place to help notice students who are at-risk, and can provide the mental health support and treatment that they need while they lead their lives during their time in college and beyond.

APPENDIX

Comprehensive Approach Domain	Program/Service Aimed to Address Students' Mental Health Needs	% of schools doing this work: N=56 schools		P-value (statistical significance) * $P<.05$, $P<.01$ **
		PRE	POST	
STRATEGIC PLANNING	Emotional health is seen as a campus-wide issue with significant involvement from multiple departments and stakeholders	57%	76% ↑	$P=.03^*$
	School has a strategic plan for student emotional health	26%	65% ↑	$P<.001^{**}$
	School has a task force devoted to student emotional health	71%	86% ↑	$P=.05^*$
	Task force includes involvement from leadership offices	64%	95% ↑	$P<.001^{**}$
DEVELOP LIFE SKILLS	School has campaigns or programs to educate students about the relationship between physical health, emotional health, and academic success	80%	91%	$P=.09$
	School has bystander training programs	83%	94%	$P=.06$
	School has programs that support the development of resilience, identification/regulation of emotions, and mindfulness	61%	67%	$P=.51$
PROMOTE SOCIAL CONNECTEDNESS	School has programs or activities to promote tolerance and inclusiveness on campus	96%	100%	$P=.13$
	School has Resident Advisor training and dorm programming focused on connecting to disconnected or isolated students	85%	93%	$P=.17$
	School has Academic Advisors trained to reach out to disconnected or isolated students	57%	65%	$P=.38$

IDENTIFY STUDENTS AT RISK	Campus health service clinicians screen students for depression, anxiety, and suicidal ideation at campus health visits	59%	81% ↑	$P<.001^{**}$
	Campus health service clinicians screen students for substance misuse at campus health visits	63%	67%	$P=.66$
	School provides gatekeeper training programs for staff and faculty	82%	95% ↑	$P=.04^*$
	Counseling Center publicizes mental health screening tools for students	76%	96% ↑	$P=.002^{**}$
INCREASE HELP-SEEKING BEHAVIOR	School has campaigns or programs that destigmatize mental health	76%	87%	$P=.13$
	School has campaigns or programs that inform students about campus resources for emotional support	81%	87%	$P=.39$
PROVIDE MENTAL HEALTH AND SUBSTANCE MISUSE SERVICES	Counseling Center website offers clear information on how to respond to mental health emergencies	89%	96%	$P=.16$
	Counseling Center has ideal staff to student ratio (1:1000 or fewer)	30%	43%	$P=.15$
	School provides walk-in hours at Counseling Center	80%	87%	$P=.32$
	Counseling Center provides clinical services after business hours	65%	89% ↑	$P=.002^{**}$
	School has access to Naloxone for students at high risk of opiate overdose	11%	93% ↑	$P<.001^{**}$
	School has a substance recovery community on campus	50%	72% ↑	$P<.02^*$

FOLLOW CRISIS MANAGEMENT PROCEDURES	School has 24/7 crisis phone or text line available on campus	90%	98%	$P=.07$
	School has a Behavioral Intervention Team to respond to students of concern	96%	98%	$P=1.0$
	School has a postvention protocol in the aftermath of a student death, suicide, or other campus disaster	80%	91%	$P=.54$
RESTRICT ACCESS TO POTENTIALLY LETHAL MEANS	School has conducted a campus environmental scan for potential access to lethal means in the past 12 months	27%	70% ↑	$P<.001^{**}$
	Campus residence halls have break-away closet rods to limit risk of hanging	4%	20% ↑	$P=.008^{**}$
	Toxic substances found in school laboratories are tracked, monitored and controlled	88%	94%	$P=.27$
	School has prescription drug collection and return programs on campus	29%	45%	$P=.08$

Note: Green arrow indicates statistically significant change from pre-to-post



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