JED’s POV on Campus Mental Health and Well-being in Fall 2021 Reopening

As the 2021-2022 academic year rapidly approaches, there are mixed feelings among students, families, administrators, faculty, and staff about returning to campus. While some are enthusiastic about reconnecting in person and getting back to live classroom instruction and social connectedness, others have lingering questions, anxieties, and doubt about whether a full return to campus is in the best interest of everyone’s health and safety. Both the Centers for Disease Control and Prevention (CDC) and the American College Health Association (ACHA) have published guidelines and considerations for higher education administrators to weigh as their campuses re-open. As the leading nonprofit organization in protecting emotional health and preventing suicide among teens and young adults, The Jed Foundation (JED) would like to offer the following guidance based on our comprehensive public health framework.

Some Important Contextual Issues
Let’s first consider the cumulative public health and societal woes that our nation has endured over the last year and a half and the heavy physical, emotional, and economic tolls that they have had and continue to have on so many individuals and communities. At front and center has been COVID-19. To date, CDC data indicate that there have been over 33 million confirmed cases and 602,401 lives lost, making the U.S. the nation with the highest number of cases and deaths globally. Moreover, the pandemic has taken a disproportionately heavier toll in the U.S. on Black, Indigenous, and People of Color (BIPOC) due to inequities in health care, systemic racism, and other social determinants of health and well-being. In December 2020, our nation breathed a collective sigh of relief as the first vaccines against COVID-19 were administered. Presently, 70% of individuals 18 years or older have received at least one dose, and 61% of that age group is fully vaccinated. However, racial disparities exist in vaccine administrations, with BIPOC communities receiving fewer vaccines compared to their share of COVID-related deaths. Although vaccines have provided the long awaited “light at the end of the tunnel,” there are still questions about how long they will be protective and whether they will be effective against variants. Furthermore, a sizable number of individuals in the country has declined to get vaccinated, resulting in concern about whether we will reach herd immunity as a nation. We are not “out of the woods” yet with COVID-19, and campus administrators continue to consider campus measures to ensure health and safety.
In addition to battling a pandemic, the U.S. has confronted other societal challenges. Police brutality and violence against Black Americans has been graphically demonstrated in the media accompanied by protests and demonstrations across the nation. Many people are facing the harsh reality that such brutality has occurred throughout this country’s history, while others were keenly aware that these injustices have existed as they lived with this reality in their own lives. Videos, such as the one showing the horrific murder of George Floyd by police in Minneapolis, MN, have given Americans a sobering reminder to these realities. Furthermore, xenophobia negatively impacted many Asian and Asian American and Pacific Islander communities who are being blamed wrongfully for COVID-19 and subjected to violence and discrimination. The financial impact of the virus also has been devastating, with millions of people losing their jobs and needing to apply for unemployment. The impact of the November 2020 election cycle, arguably one of the most polarizing and divisive in our nation’s history cannot be underestimated. Finally, the unprecedented number of gun violence incidents and mass shootings have increased fears about safety amidst current debates about downsizing police forces. These and other issues have created a perfect storm that has taken a toll on so many. As students, faculty, and staff return in the fall, institutions of higher education must be prepared to support their campus community members as they work through experiences of anxiety, pain, and trauma to move toward healing.

Data collected by the American College Health Association (ACHA) and the Healthy Minds Study, Hope Center for College, Community, and Justice, and the National Student Clearinghouse Research Center show that students, especially BIPOC and minoritized students, are coming to or returning to campuses with increased feelings and experiences of anxiety, depression, suicidal ideation, financial stress, and basic needs insecurities than before the pandemic. Within this context, we offer considerations for campuses to support the mental health and well-being of their communities during the fall 2021 reopening. Our recommendations are organized by the domains of JED's Comprehensive Approach. They are not meant to be exhaustive and they may not work on every campus.

**Engage in Strategic Planning through an Equitable Implementation Lens**

Employing a comprehensive, public health approach and engaging in an active and dynamic strategic planning process is the most important first step that higher education institutions can take to facilitate the success of their mental health, substance misuse prevention, and suicide prevention efforts. Equally critical is that the strategic planning process be developed with an Equitable Implementation lens to ensure that the needs of students who are minoritized and/or underserved due to societal and structural inequities and school-specific community demographics are considered deliberately and intentionally. This process will also require that all members of the campus community collaborate and strategize to ensure student success, well-being, and safety.

A recent survey of 433 college and university presidents suggests that they are poised to prioritize the mental health and well-being of their communities. When asked to rate their
level of concerns on a variety of issues, the following were top priorities: 1) mental health of students; 2) disproportionate impact on students from disadvantaged backgrounds; 3) mental health of employees; 4) accelerated rates of student attrition; 5) physical health of students; and 6) physical health of employees. Two examples of how campus leaders’ concerns are being put into action can be seen with recent announcements made by the University System of Georgia and the State University of New York. The top rated issues were followed very closely by concerns related to both short-term and long-term financial viability of their respective schools. Institutions of higher education have been particularly hit hard financially due to the pandemic with significant decreases in student enrollment.

Campus re-openings will be like no other in history, and several key questions still loom. Will campuses continue to offer hybrid models of instruction? Will students and their families pay the same tuition for remote learning compared to in-person instruction? Will vaccines be required and is it legal to do so? What happens if the vaccines are not effective against COVID-19 variants? Can/should masks and testing be required? Will plans need to be adjusted in the middle of the term should cases, deaths, and/or resistant variants rise? All of these questions and more must be carefully considered.

We cannot emphasize enough the importance of collecting data (e.g., surveys, focus groups) and taking time to carefully analyze the results in order to fully understand students’ needs and to ensure that decisions are data-driven. Moreover, planning should be inclusive of graduate/professional student needs. A recent report prepared jointly by the Council of Graduate Schools and JED offers evidence-informed recommendations for campuses for graduate student populations. Also, as international borders re-open, campuses should carefully plan for the resumption of domestic students going abroad and international students returning to U.S. campuses. Finally, faculty, staff, and their families have been through the same challenges as students, therefore, it is critical that strategic plans also be developed and enacted to support their health and well-being.

As articulated by one college professor, it is critical that campuses understand the links between stress, trauma, and learning and how to incorporate a trauma-informed approach that will help in creating healing communities. An American Psychological Association (APA) article Life After COVID-19: Making Space for Growth references the theory of post-traumatic growth and suggests people can emerge from trauma even stronger. It is important for schools to create spaces that nurture this post-traumatic growth and plant the seeds for positive change. A great example of this strategy can be found at Appalachian State University, where a Racial Trauma Healing Space was dedicated to the needs of Black students on campus. A helpful resource for learning more about trauma and a trauma-informed approach is the Substance Abuse and Mental Health Services Administration (SAMHSA) Concept of Trauma and Guidance for a Trauma-Informed Approach. JED recommends that campuses actively engage diverse student populations to create a trauma-informed approach to strategies for programs and services. The Equity in Mental Health
Framework and Toolkit developed by JED and The Steve Fund can provide some concrete ideas and action steps to follow.

Students, faculty, and staff are inundated with constantly changing updates and information regarding plans for the fall. It is important for communication with the campus community to be intentional, clear, timely, and relevant. In addition, leadership qualities of curiosity, flexibility, risk tolerance, and ability to focus on what is most important enhance community trust in processes and decisions. An essential element of creating and sustaining a culture of caring on campus must involve communications that include mental health language and resources. The American Council on Education published a guide entitled Mental Health, Higher Education, and COVID-19 with strategies for leaders to support campus well-being through consistent and clear communication.

**Develop Life Skills**
Supporting student life skills education is a valuable strategy for helping students cope with stressors, make wise lifestyle choices, foster resilience, and achieve academic success. According to the most recent available data collected by ACHA and the Healthy Minds Study before and during the pandemic, levels of resilience have increased during the pandemic. Conversely, rates of positive psychological “flourishing” have decreased in correlation with a sharp rise in mental health challenges that may impede academic performance.

For many students, the transition back to in-person classes may be challenging. A few of our JED Campus schools are offering more in-depth new student orientation programs as well as an orientation for those students who have not been on campus for in-person learning. Landmark College, College of Charleston, and Montana State University offer examples of these programs. JED continues to recommend planning workshops and programs for the fall in a variety of formats that follow public health guidelines. Schools would do well to offer opportunities for synchronous, live programming, and asynchronous online modules that students can view on demand.

Other important life skills programming that campuses might offer could focus on social connections, gratitude, compassion for self and others, empathy, processing grief, and mindfulness. JED Campuses like Kent State University, Massachusetts Institute of Technology and Wake Forest University have highlighted these skills and others on their new comprehensive resource pages. It may be beneficial to include specific resources for faculty and staff as they are also facing unexpected challenges and stressors. Vanderbilt University Medical Center created a Resilience Toolkit for faculty and staff with a variety of content addressing attitudes, skill sets, and lifestyle. Finally, given the cumulative toll of the loss of life due to the pandemic and the rise in acts of violence, campuses would be well advised to offer a variety of grief support groups, programs, and other services.
Promote Social Connectedness
Supportive social relationships and feeling connected to the campus and local community, family, and friends are protective factors that can help lower risk for suicide. However, we know that feelings of loneliness have been exacerbated by physical distancing during the last year and a half, and the effects of social isolation are being felt widely. It is more important than ever for faculty, staff, and families to ask about loneliness and isolation, identify warning signs, reach out to offer support, and/or communicate their concerns.

JED recommends that campuses use peer-to-peer programs/services wherever possible and appropriate. For example, campuses with residence halls could train RAs and/or other peer advisors to increase regular check-ins and social connectedness programming for their students. Robert Morris University’s Peer Outreach Program, Thrive, has excellent examples of virtual outreach and engagement via Instagram. The University of Washington, Seattle, offers a great example of a guidebook for supporting student well-being. Campuses may also give special attention to programming for graduate/professional students given their differing developmental and other needs compared to undergraduates.

Student activism may be another way for students to connect and may serve as a way to foster healing in the midst of racism and other social injustices. We encourage campuses to work with their students to ensure that appropriate supports and structures are in place for students to do this type of expression. We know that activism can be emotionally exhausting, therefore, it will be critical to provide a variety of support resources, such as forums and/or support groups, to allow space for students to process their experiences. JED, in collaboration with The Steve Fund, offered a webinar on the topic of supporting the mental health of students speaking up against racial injustice.

Identify Students at Risk
As students’ mental and physical health needs continue to grow, institutions must expand the reach and strength of their response systems. Among undergraduate students, schools may have to plan for two first-year classes this fall, as many rising sophomores may be stepping on to the physical campus for the first time. This may be the case for many graduate and professional students as well.

Training faculty, academic advisors, support staff, residence hall staff, and fellow students continues to be essential. Faculty members in particular may often be the only connection a student will have with their college or university, especially if they are completing courses online. Campuses should evaluate existing training programs and choose ones that work best for their communities. JED’s You Can Help a Student and You Can Help a Friend training programs are available to all JED Campuses and for purchase for institutions not participating in the program. The Suicide Prevention Resource Center (SPRC) also has a list of online and in-person training programs to which institutions can refer. In addition, consider creating tailored supplemental resources for your campus community, such as red folder
initiatives for faculty and staff, and sample syllabi statements regarding campus and community mental health resources.

If your campus is looking for new trainings, follow-up campaigns, and/or other materials, JED, the American Foundation for Suicide Prevention (AFSP), and the Ad Council recently created new content for our award-winning Seize the Awkward campaign. This new content can be found on the Seize the Awkward Instagram and can be easily shared through your institutional or departmental pages. One video focuses on how to have meaningful conversations about the impact of racial trauma on mental health and how to help BIPOC students feel seen and heard. JED also recommends that institutions promote resources for parents and families to recognize warning signs, respond, and refer students with up-to-date information about support services. Information should be featured prominently throughout an institution's website, not just on the counseling or wellness center webpages.

Physical health screenings will have a renewed importance in detecting COVID-19 symptoms. JED recommends that campus health services integrate mental health, substance misuse, and suicidal ideation screening questions into those processes. These questions will provide useful data about the underlying mental health or substance misuse challenges students may be experiencing and can allow the clinician to facilitate quick referrals to services on or off campus. Additionally, online screening tools should be promoted to students as resources for checking in on their mental health. Last summer, Mental Health America released statistics showing increased usage of their online screening tool, the highest rates in six years of operating.

Increase Help-Seeking Behavior
Some students who are experiencing emotional distress are often reluctant to reach out for help due to skepticism about the effectiveness of treatment and/or stigma associated with mental illness, among other things. In a report by the Healthy Minds Network and ACHA on the Impact of COVID-19 on College Student Well-Being, 60% of students reported the COVID-19 pandemic has increased their difficulty in accessing mental health care.

Campuses may consider tailoring mental health newsletters or campaigns to include pandemic-relevant issues. For example, in her Pittsburgh UnpackU weekly newsletters, Dr. Carla Chugani points out how to practice acceptance and non-judgment in dealing with how personal choices affect others, such as wearing or not wearing a mask. It is critical that reliable information about available resources and referrals, including cost of treatment and insurance coverage, be accessible. There should be clear communication to the campus community about how services will be provided this fall, as some campuses may opt for more in-person sessions and/or than telehealth appointments. The University of Pittsburgh’s Counseling Center website is a strong example of how to display all available services.
JED partnered with the MTV Entertainment Group to create a new campaign in late spring 2021 called **Mental Health is Health**. We recommend that campuses include links to this new online resource hub in their self-help resources on counseling and wellness websites. The website includes guided meditations, videos, and resources for a variety of mental health symptoms and also tips for helping a friend who may be struggling.

**Provide Substance Abuse and Mental Health Services**
Whenever possible, institutions should offer accessible, consistent, and high-quality mental health services to students. To make mental health and substance misuse care more comprehensive, approaches to care should include adequate staffing levels, staff diversity reflective of the student population, flexibility in treatment approaches, and strong partnerships with off-campus providers that offer supplementary and/or specialized services. We are still learning the impact of telehealth on student utilization and access to services across regulatory boundaries, institutional type, and other variables.

One positive outcome of the pandemic is that tele-mental health services have opened the doors to so many opportunities and are likely to remain as treatment options for students. Many institutions have created “Let’s Tele-Talk” drop-in hours that were strategically placed across campus for brief, walk-in consultations with clinicians. Campus counseling and wellness centers should ensure that their websites are updated with their current service models, scopes of care, virtual offerings, and relevant resources. Goucher College’s Student Counseling Center and Pacific Lutheran University’s Counseling, Health, and Wellness Services websites are strong examples of relaying pertinent information. While there is not complete agreement or clarity on the interstate jurisdictional issues of the practice of mental health services, some headway is being made recently with the Psychology Interjurisdictional Compact (PSYPACT) and the National Association of Social Workers.

As students return this fall, it is important for counseling and health staff to be proactive in addressing current events around racial injustice by posting statements on their websites, offering diverse mental health resources, and being transparent about on-going diversity, equity, and inclusion training. Schools like the University of Washington Seattle, Wake Forest University, University of Southern California, and UC Davis offer examples of websites with statements and resources.

Care for the caregiver is even more critical during these times, as there is high potential for vicarious traumatization, video-conferencing fatigue, and burnout. Further suggestions might include frequent de-briefings with peers, additional training, and regular in-services focused on relieving clinician stress. Also, we know that this is a challenging time for faculty and other staff members who are tasked with processing their own experiences regarding the impact of the pandemic and racial injustices while also supporting the needs of students. JED recommends campuses practice collective care by providing resources that can help faculty and staff cultivate their own self-care routines. Sky Campus Happiness, Ten Percent Happier,
and Mind Share Partners are just some of the many organizations that are providing holistic wellness tools to staff and faculty.

**Follow Crisis Management Procedures**

Clear and accessible emergency and postvention protocols help guide faculty, staff, and families when a student is struggling. They provide readily accessible emergency information, including crisis phone numbers, chat, and text services. Roger Williams University links their Students of Concern reporting form on their Parent/Family webpage. Santa Clara University informs parents of how to recognize and help students in distress as part of their culture of care. Moreover, faculty and staff should be clear, especially working with students virtually, about how to find crisis resources. A strong example is Stonehill College’s Red Folder initiative, designed as a guide to help faculty, staff, and community members recognize, respond, and refer distressed students. JED continues to emphasize the importance of a postvention protocol and recommends reviewing how the protocol is applied if/when a campus experiences a death due to COVID-19, suicide, and/or any other type of tragedy. Reference the HEMHA Postvention Guide to revisit or create institutional policies, like UC Davis’ Postvention Guide.

In light of the trauma created by police brutality and other forms of violence, and efforts calling for defunding of police, schools that utilize campus or other local police to transport students to hospital emergency rooms for mental health reasons may want to assess whether that continues to be the best approach. Police intervention in these highly sensitive situations has the potential to trigger distressed students. Working with the police to encourage the use of non-uniformed officers and unmarked cars for this purpose has proven to be helpful. Partnerships with local mobile crisis units and behavioral health care providers could be another alternative depending on your community’s resources and how effective those services are considering response times, cultural competency, and experience with student mental health. SAMHSA provides a comprehensive guide on best practices in mental health crisis care services that can be useful to evaluate services in the community. Recently, Johns Hopkins University and Washington University in St. Louis announced new initiatives that will deploy mental health clinicians instead of campus police in responding to mental health crises. With both approaches, the primary goal is to help address the growing need for a more nuanced public health response to behavioral and mental health crises.

**Restrict Access to Potentially Lethal Means**

As the most empirically supported measure to prevent suicide, it is essential to implement means restriction activities on college campuses. Given that campuses have not been as populated physically in the past year and a half, this area may have fallen off the radar of campus administrators. One of the most effective strategies we have learned from our work at JED is for a campus to conduct an annual environmental scan to identify and mitigate access to potentially lethal means. As many campuses plan to re-open this fall, the summer could be an opportune time to complete an environmental scan and to add mental health
crisis signage in identified locations. Campus security personnel should continue to monitor and restrict access to rooftops, windows, other high places, and toxic substances.

JED recommends that campuses promote resources for means restriction in the home to families and students. The Harvard University T. H. Chan School of Public Health “Means Matter” Campaign includes recommendations concerning firearms, medication storage and disposal, and substance misuse. It is also important to note the strong correlation between access to firearms and suicide, as there has been a significant increase in firearms sales during the COVID-19 pandemic. Consider partnering with local resources to provide firearm safety locks or storage to students, especially on campuses where firearms are not prohibited. Educate students and their families about means’ safety practices. The Live On Utah Suicide Prevention Coalition has an excellent website with campaign materials that could be useful to your campus.

**Final Word**
The JED Higher Education team hopes that these resources, recommendations, and considerations prove helpful to your campus. We encourage you to share in our learning community any strategies you are using on your campus that are promising in aiding your community in navigating these often distressing and unpredictable times. Thank you for your dedication and compassion in supporting your students’ emotional and psychological well-being.