

Overview of Student Mental Wellness

Friday, February 22, 2019



Trends in National Mental Health: Suicide

From 1999-2016, the total national suicide rate increased 28% from 10.5 to 13.4 per 100,000.

- The suicide rate among males remained nearly four times higher (21.3 per 100,000 in 2016) than among females (6.0 per 100,000 in 2016).
 - Among females, the suicide rate was highest for those age 45-54 (10.3 per 100,000).
 - Among males, the suicide rate was highest for those age 65 and older (32.3 per 100,000).

*All data from the National Institute of Mental Health



Trends in National Mental Health: All Anxiety Disorders

An estimated 19.1% of U.S. adults had any anxiety disorder in the past year. The prevalence was higher for females (23.4%) than for males (14.3%).

An estimated 31.1% of U.S. adults experience any anxiety disorder at some time in their lives.

*All data from the National Institute of Mental Health



Trends in National Mental Health: Major Depression

An estimated 16.2 million U.S. adults (6.7% of the population) had at least one major depressive episode in the past year.

- The prevalence of a major depressive episode was higher among adult females (8.5%) compared to males (4.8%).
- The prevalence of adults with a major depressive episode was highest among individuals age 18-25 (10.9%).

*All data from the National Institute of Mental Health



Trends in Student Mental Health

In the last 30 days have you:	UK	National
Felt things were hopeless	11.0%	10.6%
Felt overwhelming anxiety	17.0%	13.7%
Felt very lonely	13.0%	13.4%
Felt so depressed it was difficult to function	7.0%	8.2%
Felt overwhelmed by all you had to do	15.0%	16.1%
Seriously considered suicide	1.0%	2.0%

SOURCES:

American College Health Association- National College Health Assessment (ACHA-NCA-II) Undergraduate Student Reference Group Data Report- Fall 2017 American College Health Association- National College Health Assessment (ACHA-NCA-II) Institutional Data Report- Fall 2017



Counseling Center Assessment of Psychological Symptoms (CCAPS): Students who Visit Counseling Centers



*X Axis is a scale where 0 equates to "not like me at all" and 4 equates to "extremely like me."



UK Counseling Center: UK Student Utilization Trends



*There has been a 64% increase in full-time staff in the UK Counseling Center during the same time period.



UK Resources for Students

- UK Counseling Center
- Community of Concern
- Dean of Students
- UK Behavioral Health Services





UK Counseling Center



Tiered services range from:

- Individual therapy
- Support groups
- Informal drop-in consultations
- Resilience workshops
- Biofeedback

Wrap-around phone consultations are available when the UK Counseling Center is closed (weekends, holiday breaks and weather delays).

Students indicating that they are in crisis **are seen for triage on the same day.**



Community of Concern Office

The Community of Concern is a multidisciplinary team that reviews and assesses serious risks and mental health concerns.

The Office manages all behavior alerts, which predominantly concern firstyear students.

Referrals can come from anyone.





Dean of Students



In addition to an academic alert system, we have a behavioral alert system that is embedded within the campus culture.

For serious issues, the Dean of Students Office takes a multidisciplinary approach in close partnership with the Community of Concern.



UK Behavioral Health Services

UK Behavioral Health Services provides care for a spectrum of needs:

- Existing psychological conditions
- New or unexpected psychological concerns
- Acute need for psychiatric care

Students can make an appointment to see a board certified psychiatrist or schedule online through myUK.

These services are covered by the health fee that full-time students pay.





Intentionally Increasing Awareness



Orientation and First-Year Awareness

- K-Week
- UK 101

Training and Support

- Faculty and staff
- Residence Hall and Greek Life staff
- Off-campus advisors
- Student leaders

Public Relations and Strategic Communication

- More intentional marketing of services, such as digital signage
- Content directed at key audiences
 - Students
 - Parents
 - Faculty and staff



Next Steps

Immediate

- Create a task force to assess current state and make recommendations
- Implement and continuously evaluate communication strategy
- Assess services and coordination across units

Long-term

- Understand how student mental health is evolving
- Evaluate processes for mental health surveillance
- Identify state-of-the-art best practices for monitoring mental health and delivering seamless service
- Develop long-term action steps and evaluation processes





Questions?