



INVESTING IN STUDENT MENTAL HEALTH

Opportunities & Benefits for College Leadership

**PREPARED BY THE HEALTHY MINDS NETWORK
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One Dupont Circle NW
Washington, DC 20036

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Colleges and universities need to address the mental health of students on their campuses. Poor mental health hinders students' academic success; untreated mental health issues may lead to lower GPAs, discontinuous enrollment, and too often, lapses in enrollment. An institution's investment in student mental health is important for the social, educational, and economic well-being of students, their campuses, and broader society. Investing time and resources in student mental health can result in academic and economic benefits for an institution and society.

College presidents profiled in this report demonstrate some of the ways campus leaders can take action:

1. Speak out about mental health—reduce stigmas and help students feel that it is normal to express mental health concerns and seek help.
2. Pursue partnerships to ensure a campus-wide, comprehensive approach to mental health care, promotion, and prevention.
3. Invest in making mental health services and programs accessible, affordable, and tailored to the needs of diverse students.
4. Listen and respond to student needs.

This brief uses empirical evidence from college student populations and examples from college presidents to examine how higher education leadership can advocate for and invest in student mental health. The rise and prevalence of mental health disorders and their detrimental effects on academic outcomes are why addressing student mental health is important for the academic missions and economic well-being of institutions.

To assist campus leaders in researching and advocating for additional investments in student mental health, Healthy Minds at the University of Michigan and Boston University has created a simple calculator for estimating the economic benefits. The online return on investment (ROI) tool (<http://healthymindsnetwork.org/research/roi-calculator>) has parameters that can be customized with the institution's:

- Enrollment size
- Approximate institutional drop-out rate
- Approximate per student tuition rate

These parameters are plugged into the automated ROI tool, which estimates the expected return on new investments in student mental health, such as treatment services or preventive programs.



INTRODUCTION

Student mental health is a growing issue on campuses. In a 2017 *Chronicle of Higher Education* survey, presidents and student affairs leaders listed student mental health as their number one concern.¹ And with good reason: data from the national Healthy Minds Study (HMS) and others reveal a high and rising prevalence of depression, anxiety, eating disorders, suicidality, and other concerns in student populations over the past decade.² HMS data show that approximately one in three students meet criteria for a clinically significant mental health problem (depression, anxiety, eating disorder, or self-injury)—this translates to nearly 7 million students nationwide.

Campuses can be instrumental in the prevention and early treatment of mental health disorders. The ability of colleges and universities to intervene is important for a student's health as well as the social, educational, and economic well-being of students, communities, and our broader society.

An institution's focus on student mental health benefits both its academic mission and its economic well-being. Research documents the impact of untreated mental health issues on GPA, enrollment discontinuity, and dropping out.^{3,4} Resources and programs directed at student mental health directly improve students' well-being and can also benefit colleges, universities, and society at large by enhancing student persistence.

DID YOU KNOW THAT...?

- Most mental health disorders emerge by age 25.⁵
- The earlier treatment is received, the better the lifetime outcomes.⁶
- Suicide is the second leading cause of death among college students.⁷

The college years are a critical time to intervene to save lives and reduce the negative effects of mental illness on lifetime educational attainment, social relationships, earnings, and more.⁸⁻¹¹

STUDENT RETENTION AND MENTAL HEALTH: WHAT THE RESEARCH SAYS

Higher education leaders, scholars, and administrators have given less attention to student mental health than to other comparable factors known to affect college student retention, including financial stress, social connectedness, sense of belonging, and academic preparedness.¹²

The annual Healthy Minds Study² considers the relationships between student mental health and academic outcomes such as GPA and retention. Results have shown that across all types of campuses, students with mental health problems were twice as likely to leave an institution without graduating. This result holds even after controlling for prior academic record and other student characteristics.³

A longitudinal study of dropout rates among students with low GPAs (<3.0) found that a quarter of students (25 percent) who exhibited symptoms of a mental health problem dropped out, while less than 10 percent (9 percent) of students without mental health problems did so.³

Campus administrators often use low GPA in the previous semester to identify students at risk of dropping out. Yet, low GPA alone would identify only 11 percent of students who would eventually drop out, while using low GPA *and* mental health problems would identify 30 percent of students who would withdraw.³ These results suggest that efforts to identify students who are likely to withdraw would be more effective if based on the combination of low GPA and mental health symptoms.

The College Life Study examined the relationship between mental health problems and discontinuous enrollment (a gap in enrollment of one or more semesters or quarters). It found that mental health problems predicted discontinuity: students who experienced depressive symptoms or received a diagnosis of depression in college were more likely to stop out.⁴

In sum, research suggests that improving student mental health can improve academic performance, persistence, and graduation rates.^{3,4} Thus, investing in student mental health makes good academic and economic sense for an institution.

WHY SHOULD COLLEGE AND UNIVERSITY LEADERS PRIORITIZE STUDENT MENTAL HEALTH?

Mental health is something that affects all students on campus. Mental health disorders impact a large and growing share of students.

A student who is struggling with mental health may struggle academically. Students suffering from symptoms of mental health disorders are at risk of lower GPA, discontinuous enrollment, and possibly dropping out.

Focusing on student mental health benefits an institution's academic mission and its economic well-being.



THE ECONOMIC CASE FOR INVESTING IN STUDENTS' MENTAL HEALTH

The connection between mental health issues and student retention has implications for the economic well-being of students and institutions alike. Specifically, the negative effects of mental health problems on student retention suggest that institutional investments in student mental health are likely to generate both increased tuition revenues for institutions and higher earnings for students who attain a college degree.

The Return on Investment Calculator is an online tool that can be used to explore the economic benefits of investing in student mental health.

<http://healthymindsnetwork.org/research/roi-calculator>

Calculate your institution's return on investment

To help campus leaders research and advocate for additional investments in student mental health, we have created a simple calculator for estimating the economic benefits. The online return on investment (ROI) tool has parameters that can be customized with institutional details, including:

- Population size
- Retention rate
- Prevalence of depression

Using these parameters, the ROI tool estimates the expected return on a new investment in student mental health, such as treatment services or preventive programs. These ROI estimates show the tuition dollars retained as a result of averting mental health-related drop-outs. Many campuses participate in the Healthy

Minds Study or other tools to assess the mental health needs of the student population and then combine these data with the ROI tool to understand the economic returns to the university from specific mental health investments.

Imagine a program that would provide mental health care for 500 more depressed students in a year; this could mean hiring a handful of new clinicians at a counseling center. The cost to provide counseling to these students would be no more than \$500,000 (\$1,000 is a generous estimate of treatment cost per student).

Based on economic research, we know that such a program would yield an estimated \$1 million in additional tuition revenue for the institution (by averting student drop outs) and over \$2 million in lifetime economic productivity for the students (by avoiding reductions in future earnings).³ Thus, the return on the institution's investment in mental health services—or in preventive programs with comparable effectiveness—is estimated to be \$500,000 for the institution and at least \$1.5 million for society at large.

HOW COLLEGE AND UNIVERSITY LEADERS ARE MENTAL HEALTH ADVOCATES

Given the importance and value of addressing student mental health, what actions might leaders consider at their institutions? Several college presidents are excellent examples of mental health advocates. Drawing from cases across three types of postsecondary institutions, we share recommendations for action based on best practices in the field of suicide prevention and mental health promotion.¹³

Some presidents openly share their personal mental health experiences, a proven strategy for reducing stigma and encouraging help-seeking.¹⁴⁻¹⁷ [Santa Ono, president of the University of British Columbia](#) and past president of the University of Cincinnati, has spoken openly about his history of depression and attempted suicide. At high-profile events and on social media,¹⁸ he has shared his struggles as a high-achieving student who battled depression, saying, “someone was there for me to help me [...] with medication and also seeing a professional to help me through very dark times in my life. There's light at the end of the tunnel.”

Ono's discussion of his own use of medication and therapy has encouraged others to seek help, and he has ensured access to free counseling for students at his institutions. [Sacramento State President Robert Nelsen](#) and his wife also have spoken openly about losing their son to suicide,¹⁹ and they have partnered with Sacramento State on suicide prevention initiatives such as Send Silence Packing.²⁰

“We are preparing our students for life and in order for them to make the most of their intellectual strengths and their education, they have to be as healthy as they can possibly be...both mentally and physically.”

**President Paula Johnson,
Wellesley College**

Ono and the Nelsens provide compelling testimonies about the value of seeking help. Efforts like theirs to normalize mental health struggles and help-seeking are particularly important given that about 50 percent of students believe that people think less of someone who has received mental health treatment.²

In addition to sharing personal stories, presidents are providing leadership on and investing resources in student mental health and wellness. [Wellesley College President Paula A. Johnson](#) spoke at a national forum about the critical role of campus leadership in prioritizing student mental health and integrating health care delivery and health promotion efforts.²¹ At Wellesley, a small (2,350 students), private, highly residential, women's liberal arts college located west of Boston, Johnson charges campus leaders with ensuring that student mental health is addressed



Sacramento State

across campus, in residence halls, on athletic fields, and in classrooms. For example, mental health is now included in the Wellesley curriculum through a popular first-year writing course. Johnson embraces a public health approach and emphasizes addressing barriers to care for underserved student populations.

The University of Texas at Austin (UT) is a large (51,331 enrollment), selective, primarily nonresidential, public university. **UT President Gregory L. Fenves** has a holistic approach to student well-being. He attended to campus culture, which included a focus on fostering an inclusive climate for diverse student populations and a willingness to take a hard look at data on sexual assaults, pledging that “no voice is too quiet to listen to. No story of abuse is too minor to ignore. No truth is too uncomfortable to face.”²²

To create a campus where seeking help is the norm, he enlarged and permanently funded UT’s Counselors in Academic Residence (CARE) program.²³ It embeds counselors within departments, units, or colleges. In addition to serving as counseling center staff, clinicians serve as staff of the department, unit, or college, becoming a member of that community, and providing services to members of that community on-site. As a result, help is “local,” and counselors are knowledgeable about the stressors, climate, dynamics, and resources within that unit. This expertise and understanding benefits clients and enables the clinicians to provide guidance to faculty, academic advisors, and deans, with whom they interact with regularly. Data indicate the CARE program serves students earlier in their progression of distress, those whose chief complaints derive from academic difficulties, and those who are faring worse academically, as compared to students visiting the central counseling center.

“For students to be successful in academics and in life beyond college, mental health is just as important as physical health. It touches every aspect of life and affects us all.”

**President Gregory L. Fenves,
The University of Texas at Austin**

"The Health and Wellness Center has helped me more than anyone else could have. It is by far the best and most helpful resource a college can offer students. It enables students to become the successful and happy people they have always dreamed of becoming."

JCC student

President Fenves also helped expand UT's Counseling and Mental Health Center Diversity Coordinator program, which provides specialized services to reach underserved populations with identity-based support groups, outreach efforts, diversity trainings for faculty and staff, and advocacy and partnerships with existing identity-based organizations.²⁴ President Fenves also proactively convenes meetings with students to learn about their mental health needs, wishes, and experiences, and he finds funding solutions when needed. In January 2018, President Fenves dedicated his own discretionary funds towards subsidizing the cost of mental health services, which occasioned a 23 percent increase in the number of students seeking such services.

At **Jefferson Community College (JCC)**, President Ty A. Stone is a fierce advocate for mental health. She prioritizes student mental and physical well-being alongside academic achievement because, in her words, "healthy students build strong communities and enjoy brighter futures."

JCC is a rural, open-admissions campus in upstate New York with a small enrollment (about 3,600 students). More than 40 percent of students are active duty, veterans, or military dependents. A large share are low-income or first-generation, or are students with disabilities.

JCC is located in a U.S. DHHS-designated Health Professional Shortage Area—a large number of JCC students cannot access community health services. In response, JCC leadership created the first clinical position on campus to address student mental health in 2012. In 2016, JCC was one of three colleges nationwide to pilot the Community School Model to comprehensively address students' physical and mental health needs. Through this program and associated funding, they built the Health and Wellness Center on campus and expanded services through hiring and building relationships with community partners, who now provide services through the center. In 2017, the center provided mental health services to over 500 students and physical health services to almost 600. Services include psychiatric medication evaluation and management, emergency transportation, emergency childcare vouchers, an on-campus food pantry, veteran clinical services, application assistance for the Supplemental Nutrition Assistance Program, housing assistance, and subsidized disability testing.

In addition to providing clinical services, JCC is dedicated to prevention and outreach. For example, the Health and Wellness Center trains all faculty and staff on recognizing and responding to students in distress. President Stone's dedication to the sustainability of the Health and Wellness Center has made JCC a leader among community colleges in serving the mental health needs of students. The institution's creative use of partnerships has enabled it to provide a diverse array of services to students despite its small size, limited resources, and rural location.

For more examples of creative, innovative, and comprehensive mental health efforts by diverse colleges and universities, the authors recommend reading about winners of the Active Minds Healthy Campus Award.²⁵

RECOMMENDATIONS AND ACTIONS

Colleges and universities can take action to prioritize student mental health, even with limited resources.

1. **Assess student needs.** This can be done systematically by conducting a student survey and through listening to students more informally. Healthy Minds data show that students of color, first-generation students, LGBTQ students, international students, and low-income students face unique mental health burdens and barriers to care. Diverse student perspectives are essential to inform mental health practice and policy on campus. Assess the campus's existing mental health services and identify gaps.
2. **Enhance the accessibility of clinical services.** Consider addressing costs, service locations, and the range and volume of available services. College and university leaders have been able to reduce fees for mental health services and embed counselors within units across campus to make clinical expertise more "local." Additionally, leaders have considered mental health services that address poverty and food insecurity. To address volume, leaders have hired more clinical staff to serve their students.
3. **Consider opportunities to integrate mental health promotion and prevention throughout the campus system.** In addition to expanding counseling or mental health services, other investments in student mental health include suicide prevention, education and awareness programs, peer support programs, screening and linkage initiatives, technology-based services, faculty/staff training, and curriculum-based programs (e.g., coping skills courses). Several campuses have been successful through creative partnerships with stakeholders on and off campus.
4. Finally, campus leaders can **set the tone regarding mental health on campus through proactive messaging, communication, and norm setting.**

Campuses provide an ideal setting to identify, prevent, and treat mental illness during a vulnerable and important life period. Understanding and addressing the mental health needs of college students helps shape healthier, happier, more educated, and productive campuses and graduates.

You can learn more about the Healthy Minds Study at healthymindsnetwork.org/research/hms. You can also view an interactive data interface and explore our national survey data at data.healthymindsnetwork.org.

Find the Return on Investment Calculator here:
<http://healthymindsnetwork.org/research/roi-calculator>

Enroll in the Healthy Minds Study to gain a comprehensive understanding of student mental health on your campus. You will receive a unique customized report describing the economic case for investing at your institution as well as comparisons of your institution to others across the nation.

Web: www.healthymindsnetwork.org
Email: healthyminds@umich.edu

ABOUT THE HEALTHY MINDS NETWORK

The Healthy Minds Network for Research on Adolescent and Young Adult Mental Health (HMN) is dedicated to improving the mental and emotional well-being of young people through innovative, multidisciplinary scholarship. Based at University of Michigan and Boston University, HMN addresses the connection between the mental health of adolescents and young adults and their health behaviors, physical health, and social, educational, and economic outcomes. Through its rich array of research projects (including the Healthy Minds Study), the network serves as a resource for secondary and higher education administrators, researchers, clinicians, policymakers, and the public.

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25. For more information, read about the Active Minds Healthy Campus Award: <https://www.activeminds.org/programs/healthy-campus-award>.

