

Supporting A Healthy University

Behavioral Health and Campus Suicide Prevention

Northern Michigan University

Submitted by James Haveman, July 1, 2022

Prologue:

I welcome this two-month opportunity to review the behavioral health services and other challenges facing students at NMU. I thank the NMU Board of Trustees, administration, faculty and students for addressing these complex and personal issues in a transparent and honest way. I appreciated those who were willing to be interviewed and those who provided written material for me to review.

This effort was personal for me. We all know persons who struggle with behavioral health issues and may have attempted or committed suicide. NMU campus must be a family and must care for each other. It is time to renew and realign NMU campus behavioral health services. A greater focus must be on prevention and awareness.

I had originally planned to have a report done by August 15, 2022. President Schuiling's quick actions on major recommendations have moved the final report to July 1, 2022. In June, 2022 President Schuiling appointed Dr. Abigail Wyche as the Special Advisor for Mental Health and Wellness. President Schuiling also approved the hiring of a Psychiatric Physician Assistant at the Health Center to work with the athletic department and the Health Center.

I am optimistic in the 2022-23 academic year that these changes will lead to a healthier NMU campus. I tried to be realistic in the recommendations to assure that they are practical, meaningful and doable.

Many of the recommendations can be done administratively. Some will take additional resources to be approved by the Board of Directors upon recommendation by President Schuiling.

Major Recommendations:

- At all student orientation meetings, information about campus resources is to be shared. This information should include a resource brochure and a card with phone numbers listing where health and behavioral health services are available.
- Rebranded a campaign on campus to further understanding of behavioral health awareness and suicide prevention.
- Openly acknowledge frequency of behavior health needs and suicide ideation and attempts on campus.
- Set a goal of a being a 'zero suicide' campus by August 2023.
- Appoint a person to implement new and realigned behavioral health services on NMU campus. Consolidate Health, Counseling/Consultation and Wellness under one administrative umbrella accountable to the President of the NMU.
- The new Wellness Center should provide counseling space to community providers to provide services on campus.
- Update the campus crisis operational plan to include behavioral health and other health services.
- Hire a psychiatric physician assistant or psychiatric nurse practitioner work with athletics, nursing students and the Ada B. Vielmetti Health Center. Begin discussion of hiring a sports psychologist assigned to Athletics.
- Initiate a bi-annual behavioral health survey for all students to gauge awareness, needs and satisfaction with current services.
- Establish a 'no wait' list policy at the Health Center and Center for Counseling and Consultation
- Re-affirm NMU's commitment to diversity, equity and inclusion.
- Students in need of long-term counseling should be supported by providers in the community or by NMU.
- NMU should have contracts with community providers to give priority to NMU students. Formalize service relationships with community providers to ensure follow up. Referrals to private providers should have a "case managed safety net" to assure timely follow up took place.
- Ensure behavioral health services are available 24/7 for phone/telehealth or in-person consultation services for students, housing staff and campus police. A major crisis can often be diverted/deescalated and thus not requiring to do an assessment at the UPHS's emergency room.
- Mobilize, energize and financially support student and faculty organizations which are committed to sponsoring student activities, forums and support services for the NMU student.

- Actively promote the availability of Health Advocate’s behavioral health and other health services to students on a 24/7 basis.
- Establish a student advisory task force to assist in the implementation of campus activities and services
- Redesign and modernize campus communication to be more relevant, timely and informative.
- Engage resources of the many campus ministries in the implementation and provision of behavioral health services and student support services.
- Commit resources to ensure no student fails to seek behavioral health services because of an inability to pay. No student should be billed by NMU for health and behavioral health services.
- Design a campus dash board with updates of all key indicators and data points. This will include all health, wellness and counseling activities focused on the student. NMU should put in place continuous quality improvement strategies.
- Use of students from Nursing and Social Work departments whenever possible to augment services.
- Addition of wellness rooms in resident halls and counseling areas for students to have private time and to utilize tele-health resources.
- Consider raising the minimum wage paid to students on campus to ease the anxiety of financial strain on students.

Report background:

University years have always been a time of exciting exploration for students in a new environment and away from their family and friends. In the last decade students have had to deal with additional stresses and financial worry. Since the first wave of COVID-19, isolation and lack of relationships have brought new stresses to students already facing complex career issues.

Northern Michigan University is an excellent school. It should continue to improve student success, well-being, and behavioral health services. It can do this while improving student retention, and reducing potential suicides.

Excellent models for improving student success have been recommended through the *Active Minds National Resource Center*. They include Denison University’s Multifaceted approach, University of Richmond’s *Wellness Wheel*, California State University at Long Beach in their Student *Emergency Intervention Program* and the *Peer Educators and Mentors* at Skidmore College. The “Be Nice” program of the

Mental Health Foundation based in Grand Rapids is one that could be easily adopted by NMU. The QPR Institute offers another excellent model that could be considered.

Across the country, suicide is currently the second leading cause of death among college and University students. According to the Clay Center for Healthy Young Minds, *there are more than 1,100 suicides on college campuses each year – That’s 2-3 deaths by suicide every day, More than half of college students have had suicidal thoughts, and 1 in 10 students seriously consider attempting suicide. Most importantly: 80-90% of college students who die by suicide were not receiving help from college counseling centers.*

In spite of the high national numbers, in 2021 the NMU Campus Police reported there were 27 incidents of threatened suicide, wellbeing checks, attempted suicide, or suicide during all of 2021. In the first 6 months of 2022 the number of calls was 21. This number is trending upwards. Pathways, the local Community Mental Health program, reported doing 104 psychiatric assessments (Medicaid) of NMU students at the UMHS’s emergency room. Great Lakes Recovery Center reported doing 30 psychiatric assessments (Insurance) of NMU students at the UMHS’s emergency room.

A limited number of students have used the services of the Center for Counseling and Consultation services. In the 2021-22 year 305 students had appointments at the Center, of those, 215 were new students and 90 were returning students. In addition, 103 crisis emergency appointments were attended by students. The Center also maintains a waiting list. Services at the Center are not available in the areas of serious eating disorders, bi-polar disorders, chronic pain issues, imminent violence, mandated counseling, neurological disorders, sex offender issues, gender dysphoria, and primary drug and alcohol abuse. Many of these individuals are at higher risk for suicide ideation and suicide.

To develop a picture of where NMU stands in dealing with Behavioral Health on campus, three kinds of data were used. First, there is a lot of data in national studies and from other universities. Some of that data is used in this document. Those studies reveal that there are likely to be thousands of at-risk students at NMU, most of whom are not being helped through existing services. Second, in the interviews with faculty, students and others, it was learned that personal tragedies may have been avoided through desperately needed interventions. Without exception, those persons wanted more support from NMU. No one felt NMU was doing as much as it should to support and retain its students. Students found it necessary to find support elsewhere. That support was often through family, friends, campus

ministries, community support agencies, and independent campus groups. Third, great effort was made to find useful data regarding what healthcare and behavioral health services have been provided at NMU to students. While reviewing requested data, the actual service numbers were so small that real comparisons can only point to important needs. This underscores the need for a carefully developed Data Dashboard that accurately accounts for all health, counseling and wellness services.

Responding to the emerging challenges will require enhanced new models of Counseling and Consultation for brief and long-term counseling

The use of a public health model for suicide prevention offers an opportunity for comprehensive supports and multi-level strategies based on fact-based planning. A public health approach using a data dashboard will identify patterns of risk and wellness. For Northern Michigan University, this model will enhance the structure of some of the critical services in the community, bringing the student support system together from assessment to service delivery.

COVID-19 has had a profound negative impact on the mental health of our entire nation. The Mental Health Association has reported increasing numbers of people experiencing anxiety, depression, psychosis, loneliness and other mental health problems. Information gathered in the Mental Health Association's *Online Screening Program*, reports that "45% of the individuals who were screened in 2021 were ages 11-17, 16% higher than the 2019 average. Rates of suicidal ideation were highest among LGBTQ+ youth, with 39% of those who took the depression screening reporting frequent suicidal ideation, 8% higher in 2021 than in 2019".

We know that about one in three college students meets the criteria for a clinically significant mental health problem. It is clear that NMU needs to move quickly to respond to these issues and challenges.

Moving Forward:

NMU has a fragmented system of services for behavioral health and health care. Students, and even faculty, are often unaware of what services are available to them. They are often frustrated on how to access services. The data would suggest students are underserved.

Administrative communication to the NMU campus needs to be more carefully tailored to reach the student, faculty and employees. That tailoring may also include the need for longer-term counseling, peer support groups, and online services. The Center of Counseling and Consultation is focused on very brief interventions,

generally no more than 3-5 sessions. Often students are in need of more intense counseling and thoughtful follow up. It is particularly difficult for students in need to navigate an already complex system and we need to assure useful access wherever students are on their journey at NMU.

After years of COVID and remote learning isolation, students are yearning to be engaged in meaningful activity in the college community again. Many of those interviewed are hopeful the fall semester will offer full orientation providing useful background to all the new students.

Both students and faculty are looking forward to working with student organizations and students are excited about campus-wide activities that can now take place.

NMU has a variety of counseling and support services in place. However, more prevention strategies are needed. The University should strive to provide students with services and activities that reduce anxiety and stress. This will prevent further and more severe behavioral health issues in the future. Realignment of services and hiring of additional personnel may be required.

NMU should be using social media and every other platform that is useful to spread awareness about behavioral health services. This includes instructive videos and forums that provide useful information.

Life in today's University is complex. Services needed to support our communities of color, students who are LGBTQ+, students with eating disorders, and other substance abuse issues are imperative.

The Health Center prescribes medication for students and faculty. It has tele-health psychiatric resources available. The addition of a psychiatric nurse practitioner or psychiatric physician assistant is important. It will greatly assist in the efficacy of medication prescribing and behavioral health consultation for athletics, nursing and other allied health departments. In time, NMU should consider hiring a sports psychologist for the athletics. In 2021-2022 6,843 faculty, retirees and students used the Health Center. Of that total, 2,925 were students. Unfortunately, not all students are seen immediately when they come to the Health Center. The Health Center should have a 'no wait' policy for students.

The campus police, residential support staff, athletic trainers, coaches and faculty have all emphasized the need for 24-hour support and consultation to assist with

behavioral health issues. A well-understood crisis response system is not yet in place, and the current after-hour psychiatric assessment is cumbersome. A model of emergency intervention that includes diversion options to de-escalate a problematic situation should be implemented. This could avoid disruptive hospitalizations. NMU needs to collaborate closely with the broader Marquette community and foundations as it develops the continuum of behavioral health services. The University must provide community support only through trusted and proven partners.

Whenever possible, NMU should use the newest technology in messaging to the campus. Students in Communications and Media Studies can provide excellent insight into what will best work on the campus.

Students would welcome a more aggressive promotion of tele-health options for assessment and counseling. Clearly students live lives far beyond the 9-5 schedule of regular staffing, so those supports must be available on a 24 hours basis. Along with Health Advocates web site, there are other excellent online websites that can support educational efforts, including the *American Foundation for the Prevention of Suicide* and the *Jed Foundation*.

It is important that the University commit to a 'zero-suicide policy' for the campus by fall, 2023.

A student behavioral health and health survey should be done prior to each semester. Results can be reported to the campus community. NMU can best know how to provide effective systems and solutions when it has solid information about what is utilized and needed. Orientation sessions can provide a wealth of excellent information to the students.

The establishment of peer-to-peer support systems including internet-based systems will enable the quick dissemination of information. NMU currently pays a per student fee to be part of a Student Assistance Program available through Health Advocates. Health Advocates program makes available webinars, videos, newsletters, informative emails, and health news in strategic areas. These services from Health Advocates must be widely publicized on campus and be available 24/7.

It will be helpful to create a student advisory board for wellness to assist the coordination of wellness activities and outreach on campus.

NMU should provide mental health first-aid training for all faculty, resident advisors and athletic support staff. Soon, NMU should incorporate a comprehensive campus model of behavioral health and suicide awareness and prevention. Examples include the *Be Nice* program and the *QPR Institutes* programs.

Establish a clear protocol to follow in case of a suicide event or other behavioral health crisis. This should be an updated comprehensive crisis response that has clearly identified action plans and has broad support and participation among all NMU and the greater Marquette community. This plan would include an immediate and appropriately publicized response to a suicide, or any behavioral health issue visible in the community. NMU must provide reliable information to head off confusion caused in social media. Students have indicated an interest in being included as part of the communication strategy.

Strong staff support is needed for peers and classmates. This should include opportunities for students and faculty to vent and deal with grief. Students should be allowed a grief/stress 'absence' through school policy. A thoughtful follow-up is needed with affected students, friends and associates to avoid post-suicide residue.

The planned Wellness Center will facilitate the integration of Health, Wellness and Counseling/Consultation. The current NMU Wellness Committee is inactive and its function should be evaluated.

NMU should explore more flexible models for Counseling and Consultation services. Ideally it should have the capacity and willingness to see students 7 days a week with flexible hours to fit the student's schedule. The office should have the ability to handle emergencies and provide consultation to the campus police, resident advisors and others.

The Wellness Center can be a safe place to deescalate an emergency. It must be able to provide tele-health space and a quiet wellness room. It can be a great resource for informative behavioral health and suicide forums on campus. It must have a sound referral network and do ongoing case-management and work closely with the Health Center. Both the Health Center and Counseling and Consultation offices should strive for a 'no wait' policy. It is recommended the student counselor ratio be 1:500 students rather than the current ratio of 1:1500 students

The Northern Michigan University's Campus Police can be an effective first point of contact in the event of suicide or behavioral emergency on the campus. Public Safety programs can identify and dispatch the resources available to respond to the

crisis while being charged to ensure an ongoing follow-up among students, staff and peers. To be most effective, the Campus Police should supplement its work with an available 24/7 on call behavioral health consultation resource. This contact can be by phone or tele-health consultation or in person. The service could be augmented by students from the social work and nursing departments. It might necessitate hiring additional faculty as preceptors for students.

NMU should fund and facilitate a peer-led behavioral health program. It would include funding student organizations which give behavioral health and suicide prevention a priority. Grants should be made to student organizations such as the Mind your Health organization and its *Active Minds* project. The Associated Students of Northern Michigan University has given mental health a priority for the 22-23 academic year. All formal and informal organizations that students seek out should be mobilized to offer activities, discussion groups and assistance. The nursing school's Wildpups program is an example of a very useful offering for students feeling alone, disconnected and needing acceptance.

Private areas should be developed in residential buildings and the Center for Counseling and Consultation for privacy in using tele-health resources. Students would welcome more wellness quiet rooms around campus.

Connecting with existing support networks such as campus ministries will be useful for many students, NMU should consider having a chaplaincy office within the new Wellness Center. Space should also be provided to community-based agencies that are willing to provide behavioral health services on campus.

Students often face financial stressors. Some of this could be relieved by increasing the minimum wage paid to students. The Health Advocate programs that are available to student include tools to aid in financial management, budgeting and useful self-assessments. Even though health insurance coverage is available for most services, coverage is often misunderstood and unused, and useful advice about how to use insurance can be covered in the orientation. Finances should not be a barrier to students getting behavioral health and other health services. NMU should maximize the awareness students have of insurance options and actively promote enrollment of students in public insurance options.

A quarterly dash board should be developed that captures relevant data from all health and behavioral health formal and informal networks. NMU should post the data on the web site for information and accountability.

Student organizations, University offices, campus ministries, curriculum and other groups topical discussion groups and forums need to be promoted more broadly. Examples of topics to be covered include: coping skills, stress, grief, trauma, resilience, budgeting, various psychiatric disorders, suicide prevention, LGBTQ issues, racial disparities, social determinants of health, eating disorders, sleep disorders, mood disorders, budgeting and gender identity. These topics will lead to a healthier, resilient, tolerant and accepting Northern Michigan University.