



MENTAL HEALTH, HIGHER EDUCATION, AND COVID-19

Strategies for Leaders to Support Campus Well-Being

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Kent State University*

INTRODUCTION

Higher education's response to the COVID-19 pandemic rests largely on its executive leaders, whose varying responses to the crisis will make an imprint on their institutions for years to come. This is particularly true of their response to student mental health, an issue that was already top of mind for presidents before the crisis imposed a new level of anxiety and isolation. As leadership teams move to address student mental health during the pandemic, this brief provides high-level considerations for both short- and long-term planning.

According to recent surveys of college presidents conducted by *Inside Higher Ed*, over 90 percent reported being very or somewhat concerned about student mental health during the COVID-19 crisis, making it their top concern (Lederman 2020). The data likely reflects presidents' fears about how the disruption and uncertainty of school closings and distance learning will affect students' already-rising rates of anxiety and depression. It also reflects just how aware presidents are of the impact of student mental health on a range of higher education outcomes—from well-being and readiness to retention and completion.

In a [2019 Pulse Point survey](#) conducted by the American Council on Education (ACE), eight out of 10 presidents indicated that student mental health had become more of a priority on their campus than it was three years ago (Chessman and Taylor 2019). ACE's April 2020 Pulse Point survey of [college and university presidents responding to COVID-19](#) suggested that a little over a third of presidents surveyed plan on making more investments in student mental health due to COVID-19 (Turk, Soler, and Vigil 2020).

As leaders deploy time and resources to what they have identified as a major priority, a number of questions can be considered: What are students telling us they need now, in addition to when they return to school? How will decisions of higher education leaders affect mental health service delivery as well as prevention and wellness? Are leaders responding to the mental health needs of faculty and staff? And are institutional strategies considering the needs of diverse student populations? As we see across the country, the COVID-19

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pandemic is not affecting students equally. It appears likely to exacerbate the unique mental health issues faced by students of color, LGBTQ+ students, and low-income students.

Using both new and existing data, authors of this brief have identified three major categories for leaders to consider in responding to student mental health during COVID-19 and beyond: communication; the mental health and well-being of all campus stakeholders; and the need for assessment—elements that are critical to planning at any time, and particularly now. Authors offer examples and resources to help guide decision-making, including ways that leadership can adopt an equity lens to each of these mental health considerations.

ENSURE THAT COMMUNICATION TO STUDENTS IS CONSISTENT, CARING, AND CLEAR.

Many students report a lack of regular and compassionate communication from their institutions as a primary stressor during COVID-19, according to a nationwide survey (Active Minds 2020).

Not only do students report uncertainty about academic options and what those options mean for their future, but more than half say that they do not know where to turn for mental health support. This lack of clarity is concerning since one in five students report that COVID-19 has significantly worsened their mental health.

Overall, students seek compassionate, caring communications that acknowledge the burdens they may face, including caring for family members, suffering financial setbacks, or having trouble accessing or staying focused during lectures. As a first step, leadership can recommend that faculty check in with students and provide reasonable flexibility and accommodations, similar to guidance from the [University of Texas at Austin](#). These check-ins help students maintain a sense of belonging, and communicate that their institution cares for their holistic well-being.

In particular, leaders should seek out communication channels for underrepresented populations, who face greater stigma about seeking assistance, especially mental health support. Particularly now, leaders need to be aware of the emotional impact of the pandemic on students of color given the health disparities in African American and Latinx communities, as well as xenophobia and bias-motivated attacks on Asians and Asian Americans. Montclair State University, for example, moved its in-person “Let’s Talk” student drop-in hours to an online format and is hosting [virtual support groups for women of color](#) (a mix of students, faculty, and staff). Similarly, Colorado College created [an information sheet](#) for faculty and staff to assist international students. Campus partners who work directly with students—cultural and identity centers, faculty or academic advisors—likely have the ability to gather data on their needs quickly. These populations can often fall through the cracks of larger, campus-wide efforts.

From an academic standpoint, [Boston University](#), [Denison University](#), [University of Richmond](#), and others are providing alternative, personalized grading options, allowing students to select a credit/no credit or pass/fail grade in lieu of letter grades. The schools communicated those options to students and parents/guardians



often and through multiple channels. At the same time, be sure to offer guidance regarding how these options may impact students' future educational or career prospects.

In addition to communicating academic guidelines, many institutions are sharing powerful messages with students regarding overall wellness. Leading institutions in student well-being, such as [California State University Long Beach](#) and [Denison University](#), send regular video messages from their top leaders, encouraging students to communicate with faculty about how things are going and what they need. In these examples, seeing and hearing a person cuts through the considerable amount of email and helps convey compassion and understanding (Horne 2020).

Kent State University, another recognized leader in student wellness, [created a “one-stop shop”](#) website, call line, and email address for all COVID-19 questions, including telehealth and telemedicine information. More institutions should follow its lead in ensuring COVID-19 resource hubs prominently place wellness services (e.g., telehealth resources, insurance guidance, crisis resources, and grief counseling) so students can find them. It is also helpful to include tailored support or guidance for students in unique situations, such as students living alone or in negative or unsafe living situations.

Looking ahead, consider not only a greater investment in mental health as a result of COVID-19, but also how to communicate that commitment to students. They want to know their campus is planning for the mental health support they will need when they return and that the campus will establish new practices and protocols in the event of a future crisis. Many students will look for a campus ready and willing to walk with them through the necessary healing and recovery, moving forward together as a community.

* [Jim Pater](#) (CC BY-NC-ND 2.0)

CONSIDER THE MENTAL HEALTH AND WELL-BEING OF ALL CAMPUS COMMUNITY MEMBERS.

Faculty and staff are on the front lines of serving and supporting students, leading the charge during these uncharted times. Supporting them is one of the most effective ways leaders can support students.

Eighty percent of surveyed faculty and staff believe that it is very or extremely important to model positive health and wellness behavior to students (American College Health Association 2020). Many are trying to keep a sense of normalcy despite experiencing their own uncertainties, fears, and anxieties. They, too, are quickly adapting to new ways to do business, juggling work-life balance, and addressing the new and varying academic and student life issues.

To support faculty and staff well-being, leaders should consider realigning expectations for productivity and increasing flexibility. Adjusting timelines for tenure, reappointment, and the evaluation and promotion process may mitigate some of the stress and anxiety as faculty negotiate the balance of work and life.

Additionally, keep in mind that all community members could benefit from services and support that address food insecurity or other emergencies. Non-tenure-track instructors, part-time faculty members, and early-career professionals likely have layered commitments (e.g., multiple jobs), and any campus member could be experiencing an income shortfall as a result of a partner or family member losing their job.

To help mitigate these stresses, leaders may also want to consider creating a virtual faculty and staff community, allowing peers to check in with each other, validate each other's experiences, and make space for a new normal. Digital learning and sharing communities that pollinate across divisional and departmental lines can provide timely information and the ability to share ideas, strategies, disappointments, and concerns. The [Miami University Oxford Ohio Learning Communities](#) are one example of virtual environments that build campus community.

Looking ahead, make sure that mental health for students, faculty, and staff is part of the strategic plan. Many presidents indicate that their students' mental health is a top concern, and many are considering the mental health of their faculty and staff (Turk, Soler, and Vigil 2020). It is understandable to think about our students' mental health first and foremost, but faculty and staff are frequently the first and primary points of contact for students with the institution. Supporting faculty and staff mental health can directly impact the student experience.

Given faculty's frontline role, another important long-term strategy is campus-wide [gatekeeper skills training](#) to notice, intervene, and refer those students and colleagues who are in distress. We consistently hear from faculty that they do not have the skills, perceived confidence, or capability to assess for mental health concerns and adequately refer. Faculty often know the students whose life circumstances made them especially vulnerable to the pandemic—for example, those students still in campus residence halls or who went home to unstable households. Training and the provision of adequate resources provides the clear message that everyone can contribute to a healthy campus—even remotely.



Montclair State University

INFORM DECISION-MAKING THROUGH ASSESSMENTS.

Assessing mental health needs is a relatively inexpensive way to increase the effectiveness and efficiency of programs and services on and off campus, especially now as institutions introduce new resources.

Student mental health needs can vary substantially from campus to campus, meaning that campus leaders cannot simply rely on data from elsewhere. For example, in national data collected prior to COVID-19, the prevalence of past-year suicidal ideation among students was as low as 5 percent at some institutions and as high as 25 percent at others (Lipson et al. 2015). Access to services and rates of help-seeking for mental health also vary substantially across institutions. Moreover, the upheaval and trauma of the pandemic introduces a whole new layer of uncertainty, meaning that campus leaders cannot assume that past assessments reflect the current situation in their student populations.

As a first step, campus leaders should establish or update their plan to assess mental health in their student populations. Ideally the plan will involve collecting survey data from a large, representative sample of students as soon as possible and then continuing on an ongoing, scheduled basis to understand immediate needs and changes over time. The plan for data collection should outline how the data will be shared and used to inform the campus's ongoing efforts to support student mental health.

A critical part of any assessment plan is developing strategies to include students with diverse needs in the data collection. The students that relied on the campus counseling center, the health center, or other support systems for their mental health needs before the pandemic may be the most difficult students to reach when not on campus. Correspondingly, when analyzing the data, be sure to disaggregate by populations—namely

by gender, race, ethnicity, and socioeconomic group—to ensure that all populations of students benefit from new or existing mental health programs and services.

Once a plan has been created, begin collecting data from students. The invitation should come from a campus leader, signaling that this survey is a priority for the institution. A campus can easily collect data by participating in the [Healthy Minds Study](#) and/or the [American College Health Association-National College Health Assessment](#) (ACHA-NCHA III). Both studies are well established, having included hundreds of campuses and hundreds of thousands of student participants over the years. Both surveys are conducted online and have been updated to include new questions pertaining to COVID-19, with a focus on students' personal experiences, behaviors, and beliefs during the pandemic. As an addition or alternative, a campus can create its own assessment as well.

Healthy Minds provides an in-depth look at mental health, service utilization, and related risk and protective factors (such as financial stress, sense of belonging, and substance use), whereas the ACHA-NCHA III covers the full spectrum of health issues, including a section on mental health. These studies are open to all types of institutions, can be administered any time during the academic year, and allow campuses to assess the state of their student population and compare to other institutions nationwide. Campuses can also add custom survey questions, such as assessing students' reactions to campus-specific programs and policies for COVID-19.

In addition to informing campus-specific decision-making, there is a broader benefit to campus leaders prioritizing data collection during the pandemic: with over 22 million enrolled in U.S. postsecondary education, data on the mental health of students during this unprecedented time will yield valuable insight into how adolescents and young adults are coping with this crisis.

CONCLUSION

Our institutions thrive when students are mentally and emotionally healthy: the greatest gains in learning occur, the most meaningful relationships are formed, and our campuses—physical or virtual—are fully enrolled. COVID-19 is asking us to change how we operate, but our commitment to our students' well-being remains the same. Keep mental health a priority by communicating consistently and clearly, supporting faculty and staff as they respond to student needs, assessing and planning for sustained mental health support, and keeping equity at the forefront of all efforts.

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ADDITIONAL RESOURCES

Statement of Principles on Acceptance of Credit

The American Council on Education and five other higher education associations released this statement of principles on the acceptance of credit during the COVID-19 emergency. The principles model the integrity, flexibility, understanding, and compassion that are at the heart of the work colleges and universities are doing on behalf of students during this extraordinarily trying time.

www.acenet.edu/Documents/Statement-Acceptance-of-Credit-Principles-041620.pdf

Active Minds COVID-19 Resource Hub

To help students, administrators, faculty, and staff navigate this stressful time, Active Minds has put together a Resource Hub full of actionable tools and resources to support yourself and your community.

www.activeminds.org/remote-resources

Equity in Mental Health Framework

This framework, created in partnership by the Steve Fund and the Jed Foundation, provides colleges and universities with 10 recommendations and implementation strategies to help inform and strengthen their mental health support and programs for students of color. The Equity in Mental Health Toolkit offers additional support in implementing the recommendations in the Equity in Mental Health Framework, including supporting campus-based efforts to reduce shame and prejudice around mental illness, increase responsiveness, improve campus climate, and provide system wide opportunities to help all students thrive.

equityinmentalhealth.org

Faculty Guide for Supporting Student Mental Health

Active Minds and the Association of Colleges and University Educators (ACUE) are pleased to announce a new resource designed to help college and university faculty support student wellbeing and mental health. *Creating a Culture of Caring* provides practical approaches that faculty members can implement in the everyday.

www.activeminds.org/faculty-guide

CONTRIBUTORS

Active Minds

Active Minds is the nation's leading nonprofit organization supporting mental health promotion and education for young adults. Powered by a network on more than 800 high school and college campuses, in workplaces and communities, and through a vast public audience, Active Minds is creating communities of support and saving lives.

www.activeminds.org

Laura Horne, Chief Program Officer, Active Minds. Laura Horne develops innovative strategies and unique partnerships to empower young adults to help society embrace a comprehensive, public health approach to mental health.

American College Health Association (ACHA)

Since 1920, the American College Health Association (ACHA) has served as the voice for student health and wellness. Through advocacy, research, and education, ACHA stands at the forefront of issues that impact the health and wellness of our college students. ACHA represents over 1,100 institutions of higher education, representing the collective health and wellness needs of 10 million college students. ACHA serves nearly 3,000 individual college health and wellness professionals and leaders of all disciplines united together to advance the health and wellness of college students.

www.acha.org

Joy Himmel, Past Director, Penn State Altoona Health & Wellness Center; Emeritus Member, ACHA. Joy Himmel is a fellow with ACHA, serves on the Program Planning Committee as the CE representative for National Certified Counselors, and is a surveyor and board member for the Accreditation Association for Ambulatory Healthcare (AAAHC).

American Council on Education (ACE)

The American Council on Education (ACE) is a membership organization that mobilizes the higher education community to shape effective public policy and foster innovative, high-quality practice. As the major coordinating body for the nation's colleges and universities, our strength lies in our diverse membership of more than 1,700 colleges and universities, related associations, and other organizations in America and abroad.

www.acenet.edu

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Healthy Minds Network

The Healthy Minds Network (HMN) is a research group dedicated to strengthening the connection between data and practice in context of mental health for college students and other youth populations. HMN runs the Healthy Minds Study, a national web-based survey study of student mental health and related issues. HMN is based at University of Michigan and Boston University.

healthymindsnetwork.org

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JED Foundation

JED is a nonprofit that protects emotional health and prevents suicide for our nation's teens and young adults. We're partnering with high schools and colleges to strengthen their mental health, substance misuse, and suicide prevention programs and systems. We're equipping teens and young adults with the skills and knowledge to help themselves and each other. We're encouraging community awareness, understanding, and action for young adult mental health.

www.jedfoundation.org

Sofia B. Pertuz, Chief Diversity & Inclusion Officer and Senior Advisor for JED Campus. Sofia B. Pertuz's work focuses on diversity and inclusion in higher education, with over 20 years of experience in strategic planning, assessment, inclusive excellence, and critical incident management.

Mary Christie Foundation

The Mary Christie Foundation is a thought leadership organization dedicated to improving the behavioral health of teens and young adults through research, publishing, and convening. We have a particular focus on the emotional and behavioral health of students at American colleges and universities.

marychristiefoundation.org

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The Steve Fund

The Steve Fund's mission is to promote mental health and emotional well-being of young people of color as they transition into higher education, throughout their higher education experience, and as they transition to the workforce. The Steve Fund works with colleges and universities, nonprofits, researchers, mental health experts, families, and young people to promote programs and strategies that build understanding and assistance for the mental and emotional health of the nation's young people of color.

www.stevelfund.org

Sandra E. Timmons, Interim Executive Director, The Steve Fund. Sarah E. Timmons joined The Steve Fund as its interim executive director in March 2020 following a successive 16-year tenure as president of A Better Chance, a national nonprofit organization that places talented young people of color into the leadership pipeline through increased access to academically rigorous secondary schools.

