

RUSA

RUTGERS UNIVERSITY
STUDENT ASSEMBLY

Mental Health at Rutgers University-New Brunswick

**A Report by the Rutgers University Student Assembly
Mental Health Task Force**

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Executive Summary

In April of 2016, the Rutgers University Student Assembly recognized that many students feel that mental health services could be improved on campus. The Mental Health Taskforce was created with the duty to conduct a comprehensive review on mental health services on campus and issue a report with appropriate recommendations. We began our investigation by identifying important members of the committee to include on the Taskforce. Contributing to our investigation were To Write Love on Her Arms and Active Minds.

In the investigation, the Taskforce identified various issues students face on campus. One of the issues we identified was accessibility of mental health services on campus. Students report that the limited hours and locations of the current health services on campus were sometimes an impediment to them seeking care. It is a recommendation of this Taskforce to provide for more embedded counselors on campus, which would expand a program started in the Honors College. The task force additionally recommends that the traditional CAPS offices have expanded hours till 9pm, in order to allow more students access to mental health services. Oftentimes students have to balance class and work schedules and this will provide more flexibility for students.

Another difficulty facing students at Rutgers University is choosing between their own health or their classwork. The current university policy does not mandate a meaningful opportunity for students to make up work due to mental health crises. Rutgers students should feel that their personal mental health is important. A policy that mandates students be allowed to make up work missed due to mental health crises allows students to handle their personal health and afterwards still be a productive and an accomplished member of the university community.

After a thorough investigation of the campus climate and student issues, this committee worked to issue recommendations on how to improve the student experience at Rutgers. We urge all those interested in improving the experience of students on campus to consider our recommendations. These recommendations will make Rutgers a more inclusive and welcome place to those who need our help the most. With this in mind, the task force encourages you to read the report to gain a fuller understanding of the student experience on campus.

The Mental Health Task Force

On Thursday, April 14th, 2016, the Rutgers University Student Assembly (RUSA) voted on Bill S1617 02 in order to create the Mental Health Task Force, which would investigate the issue of mental health on campus. In creating the task force, RUSA recognized that about seventy percent of students experience a mental health crisis while at college. Mental health is a growing issue on campus and nationwide. As a student government, we are interested in improving the lives of students on campus. Numerous students have concerns with the status of mental health services on campus and with this in mind we began a comprehensive review of the student mental health experience at Rutgers-New Brunswick.

This task force was devised to include contributions from student leaders in student government as well as organizations dedicated to the issue of mental health on campus. With this in mind, the Taskforce was formed composed of 6 individuals from RUSA and 4 individuals from the campus community at large, including representatives from To Write Love on Her Arms, Active Minds, and Psychological Alliance. The original target date for the committee to report its findings was late October, but RUSA acted to extend the target date for the committee to February 9th, 2017. At the time the committee was extended, membership in the committee was increased by one RUSA member and one member from the student community at large.

The committee began its work in the summer prior to the Fall 2016 semester. We have continued to investigate mental health services on campus. In this report we include our findings, observations and most importantly, recommendations to be made to mental health services on campus. We hope that by raising these issues on campus we can work to change the status quo on campus.

Your student government is here to serve you. If you believe that an issue important to you was not raised in this document, please contact your student government representatives. You may learn more at www.ruassembly.com or my emailing rusa.assembly@gmail.com. Your input is very important to us. We are here to serve you and represent you on campus.

Mental Health As a Nationwide Issue

Mental health, according to the U.S. Department of Health and Human Services, encompasses “emotional, psychological, and social well-being.”¹ The state of one’s mental health affects behavior both internally and externally and affects people at all stages of life, including those at the university level. One in four young adults between the ages of 18 and 24 have a diagnosable mental illness and more than 25 percent of college students have been diagnosed or treated by a professional for a mental health condition within the past year.² Additionally, one half of all chronic mental illness begins by the age of 14,³ which means that an overwhelming amount of college students are coming into a university setting already experiencing a mental illness. The effects that complications with mental health and mental illness can have on college students can include a decrease in their GPA, withdrawal from the university, and even suicide. These situations are often associated with depression, anxiety, and eating disorders. More than 80 percent of college students felt overwhelmed by all they had to do in the past year and 45 percent have felt things were hopeless.⁴

However, two-thirds of students who are struggling do not seek treatment, according to the American College Health Association Spring 2015 assessment.⁵ The cause of this could be due to a number of reasons, including unawareness of resources, inadequacy of resources and existing perceptions on and stigmas regarding mental health. For those that do receive on-campus treatment, it is generally kept short term and those students eventually get referred to outside local and statewide mental health providers. This ends up being more inconvenient in terms of cost, time and transportation. While the use of on campus resources by students has shown increases, so has the amount of students with mental health complications and attempted suicides.⁶

In addition, as student diversity increases in colleges and universities nationwide,

¹ “What is Mental Health?” <<https://www.mentalhealth.gov/basics/what-is-mental-health/index.html>>

² “College Student Mental Health Statistics” Chandon State College Behavior Intervention Team
<<http://www.csc.edu/bit/resources/statistics/>>

³ “Mental Health Care Facts in America” NAMI.
<<http://www.nami.org/NAMI/media/NAMI-Media/Infographics/GeneralMHFacts.pdf>>

⁴ “The Issue: Student Mental Health” Active Minds. <<http://www.activeminds.org/issues-a-resources/the-issue>>

⁵ Ibid

⁶ “2015 Annual Report” Center for Collegiate Mental Health. Penn State.

<http://ccmh.psu.edu/wp-content/uploads/sites/3058/2016/01/2015_CCMH_Report_1-18-2015.pdf>

especially at Rutgers University, it is imperative that the multicultural statistics on mental health are taken into account. 16.9% of Hispanic adults, 19.3% of White adults, 18.6% of black adults, 13.9% of Asian adults, and 28.3% of American Indian/Alaska Native live with a mental health condition. In addition, people in the LGBTQ community are 2 or more times more likely to have a mental health condition. Increased cultural stigmas, language barriers, and lower rates of health insurance among minority groups cause individuals in these groups to be less likely to receive treatment.⁷

Commuter students are a population that may face a higher risk of having mental health related issues due to their proximity to campus. This isolation from the campus environment contributes to a lack of knowledge about the resources that the school offers, and may lead to a lack of integration with other students. Even for those students that who are well connected the campus culture and environment, their schedules may be less flexible compared to other students to accommodate for their travel time. Compounding factors that add to the stress level of a commuter student are that they may be working, live at home with their parents, and likely to be transfer students, which further distances themselves from the campus environment.⁸

There is *little* data on the specific effect of commuting on the mental health of commuter students on college campuses, however there several reports that indicate the effect the overall toll that commuting may have on an individual. Those who commute at least 10 miles each way, may be at greater risk for isolation and depression, according to researchers in the University School of Medicine in Saint Louis and the Cooper Institute in Dallas. U.K.'s Office of National Statistics finds that those who commute more than 30 minutes to work face higher stress and anxiety than those with no commutes at all. In this same study, it finds that those who commute face lower levels of happiness and life satisfaction, in accordance to the parameters of study.⁹

⁷ "Mental Health Facts Multicultural" NAMI.

<<https://www.nami.org/NAMI/media/NAMI-Media/Infographics/MulticulturalMHFacts10-23-15.pdf>>

⁸ "Suicide Prevention for Commuter Students" Emory University.

<http://www.emorycaresforyou.emory.edu/emory_student_communities/commuter.html>

⁹ Kylstra, Carolyn. "10 things your commute does to your body. Time Magazine (Online).

<<http://time.com/9912/10-things-your-commute-does-to-your-body/>>

Due to the clear prevalence of mental health related issues, many universities are increasing the capacity of social workers, psychologists, and psychiatrists to meet the demand of mental health related concerns of students.

1. George Washington University raised tuition by \$1,667, an increase of 3.4%, resulting in more than \$830,000 for mental health related services.
2. To keep up with their 10 campuses, University of California hired 70 additional psychologists, which is a 40% increase at their counseling centers. They also added 20 more psychiatrists, which is 60% increase of their current number of psychiatrists.
 - a. Hires cost about \$17.4 million
 - b. Raised tuition from \$972-\$1,242
3. Almost 53% college counseling center directors reported that their operating budgets rose in 2009 by 15%, and in 2012 by 23%.¹⁰
 - a. College counseling centers said that in 2013 that almost 26% of their patients use psychiatric medications. That number was around 9% in 1994.¹¹
 - b. Many schools fall behind this standard, as one-third of schools don't have a psychiatrist on campus.

¹⁰ Korn, Melissa & Angela Chen. "Mental Health Crunch on Campus" The Wall Street Journal (Online). <<https://www.wsj.com/articles/mental-health-crunch-on-campus-1430082408>>

¹¹ Ibid

Campus Mental Health Legislation

Mental health legislation enacts policies in which institutions on varying levels of jurisdiction are required to establish comprehensive services that provide people seeking mental health care the programs and resources needed as well as legislative reform to improve existing policies. The State of New Jersey has enacted several pieces of legislation that pertain to individuals (though not in regards to students: A 1213, A 1928 A 2367, S 2521, and many more).

States across the country have passed legislation aimed specifically at institutions of higher education, in which colleges and universities are required to provide programs and resources to enrolled students. These include: Illinois HB 3599, Texas HB 197 and SB 1624, and Virginia SB 1122, HB 206, and HB 1268. These pieces of legislation include requirements for increased care, confidentiality policies, and increased visibility of resources.^{12 13}

New Jersey

On January 12, 2016, S 872 was introduced and referred to the Senate Higher Education Committee, and on January 27, 2016 it was introduced in the Assembly and referred to their respective committee. It

1. “Requires institutions of higher education to provide students with access to mental health care programs and services and to establish a hotline to provide information concerning the availability of those services.”
 - a. Provide universal access to campus-based mental health care programs and services and provide pertinent information to newly-enrolled students
 - b. Establish and maintain a 24-hour hotline to provide immediate assistance to students who require it and have that number posted in heavily trafficked areas on campus such as residence halls, libraries, and academic buildings.
 - c. Those providing services must be experienced and/or professionally trained in the fields of mental health.

¹² “State Mental Health Legislation 2014. Trends, Themes, and Effective Practices.”
<<http://www.nami.org/legreport2014>>

¹³ “State Mental Health Legislation 2015. Trends, Themes, and Effective Practices”
<<http://www.nami.org/About-NAMI/Publications-Reports/Public-Policy-Reports/State-Mental-Health-Legislation-2015/NAMI-StateMentalHealthLegislation2015>>

On August 1, 2016, Governor Chris Christie signed into law S 557, otherwise known as the “Madison Holleran Suicide Prevention Act,” which

“requires institutions of higher education to have individuals who focus on reducing student suicides and attempted suicides available 24 hours a day.”

United States

On March 15, 2016, S 2680, also known as the Mental Health Reform Act of 2016, was introduced and referred to the Committee on Health, Education, Labor, and Pensions. On April 26, 2016, It was placed on Senate Legislative Calendar under General Orders. Calendar No. 437. Although it was not adopted as a law, this bill brought up important issues for discussion on a national level. This bill sought:

“To amend the Public Health Service Act to provide comprehensive mental health reform, and for other purposes.”

The Association of Big Ten Students endorses this legislation and launched the Mental Health Monday campaign to gain support.

On March 15, 2016, S 2685, also known as the Mental Health on Campus Improvement Act, was introduced and referred to the Committee on Health, Education, Labor, and Pensions. It aims to

“To amend the Public Health Service Act to improve mental and behavioral health services on campuses of institutions of higher education.”

On June 6, 2012, HR 5996, also known as the Mental Health First Aid Higher Education Act of 2012, was introduced referred to the Committee on Energy and Commerce and the Committee on Education and the Workforce. It was later to sent to relevant subcommittees. It aims

“To authorize the Secretary of Health and Human Services, acting through the Administrator of the Substance Abuse and Mental Health Services Administration, in coordination with the Secretary of Education, to carry out a 5-year demonstration program to fund mental health first aid training programs at 10 institutions of higher education to improve student mental health.”

Mental Health Services At Rutgers

Currently, the Rutgers University-New Brunswick campus main mental health resource is *Counseling, Alcohol and Other Drug Assistance Program & Psychiatric Services (CAPS)*.

Established in September 2006, CAPS became a branch of the Rutgers Health Services, combining the major mental health services on campus: counseling services, alcohol and other Drug Assistance Program (ADAP) and Psychiatric Services. CAPS offers services at two main locations:

1. **College Avenue Campus:** 17 Senior Street, New Brunswick
2. **Douglass Campus:** 61 Nichol Avenue, New Brunswick

Recently CAPS has instated a new program, originally developed by Gannett Health Services at Cornell University, called “Let’s Talk.” This new program is an extension of CAPS services that offer drop-in hours at a number of different locations around campus. There is ***no*** appointment necessary and students are seen on first-come, first-serve basis. Each location offers drop-in services provided by ***one*** certified counselor and is available for a limited time span of two hours. Let’s Talk counselors keep brief written notes of their contacts with students, and in the event that there is an emergency or a student is referred to CAPS, other CAPS staff may see these notes. The locations of these hours are as follows:

- Asian American Cultural Center: Mondays, 3pm-5pm
- Center For Latino Arts and Culture: Fridays, 2pm-4pm
- Honors College: Thursdays, 2pm- 3:30 pm
- Paul Robeson Cultural Center: Wednesdays, 3pm-5pm
- Social Justice and Education and LGBT Communities: Fridays, 11:30am – 1pm

Students are able to make an appointment by calling the main CAPS office located on the College Avenue Campus. Said student will then schedule a brief phone interview with a certified counselor who will then determine the best kind of support, counselor and time for their in-person session. CAPS approaches mental health service by offering an individualized “ACTION PLAN” for each student. This “ACTION PLAN” is created and tailored to fit each student’s unique needs and is transformed into a type of treatment plan. By following said plan, counselors are able to accurately place students in one of the numerous types of service available

(group therapy, recovery housing, etc.) However, if a counselor deems a student's needs are best served by a community provider who either had a specialized training or resources, they will work on making a referral to professional, outside services. Students that are undergoing a mental health crisis (during regular office hours) and need immediate assistance, these individuals are asked to call CAPS or go to 17 Senior Street.

In regards to services after hours, options are limited. Counselors are only available to students from Monday through Friday from 8:30 AM-5 PM. Additionally, there are active workshops and individual services for students under a supervised training staff from 5 PM- 8 PM. This leaves both the evening hours and weekends for students undergoing a mental health crisis to find alternative modes of assistance. CAPS offers these after-hour and evening options:

- National Suicide Prevention Lifeline: 800-274-TALK (8255)
- NJ Hope Line: 855-654-6735
- National Crisis Text Line: Text KNIGHTS to 741741

If the services required for adequate help span beyond phone conversation, students are provided with 24 hour emergency services through Acute Psychiatric Service (855-515-5700). However, these services are not Rutgers-specific, they are open and available to all local residents.

There is a university "Do Something Button," on various websites and the bias prevention website. Students, faculty, staff, and parents, or any member of the Rutgers community may report a concern if they are concerned about one of the members within the community. In cases of emergency, calling 9-1-1 should be done immediately. Anonymous concerns may be taken.

-Concerns may include-

- i. A student who may be using dangerous **drugs (heroin, prescription drugs)**
- ii. A student representing a **threat to themselves or others**
- iii. A student's **emotional state and well-being**
- iv. **Disruptive or aggressive behaviors** in a classroom or on campus
- v. Regarding a bias incident.

- vi. A concern regarding sexual assault or misconduct.
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1. You may also communicate concerns in person or through the phone with the Dean of Students Office, Residence Life Staff, Violence Prevention and Victim Assistance, Title IX Compliance Office, Rutgers University Police Department, The Office of Student Conduct.
 - a. Designated staff in the Deans of Students office will review concerns within one day of their receipt. If you choose to use your name, you may be contacted for more information. Information is on a need-to-know basis, you may not hear back from the outcome.
 - b. Disciplinary action will not be subjected to those students who ask for assistance for themselves, or another person, unless , there is behavior that requires disciplinary follow up.

Stigma of mental health on campus → From the WOYM survey that are relevant.

1. When asked, “ Which of the following on-campus mental health resources are you aware of?”
 - a. 81.08% of respondents surveyed are aware of the existence of CAPs.
2. When asked, “Where would you be willing to access confidential drop-in sessions for mental health concerns (e.g., depression, anxiety, stress, etc.) in the following”
 - a. 56.42% of respondents are willing to access the confidential drop-in session for mental health concerns in CAPS.
3. When asked, “Would you be willing to use phone apps or online appointments for mental health problems? (e.g.: live video chats, etc)
 - a. 56.63% of respondents were willing to use phone apps or online appointments for mental health problems.
 - b. 22.06% of respondents said they were not willing to use phone apps or online appointments for mental health problems.
 - c. 21.31% Interested in a physical appointment only.

Student Groups at Rutgers

1. Scarlet Listeners
 - a. Operate a hotline like counseling, referral, and information service for the Rutgers University community. Sponsor programs of experiential and beneficial value to the Rutgers University community. Support Contact We Care, Inc., a nationwide network 24-hour caring and crisis hotline with calls from the state of New Jersey. Provide its members with leadership, learning and growing experiences. Encourage high standards of practice and ethical behavior, and promote attitudes of professional responsibility for the public good.
2. To Write Love On Her Arms (TWLOHA)
 - a. The UChapters program is a network of student organizations on college and university campuses that exist to embody the mission and vision of To Write Love on Her Arms. Through events and fundraising campaigns, each chapter serves as voice of hope, inspiration, and support for students in their campus community.
 - b. To Write Love on Her Arms is a non profit movement dedicated to presenting hope and finding help for people struggling with ...depression, addiction, self-injury, and suicide. TWLOHA exists to encourage, inform, inspire, and also to invest directly into treatment and recovery.
3. Active Minds
 - a. The purpose of Active Minds at Rutgers University is to educate the community regarding different psychological conditions and illnesses and to promote healthy minds. The organization will work towards reducing the stigma surrounding mental illness and promoting student's awareness of mental health issues and symptoms of mental health disorders. AMAR will encourage students to seek help as soon as help is needed, and serving as a liaison between students and the mental health community by providing information about available resources. The organization will also run fundraisers to support the mental health needs of Rutgers students. Through club activities such as discussion panels featuring

guest speakers and special events such as Mental Health Awareness Weeks, AMAR will educate the community, promote resources related to mental wellness, and promote better lives through healthy mindsets.

4. Peer Mental Health Educators

- a. The Peer Mental Health Educators are a small group of students who offer interactive workshops on various mental health issues for residence halls, student organizations, Greek-letter organizations and classrooms.
- b. These groups can request workshops at any time on the Health, Outreach, Promotion, and Education (HOPE) section in student affairs and these workshops allow students to be exposed to information regarding stress, time management, myth and stigmas about mental health, and test anxiety¹⁴

¹⁴ “Peer Mental Health Educators” Rutgers Student Affairs. Health, Outreach, Promotion, and Education. <<http://rhshope.rutgers.edu/peer-education/peer-mental-health-educators/>>

Peer Institutions¹⁵

There is a multitude of uniting factors throughout the 14 schools present in the Big Ten. Although many possess and offer a central service system to address and provide mental health services, the majority fall short on providing adequate resources for the individuals that come to them for service. Emphasis on short-term care lead to session-limits, additional charges and the inability to cultivate and maintain a steady and safe relationship with counselors present. Many Big Ten institutions limit their services to business hours, leaving students with limited options for after-hour care. With this said, many students are asked to call hotlines that are disassociated with the university department. If the said hot line is connected through university services, only a select few initiate a follow-up call on the next business day. All Big Ten institutions have and are maintaining “text lines,” giving students in crisis the option of texting in a situation, providing an alternative to phone conversation. Although some universities have “crisis counselors,” such as Northwestern, these counselors, when needed after hours, are only available via phone, heightening the vulnerability of an already at-risk individual. If walk-in crisis counselor hours are provided only during business hours, students are urged to seek mental health services from community providers, usually pertaining to local hospitals. All Big Ten institutions, including Rutgers, limit services to within the work week, leaving students without services for the weekend.

Many Big Ten institutions founded their mental health services upon the idea of enforcing short-term care. This results in many of the universities instituting a limited number of appointments for each student during one calendar year. Many cap students at 8-10 appointments, making either the student pay out of pocket for further appointments or turning to community referrals. Many of the Big Ten institutions claim that the short-term approach has resolved within an average 6 appointment, enforcing a one-size-fits-all treatment approach.

Association of Big Ten Students

- At the ABTS Conference in February, 2017, Resolution 02.17.07 was passed in support of improved mental health initiatives. It encourages each school Big Ten university to

¹⁵Hummer, Genevive. “CAPS adds specialized staffers for University colleges” The Michigan Daily. 9-16-2015. <<https://www.michigandaily.com/section/news/ross-caps-counselor>>

conduct a campus climate survey to assess the existing resources and needs, to work to improve access to mental health resources, such as including information about resources in course syllabi, to accommodate for excused absences for mental health, and continue to assess the effectiveness of mental health resources and services on campus to meet student needs in the future.

University of Minnesota

- Among the 14 schools of the Big Ten, University of Minnesota has the most extensive and impressive services available to students.
- Provides Online Therapy-teaches students self-care skills to manage symptoms of stress, anxiety and depression. Created as a collaboration between University of Minnesota programs partnering with researchers in the Department of Psychology and SilverCloud Health for a limited time as a part of a research study.
 - Goal is to provide those hesitant of therapy with a safe, secure support from trained mental health staff within a familiar environment. Provides resources:
 - Interactive learning modules
 - Informational videos
 - Secure online journaling reviewed by a trained supporter
 - Online support and feedback from a trained supporter
- The university also provides two alternative, in-person counseling options.
 - Mental Health Clinic at Boynton Health Service
 - Up to eleven counseling visits per 12-month period. Services include: individual and couple counseling/psychotherapy, urgent consultation (phone or in person), a variety of group therapies, social work assistance, and chemical health assessment and treatment.
 - Student Counseling Services External Link
 - Offers individual and group counseling, career and personality testing, and crisis counseling. Options include:
 - Personal counseling to address mental health issues (e.g. depression, anxiety) relationship concerns, and/or stress-related

concerns

- Career counseling to assist with choice of major and career decision-making
- Academic counseling to address barriers to academic success (e.g., procrastination, motivation, perfectionism)
- Study skill assistance
- Crisis consultation (by phone or in person)

University of Michigan

- Wolverine Support Network:
 - Community of students that fundamentally works to destigmatize mental health
 - Holistically working to create a network that is supportive and inclusive through peer-to-peer support groups and bi-weekly social events.
 - WSN establishes peer-to-peer support groups in which students can share their struggles and triumphs with peers in a safe, healthy and confidential way.
 - Student leaders are trained to drive conversation in a constructive way, respectful of all aspects of an individual's identity.
- Central Student Government Mental Health Taskforce
 - The purpose of the Mental Health Taskforce is to provide potential policies and recommendations to administration regarding improvements to mental health resources and climate on campus. After evaluating the data and results from three mental health surveys sent campus-wide in Fall 2016, the Taskforce is currently compiling recommendations and data in report-format to present to relevant stakeholders.
- CAPS After-Hours Hotline:
 - Extension of CAPS and established to assist a caller in any mental health crisis situation. Counselors can also assist callers in accessing CAPS or other campus resources. When appropriate, CAPS staff will follow up with the caller on the next business day.
- No additional fees are required for services.

- Although based on a “brief-treatment model,” the university does **not** limit the appointments a student can receive.
- In 2014, Counseling and Psychological Services (CAPS) embarked on a new way of effectively and efficiently distributing mental health services for students across the schools and colleges by creating a community-based model:
 - Placing CAPS clinicians inside some of the schools and colleges, known as the embedded model. CAPS counselors are now placed in 8 different Schools and Colleges at UM.
 - Has increased outreach and number of students that can be seen at a faster rate.
 - Resources to a specific school or college’s culture
 - “Based on the data and the numbers, we think we have met a need in two different ways,” Sevig said. “We have seen students who probably would have come to Central (Campus), that’s good because it makes it easier for students. The other beauty, based on the data, is we know that we are reaching students who wouldn’t have come and received help.” CAPS Director Dr. Todd Sevig

Michigan State University

- Initial visits use a walk-in system:
 - Monday and Tuesday from 10:00 am – 12:00 pm and Wednesday to Friday from 1:00 pm – 4:00 pm.
 - Students who are in a crisis/emergency are usually given first priority and are seen throughout our open business hours: Monday and Tuesday from 8:00 am to 7:00 pm and Wednesday – Friday from 8:00 am to 5:00 pm.
- All services are subsidized by the university, however, there are nominal costs depending on the treatment needed.
- There is no set limit for the duration of counseling; varies from student to student, the duration is discussed with the student’s counselor.

University of Maryland

- Applies a short-term model to individual counseling. In short-term counseling, issues are

addressed over a few sessions in a solution-focused manner.

- Limits students to eight individual counseling sessions per 12 month period.
- If a student is in need of extended care, counseling center therapists help clients find adequate care from a community provider.
 - Referrals are provided through a care manager.
- After-hours service provides professional mental health counselors to assist callers with mental health crises. Counselors also can provide information about the Counseling Center or other campus resources.
 - When appropriate, Counseling Center staff will follow up with the caller on the next business day.

The Ohio State University:

- After receiving a grant of \$1.5 million, OSU hired 15 new counselors to staff their department.
- There are two on-campus permanent locations that are accessible to students and staff.
 - Have an embedded counselor in locations around campus that are a fair distance from one of the two permanent locations.
 - These counselors are available four days a week during the listed hours.
- Students that seek out services are supplied with 10 free appointments. If a student utilizes all 10 appointments, they are then asked to pay by appointment or are referred to outside services.
 - As stated by the administration, appointments are limited because, “On average, most students resolve their concerns between five and six sessions. Sessions are generally 45 minutes in length.”
- Does not provide walk-in hours but the office does set aside hours for urgent situations. However, when a student comes to the office and needs to be seen immediately the student is still asked to wait for the next available counselor.
- Evening services, Monday- Thursday 5:00 p.m.- 8:00 p.m., are by APPOINTMENT ONLY.

Northwestern University

- A task force, including CAPS Leadership, the Dean of Students and various student leaders, have recently revised the previous CAPS session limit model. As of Fall 2016, the following changes have been made.
 - Decisions regarding student treatment plans will no longer be based on a 12 session limit.
 - CAPS will remain a short-term counseling service;
 - All students who come to CAPS will receive a personalized care plan tailored to their specific needs. Care plan meetings will be used to determine the best fit between students' needs and all available CAPS and community resources to ensure the best possible treatment outcome. A personalized care plan may result in one or more of the following outcomes:
 - Short-term individual counseling at CAPS;
 - Group therapy at CAPS;
 - Connection to other on-campus programs/services;
 - Connection to specialized and optimal community providers/care, facilitated by a CAPS provider
- No Charge.
- All full-time students who come to CAPS will receive a personalized plan which is determined during Care Plan Meetings.
- Part-time students are only eligible for crisis and referral services.
- Approach to when a student is in an emergency:
 - CAPS staff is available to students who are in crisis on a same-day basis. The student can either call to arrange a crisis appointment or the student can walk over and ask to see the Crisis Counselor.
 - The Crisis Counselor is available Monday-Friday from 8:30AM - 5PM.
 - If there is an after-hours emergency, the university provides a number to call where answering service personnel (Protocol) will contact a CAPS counselor who will speak with the person via phone if the concern is more dire.
 - A CAPS counselor is available via phone 24 hours a day, year round.

University of Wisconsin

- Offer no-cost mental health services to **all** undergraduate and graduate students at the university.
 - Services are paid through tuition and fees.
 - Goal is to provide all students on a limited basis to provide support, yet services may refer/suggest an outsider provider if the student is in need of urgent, long-term or specialized treatment.
 - If a student is referred to a community provider, UHS has care managers present to help navigate insurance plans, transportation issue and identify low-cost/sliding fee scale providers.
 - Work to provide interim support while establishing care with outside provider.

Purdue University

- CAPS at Purdue University approaches therapy utilizing a time-limited therapy model.
 - The number of sessions for a given individual are determined by the therapist during the time they have working with the given student.
- A majority of the services offered through CAPS are free of charge. However, some services carry additional fees:
 - Follow-up psychotherapy appointments.
 - Psychological testing
 - Alcohol Evaluations
- In-person help occurs during business hours and an after-hour hotline connects students in a crisis with a counselor via phone.

Indiana University

- Tele Counseling: allows students to work with a counselor from the privacy of their own room over a secure video connection.
- Students who have paid the student health fee receive two free appointments each semester.
 - After two sessions, the cost ranges from \$30-\$50 per session.

- Subject to insurance reimbursement

The University of Iowa

- All students are eligible for “one round” of counseling sessions per year (June-May).
 - The university emphasizes the “brief” aspect of their counseling services, as they are based on a short-term care model.
 - However, if a student utilizes their full round of individual counseling sessions, they are still able to attend group sessions.
 - If clinically indicated to need more sessions, the student and counselor will work to find appropriate counseling within the community.
 - However, in specific circumstances (i.e. client has clinically significant risk factors, it is clinically contraindicated to refer a client out, or client is a member of a group unlikely to receive culturally sensitive or appropriate services elsewhere), the clinician can contact the Director for Clinical Services to extend sessions beyond the limit.

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- The structure allots 12 sessions for each student, however, there is no limit to the sessions a student can have. If student has paid current student fees, they will receive their first 4 counseling sessions for no charge.
 - If a student seeks to continue after the four sessions, they can opt into using personal health insurance or not. If a student decides against using insurance, the rest of the appointments are \$30 a session.
 - Any session after the 12th session is then billed to the student’s insurance.
- When students call to schedule an appointment, the university looks to schedule the appointment as soon as possible.
- If a student is having a mental health crisis, there is a 24/7 hotline available for them to call.

Recommendations

Based on the recommendations collected from the student body and our observations we issue the following recommendations that we hope will help Rutgers improve its Mental Health services:

1. Embedded Counselors on Campuses
 - a. Dean Oluwadare of the Honors College and CAPS created an embedded counselor at the Honors College. This counselor was accessible to students in an intensive work environment by implementing “Let’s Talk” hours at the Honors College (which will be further expanded upon below).
 - b. We seek to expand upon this initiative and install counselors in specific locations and residence halls where they would be helpful to students who need someone in close proximity or who are further away from the CAPS office.
2. Extended hours and open on weekends
 - a. Many students expressed concerns through the What’s On Your Mind Survey and other services that the CAPS office was not open for very long.
 - b. The current hours for the CAPS offices are 8:30am-5:00pm excluding Wednesday in which the hours are 10am-5pm. The office is closed on weekends.
 - c. We recommend that the weekly hours be extended to 7pm with the trainee hours extended to 9pm. We further recommend that the office open on Saturdays from 12pm-4pm. We urge this change with the understanding that it is difficult for students to visit CAPS when they have several classes during the day or when they spend the majority of their time on another campus. Our hope is that the following change will resolve these conflicts and allow more students to visit CAPS.
3. Change absence/makeup work policy
 - a. The current Rutgers policy says the following: Students may obtain a note from the Office of the Dean of Students to authenticate an extended absence that is supported by appropriate documentation. Faculty notified of authenticated

absences *should* make reasonable accommodations to allow students to make up work that counts toward their semester grade.¹⁶

- b. We propose an amendment to the following language so that, in the case of mental health instances and at the student's consent, professors *must* make accommodations for individuals discharged from mental health programs.
 - c. We propose this change in an effort to ensure students recovering through such programs do not suffer academically and have the ability to re-enter their classes without any additional stress.
4. Conduct a Survey on Mental Health and Release a Campus Climate Report to the Community
- a. In the Summer of 2015, Rutgers School of Social Work and the Center on Violence Against Women and Children put together and released their #iSpeak Campus Climate survey regarding sexual violence on campus. It provided pertinent findings on the severity of the issue.
 - b. We propose that Rutgers CAPS and HOPE work together to compile and release a similar report on the status of mental health at Rutgers University for the purpose of enhancing student awareness on mental health and decreasing the stigma.
5. Online Appointment System
- a. After fielding concerns regarding the appointment process, especially how many students found it uncomfortable to talk to someone in-person or on the phone when dealing with certain mental health crises, we propose the creation of an online appointment system. We recommend these systems be similar to the online appointments systems in place at the University of Minnesota and Indiana University.
 - b. Such a system will make it easier for students to reach out to the resources they need on campus by allowing them to arrange appointments more efficiently and own their own time.
6. Expand location and increase number of counselors and hours (Let's Talk Program)

¹⁶Rutgers School of Arts and Science, Office of Undergraduate. *Attendance and Cancellation of Classes*. <<http://sasundergrad.rutgers.edu/academics/courses/registration-and-course-policies/attendance-and-cancellation-of-class>>

- a. Currently, CAPS is offering drop-in hours at a number of locations across campus under the name of the “Let’s Talk Program.”
- b. Unlike seeing a counselor at CAPS, “Let’s Talk” offers *informal* counseling. Services provided by **one** CAPS Counselor are offered at the following times and locations:
 - i. Asian American Cultural Center: Mondays, 3pm-5pm
 - ii. Center For Latino Arts and Culture: Fridays, 2pm-4pm
 - iii. Honors College: Thursdays, 2pm-3:30 pm
 - iv. Paul Robeson Cultural Center: Wednesdays, 3pm-5pm
 - v. Social Justice and Education and LGBT Communities: Fridays, 11:30am-1pm
- c. We propose that in order to expand both accessibility and familiarity of services, CAPS should appoint more CAPS counselors to a designated location to increase the time span of informal services. This, we believe, will greatly alter student turnout and create a more comfortable environment that may be forgone with one counselor.

7. Review diversity of mental health counsellors

- a. Increase number of languages available by counsellors to increase comfortability for students who speak a non-English language as their first language.
- b. Reaffirm an employment diversity program in hiring for CAPS personnel.

8. Incorporate Mental Health into the Standing Committee Structure of the Rutgers University Student Assembly (RUSA).

- a. Mental Health is an ever-present issue on college campuses and deserves direct attention not only in the form of data collection but also active participation and awareness raising efforts in an attempt to destigmatize the issue and get students the support that they need.
- b. By incorporating the issue of Mental Health into a standing committee, we can allow for RUSA to adopt a more direct role along with gathering research.

Conclusions

This Taskforce was assigned the responsibility of conducting a comprehensive review of Rutgers University-New Brunswick policies in regard to students and the treatment of their mental health issues on campus. As a whole, we would like to applaud the university for seeking to create a nurturing environment for their students by working with the student body, various organizations, and implementing new changes this year that expanded student options. However, from the What's on Your Mind Survey, RUSA found clear indications that while many students knew about mental health services on campus a large portion of those students would not be willing to use confidential CAPS drop in sessions. It is important for the University to work to fix this and similar issues.

The recommendations in this report are meant to provide opportunities that the university can pursue to enhance student treatment, reduce the stigma surrounding mental health, and allow the university to rise as a leader in the B1G 10. We believe that if Rutgers implements these changes, students dealing with mental health issues will feel even more secure and taken care of in the university environment. An important recommendation that will make students more secure is extended CAPS hours, both later in the day and on weekends. Students should feel that mental health services are very accessible on campus and such an expansion will send a clear message. Additionally, students should feel comfortable taking care of their mental health issues. In order to achieve this, students must be allowed to make up work. Mental health crises do not always come at opportune times and this policy clarification will allow students to more aptly recover.

The Taskforce hopes the issues identified in this report begin a serious conversation in regards to mental health issues on campus and lead to substantive action on these issues. The members of this Taskforce and many leaders on campus recognize that mental health is an important issue that needs more attention and recognition on campus and we hope to continue to work with the University on addressing these issues on campus. Rutgers University has a long history of engaging in revolutionary ideals. We urge the University to take steps to be at the forefront of mental health services in higher education.

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