

Mental Health on Campuses

By Judi Engle

Recent national events, such as the tragic shootings at Virginia Tech, have brought to the forefront the need for better mental health assessment and treatment programs on college campuses. Jerald Kay, M.D., professor and chair of psychiatry, chairs the Corresponding Committee on Mental Health on College and University Campuses for the American Psychiatric Association (APA). His expertise in this field has placed Wright State Boonshoft School of Medicine in the national media spotlight, especially following his testimony to the Governor's Virginia Tech Review Panel.

The idea that the college experience is "the best times of our lives" is a myth for some students, he says. While most easily adjust to new friends and unfamiliar surroundings, others are not as resilient, and parents and students need to be knowledgeable about the potential risks. "There are a lot of challenges when students enter college" he explains. "Students have to establish a new social system in which to fit and often need to adjust to group living arrangements in dorms. They need to accommodate the rigors of study that are usually more challenging than high school."

Over the past 15 years, depression has doubled, suicidal behavior tripled, and sexual assaults quadrupled on our nation's campuses. Of the 18 million college students, 45 percent self-report depression so severe it was difficult to function, 95 percent report feeling overwhelmed at times, and 9 percent report suicidal ideation, according to a recent survey by the American College Health Association.

Mental health challenges include, but are not limited to, psychological trauma, gender issues, eating disorders, suicide, depression, anxiety, binge drinking, and substance abuse. College students have higher rates of addiction to alcohol or drugs than the general public, according to the National Center on Addiction and Substance Abuse Study of 2007. Forty-four percent of college-age students binge drink, defined as having five or more drinks in one sitting in the past two weeks.

They also are in a high-risk group for mental illness. "Many psychiatric illnesses occur during the late teens and early 20's," explains Dr. Kay. "Depression, bipolar disorder, anxiety, and schizophrenia often make their first appearance in this age group. These problems are pervasive and the needs enormous. Suicide is the second leading cause of death among college students. Every campus should have a comprehensive risk reduction program."

Nearly 25 percent of college students have taken a psychiatric medication and nearly 15 percent indicate they had been diagnosed with depression at some point in their lives. Indeed, the most commonly prescribed medications on college campuses are now antidepressants, surpassing birth control. "More students with a history of mental disorders are now in college," explains Dr. Kay. "Medication and psychotherapy are

helping these individuals function in the college environment. However, there needs to be continuity of care for these students.”

On most college campuses, student mental health is subsumed under the umbrella of student health services, which handles medical and surgical needs. While the mental health needs of college students have grown dramatically, campus resources have not. The majority of psychotherapy for college students is currently linked to non-university professionals, according to one recent study at a Big Ten school. Students need a place to go for both acute and ongoing care and there needs to be arrangements for crisis intervention on a 24/7 basis. Only about 40 percent of schools require students to have insurance for health care, and psychiatric care is not always covered in those programs, so both affordability and accessibility to mental health services are barriers to care.

“Universities were never intended to function as health care providers. In many ways they are cities without clear policy and mandates on health care issues,” he notes. “Institutions of higher learning are communities and it is on this level that interventions must be developed that are all inclusive, involving administration, faculty, student health and mental health care providers, peer group support, and dormitory resident advisors.”

Nationally, Dr. Kay is part of a select group in the APA assigned the tasks of developing guidelines for improving mental health services on campus and appropriate protocols for students who are a danger to themselves or others. “In our attempt to help students, we don’t want to stigmatize them or interfere with their rights of privacy and confidentiality. But we need to pull together all resources, including parents, to provide appropriate care for high risk students.”

Locally, Dr. Kay and the Department of Psychiatry have been proactive in addressing the mental health needs on campuses. Five regional institutions of higher education now have highly skilled physicians from Wright State’s psychiatry residency training program in their on-campus mental health services to provide the care students need to have a successful college experience.