

Getting Help: An Exploration into Mental Health Services at Virginia Tech

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Executive Summary

Professor Kulak's technical writing class with CRN: 19126 is making a website that would contain information about the mental health resources on and off the Virginia Tech campus as well as online to better inform and motivate students to make sure they and their classmates are getting adequate counseling for their mental health if needed. Group Two plans on making sure online sources that would alleviate and motivate students with untreated mental illnesses to get treatment and counseling.

To accomplish this task, research was done to find out what kind of obstacles prevent college students from getting treatment and counseling. A survey was made and 24 Virginia Tech students were asked a series of questions regarding their need for mental health services and why, if they needed them, did they not seek help. Afterwards, two individuals from the survey were interviewed, in order to gain a deeper understanding of what students needed to address their mental health concerns. Additionally, secondary research was done on surveys and articles, spanning from the American College Health Association (ACHA), to government institutions such as the Center for Disease Control (CDC), to universities such as the University of California in Los Angeles (UCLA) in order to compare the results of the primary research with the secondary research and see if a trend develops.

What was found was that the current status of mental health services, both on campus and in the area are not easily accessible to the student body, as reported by the student's that Cook counseling was hard to schedule an appointment with a quick turnaround time. There was frequent notation of frustration from the students, as they wanted to help, but they couldn't get in to get it quickly. Mental health issues are easily put off and not dealt with, especially with college students. When discussing how we as a group and Virginia Tech as a whole could help with motivating students to get help and making it easy for them to get what they need when they need it, students seemed to appreciate the concept of having a database of immediate resources, for example, mental health hotlines, where people can call whenever they need to and can converse with trained personnel for help. This can be used by anyone with a phone and has no expense either. Through these specific hotlines they are able to help prevent situations which may occur due to mental health moreover it gives students motivation since some barriers are eliminated.

The current state of preventing and treating mental health in college students is an ever changing state, and so with the purpose of this project culminating in developing a web page to serve the Virginia Tech students, we decided the most effective design would be creating a 'bank' of online and digital resources for students to use in a time of crisis.

Introduction:

In times of crisis (and specifically mental health crises), it can be overwhelming for students to know what their options are. In a traditional sense, a student in that situation would be expected/directed to schedule an appointment with their university's mental healthcare services, meet with a provider, create a plan to address whatever the issue may be, and hopefully create a solution for the student. However, the process may be difficult for college students who do not have the time to schedule and wait for an appointment, cannot afford the medication that could be needed, or are afraid of how their friends and family would react if they decided to get help. In a 2017 survey by the American College Health Association (ACHA), students reported that anxiety and depression are among the biggest factors that negatively affect their academic performance. Forty-two percent of participants said they had felt so depressed in the past year, it was difficult for them to function. (American College Health Association-National College Health Assessment II: Reference Group Executive Summary Spring 2018, 2018) This can be the reason for more students are admitting to having difficulties with their mental health, however, it is not the only reason--literature, television, and movies are normalizing mental health awareness. This is giving people who may have previously brushed off how they were feeling, an ownership and solidarity regarding what they can do to improve their mental health. With the recognition that with more individuals seeking mental health services, the members of this group realized that there was potentially going to be a shortage of resources on the Virginia Tech campus and New River Valley, and felt there had to be more places where a student in crisis, or nearing crisis could find assistance.

Methods

Secondary Research Methods:

This project began with secondary research. NAMI was found based off a google search of Mental health hotlines. Moreover, through NAMI's website, a 2012 survey was found. With Google searches like "why do college students not get treated," and "Mental Health Resources" other articles were found. Following the primary research, we complemented the findings with more secondary research which was found through the Virginia Tech library.

Survey method:

The survey was designed with the survey taker in mind. Every question is optional to answer, and it is stated at the beginning of the survey that they are optional, as it was recognized that it is a sensitive topic for many. Responses were also explicitly stated to be anonymous, so that students could be comfortable with sharing their thoughts and grievances. It is important to us that they can have a safe survey where they can feel they can share anything. Because the survey is meant to be taken by Virginia Tech students, we were able to make each question more specific. By using questions that catered more towards college students, we felt that it gave the survey more direct purpose. The survey was also simple; each question was made to be as simple and straight to the point, so survey takers didn't feel threatened or intimidated. Our question asking the taker why they or someone they know hasn't sought personal help had responses that we believed were the most common reasons preventing people from seeking help. With the survey, we also wanted opportunities to follow up with the respondents. For the follow-up, there was an optional field where the survey taker could leave their email.

Interview Methods:

Within our survey, we had the option for student's to give us their email addresses if they were willing and able to answer some more specific questions regarding their experiences. We had two individuals from our team reach out to those emails and set up times to discuss the topic at hand. We had a list of standardized questions, however we did not require that the interviewer stick to them, letting the individuals drive the conversation so that they could discuss their concerns and potential solutions regarding their experiences with their own mental health. This organic approach encouraged the students that were interviewed to delve as deep as they were comfortable with and really explain their love or distaste for their experiences here at Virginia Tech with the available mental health resources..

Findings

Secondary Research Findings:

Mental Health Myths and Facts found on MentalHealth.gov was a place to start gathering information surrounding the topic of mental health. They provide facts and myths to inform readers on this issue. Some of these facts support or Primary research. For example, the article

describes how common it is to experience a mental health issue, “One in five Americans experienced a mental health issue” (“Mental Health Myths and Facts,” 2017). In our survey we realized how common it was too, 100 percent of our participants either personally or someone they know experienced mental health issues. Some background that is needed to understand mental health is provided in this article also. Specific information deemed helpful is that “many factors contribute to mental health problems, including Biological factors, such as genes, physical illness, injury, or brain chemistry, Life experiences, such as trauma or a history of abuse and Family history of mental health problems” (“Mental Health Myths and Facts,” 2017). Understanding that mental health is not a scapegoat or “people with mental health can snap out of it” (“Mental Health Myths and Facts,” 2017). This information lowered the stigma and allowed the team to approach the project properly and inform the uninformed.

National Alliance on Mental Illness is a great resource since they are a well-known source in the mental health realm. Within NAMI’s website, there are several hotlines which allow people to receive immediate help related to mental health from suicide, financial, finding treatment and much more. (“Top 25 Helpline Resources,” n.d.) This page provides several hotlines as a remedy for people who can't afford or can't find the time to make an appointment. These helpful links will be the body of our website. Its intention is to provide immediate help to students and hopefully satisfy some of the lack that Virginia Tech has which is mentioned in the primary research.

The Virginia Department of Behavioral Health and Developmental Services also contains numbers for suicide hotlines along with information about how mental health is protected within Virginia Law and about what community service boards offer, like same-day mental health service. (“Crisis Service,” n.d.)

Having that kind of information can be beneficial when thinking about how much would getting treated cost and how much time it would take. NAMI has also conducted a survey in August 2011 through November 2011. The pool selected for this survey was national students who attended college within the past five years and have suffered from mental health. This survey was intended to gather information about the experience of these college students, and the support systems they had in place. NAMI found that out of 765 respondents 64 percent believed “[they] are ... no longer attending college because of a mental health-related reason” (Gruttadaro, D., & Crudo, D. , 2012). Since this was a prevalent issue throughout the responses NAMI provided tips for preventing student dropout due to mental health issues. All the tips throughout NAMI reports helped geared our team with prevention ideas for the website and set a guided for our survey question. Moreover, founded in NAMI’s survey an issue for students with mental health issues is the disclosure of information and the lack of school website providing information on mental health. This point is also connected to primary research since we found that VT needs to become more involved in mental health issues. (Gruttadaro, D., & Crudo, D, 2012)

Other articles have provided information on barriers to students receiving help. One article specifically is known as “Study shows stigma around mental health on campus correlates with students not seeking treatment.” According to this article, Healthy Minds Study was an online survey conducted annually, commencing in 2007, and since has received more than 175,000 responses. UCLA was the first researchers to examine Healthy Minds Study results by looking at results from different colleges and universities. UCLA analyzed data from 2009 to 2015 which included 62,756 respondents. UCLA found that “college students who experience suicidal thoughts are less likely to seek treatment if they go to a school where there is a high level of stigma around mental health issues” (wolf, 2018). Also found in this article is that students who attended a college or university with a higher stigma environment around mental health were least likely to acknowledge an issue. This article helps triangulate the data collected in our survey. Stigma was a recurring issue addressed by students at Virginia Tech. The data collected in this article shows that students at Virginia Tech will now be less likely to receive the help needed due to this stigma. In hopes of eliminating this, we offer online resources that will have no need for the society at Virginia Tech to know that this student is battling with mental health issues. On the other hand, a scholarly journal published in 2019 “Readiness to change and barriers to treatment seeking in college students with a mental disorder” stated that in their findings, stigma was not the most common barrier. Instead, they found that “The most commonly reported barriers were perception that treatment is not needed (66%), lack of time (26.8%) and preference for self-management (18%)” (Ennis et al., 2019). Lack of time was the second most common in our team survey. With the online resources provided for students through our website, there is no need to wait for an appointment or spend time attending them. This difference in data may be due to the participants being residents of the United Kingdom and the Republic of Ireland. Since their society may handle mental health differently than our society. Regardless of the research taking place in a different environment, it is still relevant when it comes to the time constraints people face when dealing with mental health.

Many sources based in the US come across the same points, regardless on number or diversity. An article, called Depression on Campus: Record Numbers of college students are seeking treatment for depression and anxiety. Schools can't keep up, is composed of several resources, such as a spring 2017 survey done on more than 63,000 students at 92 schools by the American College Health Association and interviews of students who had to withdraw from college because of their mental health and administrators. Problems college students face that the article repeats are the social stigma and the demand of counseling is higher than what universities can manage. Social stigma affected students like Nelly Spigner because despite how stressed she was from the amount of work she needed to do, being a Division I soccer player and an aspiring surgeon, she abstained from going to the counseling center, saying “No one wanted to be seen going up to that office.” (Reilly). Eventually she went to a school psychiatrist, was diagnosed with bipolar disorder, and withdrew her sophomore year when her symptoms worsened. People would not have to worry about their peers' judgement when using the website

because instead of being seen getting help and information for mental health, one can view that information using their computer in the privacy of their own home. Even if people do not care about the social stigma, they would still have a hard time receiving help from counseling services as the demand for such services is higher than what universities can accommodate for. (Reilly). The average university only has one counselor for every 1,737 students, which is less than the recommended 1,000-1,500 students. Colleges tried to address the problem by expanding their staff, but with few positive results. Counseling director, Barry Schreier, from the University of Iowa increased his staff by 50%, but more students were being seen, so even though they are able to see more students, the wait time remains the same even without the additional staff, which can be very difficult for a student who needs counseling at that specific moment. (Reilly).

Looking into some of the sources the article contains, we were able to come across the spring 2018 report from the American College Health Association. Many of the statistics remained stationary as of last year, with seriously thinking of suicide was around 12%, more than 40% saying they have been so depressed that they have had difficulty functioning. An interesting set of statistics is that at least 50% of all people that participated in the survey said they felt non-physical fatigue, extreme sadness, extreme loneliness, hopelessness, a feeling of being overwhelmed, and overwhelming anxiety in the last twelve months. (American College Health Association-National College Health Assessment II: Reference Group Executive Summary Spring 2018, 2018). Many of these feelings would be possible symptoms of mental illness, however almost 70% of students have not been treated by a professional. This piece of data is significant because regardless to why students have difficulty getting treatment, more than half of everyone surveyed has had a point in time, if not multiple where it would have been beneficial to get mental counseling, and the amount of people who do not get counseling would make students more susceptible to having to deal with a mental illness they do not know about.

There has been an abundance of issues when it comes to Virginia Tech campus and not being able to access help needed for mental health issues. One raging topic which was touched on in the interviews is that the availability of appointment on campus are limited and scares. In the survey report "World Health Organization Surveys International College Student Project: Prevalence and Distribution of Mental Disorders" (2018) it states that "the college years represent a distinct period in which there is a critical need to improve early identification and treatment for debilitating mental." With that being said there is more pressure on finding the correct sources and getting to them as soon as possible for college students with mental health issues. Having a campus with not enough resources can hinder students and risk them at dropping out. Even the authors recognized within the article that there is not enough resources for the amount of demand.

Since many issues were raised about the campus lack of resources articles, research was done to find ways to combat this. Our website will not be able to do much about the issues other than provide links for immediate help but there could be work done on the institutional level. In an article titled "The Rise of Mental Health on College Campuses: Protecting the Emotional

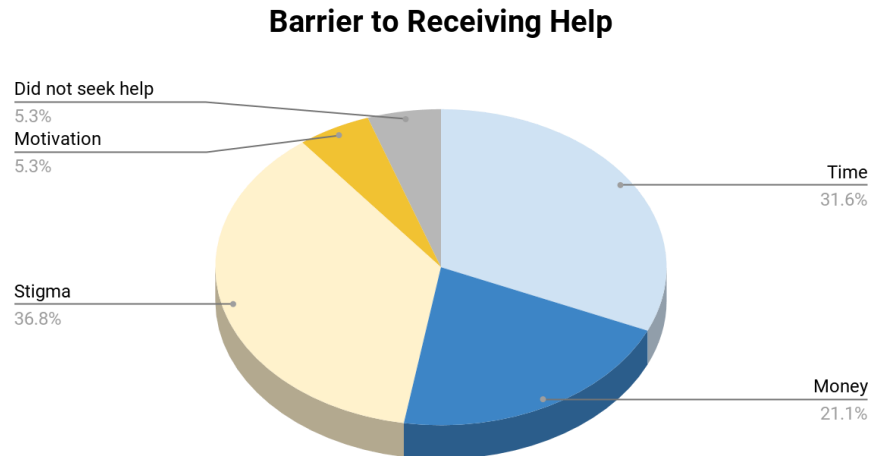
Health of Our Nation's College Students"(2015) found two ways to prevent mental health and establish better grounds to build and they are "support for emotional well-being and reduction of suicide and substance abuse must be considered a campus-wide responsibility. Second, it is imperative that senior leadership acknowledge the importance of student mental health and well-being and make this a shared value for the entire campus community." We can not do this without the help of our campus leaders. If these leaders become more influenced and motivated to help, opening in appointments may rise and students may not feel the stigma of the community daunting upon them. In this article it also mention the need to "offer accessible, consistent, and high-quality mental health services to students" ("The Rise of Mental Health on College Campuses: Protecting the Emotional Health of Our Nation's College Students," 2019). On campus we are lacking the accessibility of these resources. On the other hand or webpage will provide a place were if other in person locations are not fitting the mold hotlines can replace.

Survey Analysis:

From the responses of our survey, we see that out of a sample size of 24, all 24 respondents either experience mental health issues, or know someone that does. This results came as a surprise to us, as we were not expecting a unanimous answer to this question. While a surprising result, it shows us that mental health issues are more common than we realize. The following question asks if the person in question has sought help; 70.8%, or 17 of the 24 respondents replied 'Yes', 25%, or 6 out of 24 respondents replied 'No', and 4.2%, or 1 respondent out of 24 did not answer. From this question, we can see that a majority of students who have experienced mental health issues have sought help in some way, whether through counseling or any other way.

Although a majority of students do seek help, there is also a big percentage of students who do not seek help. With 25% of respondents stating that either they or the person they knew with mental health issues do not seek help, it shows that many people are hesitant to seek help. Students are hesitant to seek help for many reasons; the leading reason being the social stigma behind it. There is a big stigma behind seeking help for mental health issues, and a big part of that may be due to the fact that there is not enough information on counseling services. The following reason that students do not seek help is because they believe they lack the time to, or they do not have the money.. Out of the top reasons behind students not seeking help, the only one that can be effectively helped is the social stigma behind seeking help for mental health. Hopefully, lessening the stigma of seeking help will also help students consider that seeking help for mental health issues is worth setting aside time and money. There is a text field in our survey that asks the respondent the open-ended question of "What could Virginia Tech do to encourage

students to seek help?” and the majority of the responses have to do with lessening the stigma of seeking help. Other common suggestions were to make counseling an easier process and to make counseling services more well known. Our survey has shown a lot about mental health at Virginia Tech; there are more students who are suffering from mental health issues than we may realize. Students should not have to fear seeking help because of social stigma, and we believe that if more students know how common it is to seek help, there will be less hesitation about seeking help.



Data was collected through our survey about the common reasons students did not receive help. This data is located in the pie chart located above (Barrier to Receiving Help). These percentages are based off of eleven responses to the specific question “If no, why hasn't the person in question sought help?” The answer seen the most is “Stigma” with seven of the eleven responses. The lowest are motivation and did not seek help with only one response. Our team concluded that these are some barriers we would focus on elevating within our report and website.

Interview Analysis:

One of the interviewees was not someone with a mental illness, rather knew people with mental illnesses and heard from friends about what obstacles they faced and what could be done to address the problem. Corresponding with the information in the secondary research, the interviewee said that there is a stigma towards seeking mental health resources because it may seem that someone who has a mental illness is weak or inferior. The interviewee also has friends who went to Cook Counseling, who complain about how appointments take weeks to get, but this problem could be addressed by increasing the funding and staff of Cook Counseling, which is contrary to the secondary sources. When the idea was pitched of making a website to address the problems, the

interviewee was against the idea, stating that websites do not feel personalized and caring, which someone who needs counseling would want. Another student who was spoken to was someone who had sought help personally for mental health and they spoke of how long it took for the on campus resources to be available and how local providers were very expensive and often out-of-network for insurance. She mentioned that she ended up using an online therapy service called “BetterHelp.com” for a year, while also speaking to Cook counselors intermittently. When asked about a website, she thought a place where resources like BetterHelp or 7Cups (another online resource, this one being free) could be easily available for students, would be helpful. She said that it took her awhile to find the online service and if there had been a website compiling several resources that could be available to students in crisis would be beneficial. Another interviewee echoed that the same sentiment, adding that they ended up not seeking services as it the wait list for Cook at the time was over two months long and they were not able to wait that long and ended up using friends to cope with what had been going on in his life. He mentioned that he wished there had been a website or an app that had links to places where he could have spoken with someone who understood, but he just didn’t know those resources existed. After speaking to the students, we understood the role that this website should play--a place where students can get the immediate help, while they may be waiting for a brick-and-mortar solution to arise.

Conclusion:

When starting this research, the topic seemed wide and daunting. Near the end it became more concise and understandable. We have found that most college students from across the nation has experienced or has known of someone who experienced mental health issues. We also realized that college students have similar obstacles preventing them from getting treated, having a stigma towards getting mental counseling, lack of money to afford medication or counseling, and time. Time could be that college students are too busy with their schedules and cannot take the time out of their day to set up an appointment and meet or that it takes too long for students to get an appointment once they decide they need one. When it comes to time this stands out in the interview conducted through our primary research. Stigma comes from the societies perception on mental health. We discovered not every location nationally has as prevalent stigma as United States does. On the other hand, most research in the United States, including our own at Virginia Tech, has found stigma to be a barrier. Moreover, founded through secondary research is the higher the stigma the least likely students will seek help (wolf, 2018).

Prevention and motivation was a focus during this process. We have also learned of the online sources that people can use to get service in little time if used. One of those

sources are numbers for mental health hotlines, where people can call whenever they need to and can converse with trained personnel for help. This can be used by anyone with a phone and has no expense either. Through these specific hotlines we are able to help prevent situations which may occur due to mental health moreover it gives students motivation since some barriers are eliminated. Another source was about how Virginia's community service boards. Being able to find out the location of a community service board near the viewer can be beneficial as they can go to one and get same-day mental counseling. These are some of the findings and conclusions we have drawn from the research throughout this report.

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