## Student Well Being: Class Check-Ins for Mental Health

Tara Fox, Wendy Helmcamp, Angie Bullard, Dittika Gupta, Kelly Medellin, Cassie O'Brien, & Carrie Taylor







## **Objectives**



The importance of checking in with students' mental health and implementing strategies in the classroom.

02

Share student perspectives regarding check-ins within classes.



Provide tools for how to implement mental health check-ins for online and in-person students.

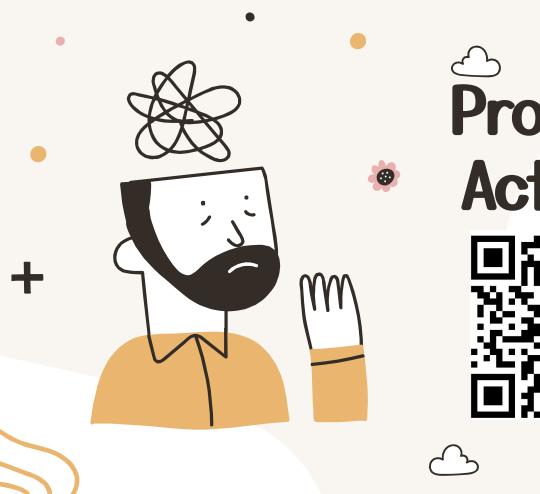
04

Discuss cultural competencies regarding mental health.









# Process Activity





- To overcome high levels of stress, depression, and anxiety need for relaxation, calming activities, and focusing on the *here* and *now* in their overly stressful lives.
- Left untreated, feelings of anxiety, depression, and stress can lead to suicidal thoughts. *According to National Statistics of College Populations, suicide is the second leading cause of death for college students (The Regents of the University of Michigan, 2022).*
- Often, mental health care of students is left to campus counseling centers,
   BUT faculty also have a role.
- Preventative interventions are the best way to identify student concerns that may otherwise not be addressed.



Lipson et al. (2022) found that the mental health of college students across the United States has been on a consistent decline for all eight years of data analyzed, with an overall **135% increase in depression** and **110% increase in anxiety** from 2013 to 2021; the number of students who met the criteria for one or more mental health problems in 2021 had doubled from 2023.

**More than 60%** of college students met the criteria for at least one mental health problem, according to the Healthy Minds Study, which collects data from **373 campuses nationwide** (Lipson et al., 2022).

Often students will only seek help when they find themselves in a mental health crisis, requiring more urgent resources. How can we create systems to foster wellness **before** they reach that point? (Lipson et al., 2022).

In the United States, **60%** of university students present to college counseling centers with anxiety, **46.9%** with stress, and **44.3%** with depression (Association for University and College Counseling Center Directors, 2022).



#### **EMOTIONAL**

Coping effectively with life and creating satisfying

s L

#### FINANCIAL

#### PHYSICAL

Recognizing the need for physical activity, diet, sleep and nutrition.



OF WELLNESS

#### SOCIAL

Developing a sense of and a well-developed

#### OCCUPATIONAL

Personal satisfaction and enrichment derived from one's work.

#### SPIRITUAL

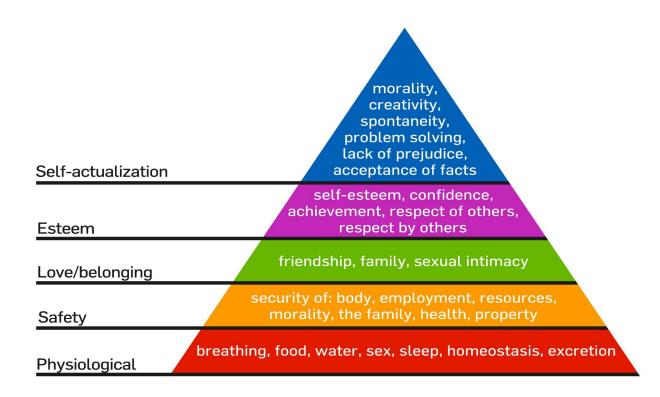
Expanding our sense of purpose and meaning in life.



- Feelings of restlessness
- Having trouble concentrating or making decisions
- Excessive worry
- Unexplained physical complaints, i.e. body aches, headaches, or stomachaches
- Feeling irritated or agitated
- Sleeping too much or not sleeping enough
- Eating too much or not eating enough
- Feeling tired or worn out
- Experiencing memory issues
- Having suicidal ideation or thoughts of self-harm
- Feeling confused
- Feeling shame or guilt



## Maslow's Hierarchy of Needs





- 1910-1919 Mexican Border War
- 1917-1918 World War I
- 1918-1920 Russian Civil War
- 1929-1939 Great Depression
- 1934-1940 Dust Bowl
- 1941-1945 World War II
- 1950-1953 Korean War
- 1950-1975 Vietnam War
- 1990-1991 Gulf War



## Coping Skills



The dictionary defines *cope* as how to deal effectively with something.

**Negative coping skills** are things that we do that allow us to run, numb, or avoid the situations that are causing us discomfort. **Positive coping skills** are things that we do that place us in a better head space to deal with our discomfort. Neither positive or negative coping skills fix whatever the issue is that is causing the discomfort. Coping skills determine how we process our issues.

**Negative Coping Skills**: procrastination, drugs, alcohol, or substances, blaming others, isolating or withdrawing from others, gossiping, criticizing others, manipulation, lying, enabling, denial, sleeping too much, or eating too much.

**Positive Coping Skills**: Writing, drawing, painting, taking a warm bath or shower, taking a walk or being active, watching TV, movie, or listening to music, playing a game, reading, talking to someone you trust, setting boundaries and saying "no," listing what we are grateful for, creating healthy routines, or meditation.

Remember, it's all about our intention. We can choose a positive coping skill and turn it into a negative one if our intention is to run, avoid, or numb ourselves.

## Undergraduate Student Check-Ins

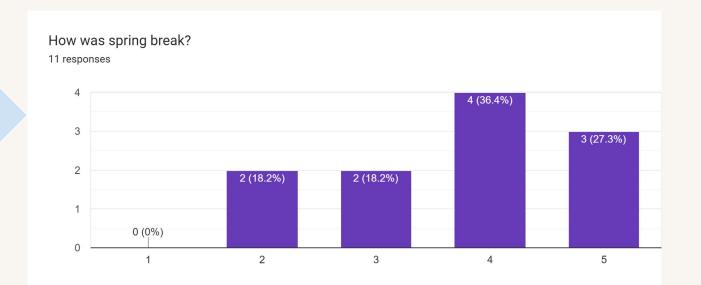
- Method: Google form check-in
  - QR Code top right as an example
- Class: Human Diversity (Mostly freshman/sophomore students)
- My form doesn't collect emails so it's "Anonymous"
  - Students can add their name if they want to
- Personal Benefits I've seen:
- Allows those students who want to share the opportunity to do so
- One of the check-ins allowed me to connect with a student who was going through a tough family issue. I wouldn't have known about this circumstance without the check-in.
- Allows me to learn about my students (for example, learning I have a student who doesn't like to talk about "feelings.")
- Documentation by a student that they didn't need help and don't have any questions.







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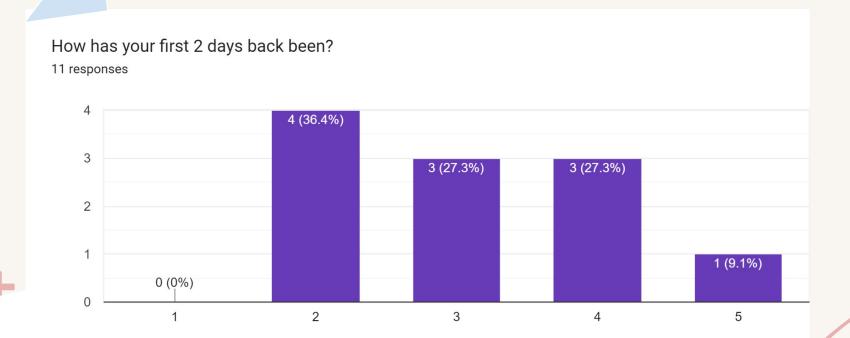




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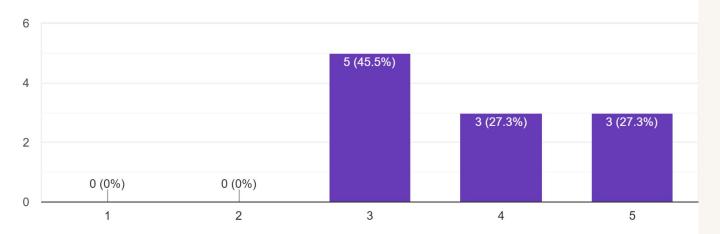
## Student Check-Ins







Do you like having a check in? Does it feel good to have a quick way to "voice" how you are? 11 responses





Anything you can share regarding any of the above questions? (including why you like/dislike the checkins?) Honesty is good! 8 responses I love my spring break because I got some things sent to our family from Mexico N/A. I'm pretty neutral on the check ins, I had a good spring break:) I like the check ins because it shows that you care. I definitely like feeling like my thoughts, feelings, and opinions matter to my teacher. I had no time for myself this spring break, i just worked with my mom and aunt by cleaning houses and then i took care if my little cousins It's just because I don't feel comfortable talking about my feelings I think the check in are cool



Anything you can share regarding any of the above questions? (including why you like/dislike the checkins?) Honesty is good!

8 responses

I love my spring break because I got some things sent to our family from Mexico

N/A.

I'm pretty neutral on the check ins, I had a good spring break:)

I like the check ins because it shows that you care.

I definitely like feeling like my thoughts, feelings, and opinions matter to my teacher.

I had no time for myself this spring break, i just worked with my mom and aunt by cleaning houses and then i took care if my little cousins

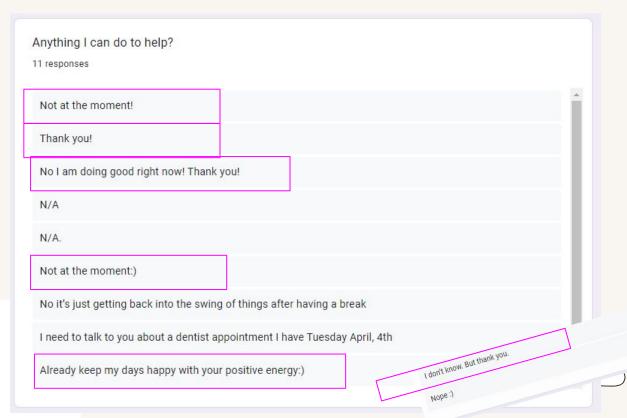
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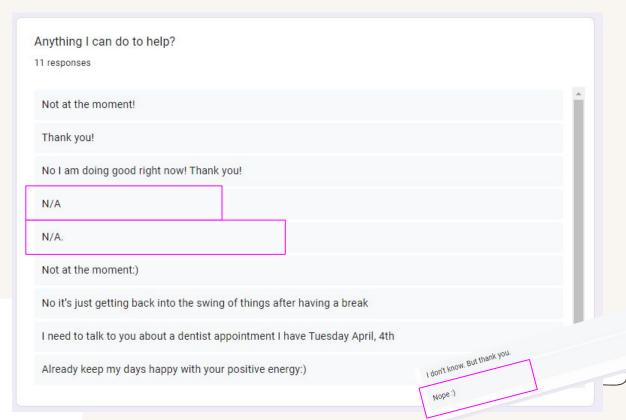


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Anything I can do to help?		
11 responses		
Not at the moment!		A
Thank you!		
No I am doing good right now! Thank you!		
N/A		
N/A.		
Not at the moment:)		ı
No it's just getting back into the swing of things after having a break		
I need to talk to you about a dentist appointment I have Tuesday April, 4th		
Already keep my days happy with your positive energy:)		
	I don't know. But thank you.	

6

- Method: Flipgrid
- Class: Math Methods Class (Junior/Senior)
- Personal Benefits I've seen:
- Allows me to ask a question and I can set a time limit on the response.
   (I limit it to 2 minutes)
- Students usually film this from home so they feel safe while sharing.
- Gain insight into my students, their thought processes, and needs.
- Allows me to see how each student communicates, as well as who does/does not use academic vocabulary.
- Allows students to practice social skills.

- rudent Check-Ins
- Method: Flipgrid
- Class: Math Methods Class (Junior/Senior)
- Question Example:
  - How would you rate your self-confidence in "doing math" as well as "teaching math"?
    - 1st of the semester so I can find out how they feel about math in general

- Method: Flipgrid
- Class: Math Methods Class
- Question Example (cont.):
  - What is your best and/or worst memory associated with a math class?
    - This allows me to connect their experience to the kind of teacher they hope to be (or not be).
    - Facilitates teachable moments I was able to talk to them about <a href="https://how.important">how important</a> their daily interactions are with students because their "worst" memories are examples of how a person's self-confidence can be impacted (still years later)!

### Graduate Student Wellness Check-In Feedback



When asked how important it is for professors to talk to students about overall wellness (self-care, mental health, burnout, stress, etc.), with "0" being not important and "100" being the most important,

graduate students said "81/100."

When asked when professors talk about overall wellness in class (self-care, mental health, burnout, stress, etc.), does it assist you in navigating your own overall wellness,

graduate students stated 87% "Yes."

When asked, do overall wellness (self-care, mental health, burnout, stress, etc.) checks need to be a bigger part of student instruction,

84% of graduate students said "Yes."

#### Graduate Student Wellness Check-In Feedback



When asked, in what ways has talking about overall wellness (self-care, mental health, burnout, stress, etc.) in classes impacted your relationship with your overall wellness, graduate students stated:

"I think it is a reminder for me to stop, think check myself. I would suggest professors do a weekly survey online and maybe students will be honest and if need more conversations about self care it can be done as a group or individual. :)"

"I think, for me, discussions about self-care has helped me to understand that self-care is not selfish--it's ethical."

"I think it's an important reminder particularly in the grad school dynamic. We are working so hard to push ourselves and desire to impress our instructors. Hearing them discuss wellness feels like a permission slip to focus on ourselves as well. The reminder helps me prioritize things, and in turn makes me a better student."

"It serves as a reminder to get personal care in. I feel sometimes we get so busy with managing work, family, and school that we forget to check-in with ourselves. Additionally, I feel regularly addressing overall wellness will help alleviate some of the stigma and guilt associated with the idea of having to give 100% all the time regardless of how we're feeling."

"Hearing how other people navigate self-care is helpful. You can tell when students/professors/professionals practice self-care, they are more available, positive, and better able to help others."





When asked, in what ways has talking about overall wellness (self-care, mental health, burnout, stress, etc.) in classes impacted your relationship with your overall wellness, graduate students stated:

"These discussions normalize the feelings of burnout and stress that can occur during the graduate program while also offering coping strategies. When we do not discuss these issues, it can feel like the work takes priority over the human experience. I am very grateful when professors take the time to address this topic and present useful coping skills they have used to manage this area in their own education and career."

"It has helped me remember to focus on self-care when it has escaped my mind. With everything going on, we tend to place our overall wellness on the back burner. Talking about it in class helps me find new ways to practice self-care and keep from experiencing burnout."

"Talking about overall wellness in class has made my health and fitness feel important. It has made me, as a student, feel valued by my professor and the university I represent. The discussion has made me believe that taking care of myself, including my self-care, improves mental health, lessens the chance of burnout, reduces stress, and improves my capability to handle unavoidable stressful situations. But most importantly, talking about self-care has made it more acceptable and made me feel less guilty when I actually do relax and take time for myself so THANK YOU! I now better understand taking care of myself is a top priority and a must rather than a personal preference or choice."

"In general, I am so busy helping others that I do not take care of myself. Talking about these areas of self-care in class reminds me to re-focus on areas of my health that I tend to ignore. I have learned so many helpful techniques for self-care, and I use some of these techniques every day."

## Tools for Wellness Checks



Faculty should not replace mental health professionals/counselors, but can support students with wellness checks!

- Discuss success and challenges of the week and coping strategies
- Normalize talking about mental health, burnout, self-care, and stress
- Utilize modeling for self-care and help-seeking
- Discuss the areas that you are trying to grow within wellness
- Include a syllabus statement on mental health
- Strategies such as beginning, middle, and end semester feedback, 5-minute check-ins
  - Sharing good things; rose, bud, and thorn; victory and successes; rewind and start over
  - Mindful minute at the beginning helps them become more fully present



**Resources for Faculty** 





Mental Health and College Students of Color

Help-Seeking and Diverse College Students

Mental Health Cultural Stigmas

Support for MSU Students



## Mental Health and College Students of Color

Students of color report higher rates of emotional distress in their freshman year and of keeping their difficulties to themselves.

Students of color are less aware of mental health services, less likely to be diagnosed, and less likely to be treated.

Suicide is the second leading cause of death amoung American college students, and rates of suicide were highest for American Indian, Non-Hispanic males.

(American Council on Education, 2018; Burke, 2021; Powell, 2019; Center for Disease Control, 2020)

In addition to typical college stress, what are students of color uniquely experiencing as stressors?

- Exposure to incidents of racism, discrimination, and microaggressions
- Assimilation, historical trauma
- Questions about belonging on campus/experiencing isolation and loneliness from the often vast differences between home culture and environment and that of school







College students of color are less likely to seek help.

Caucasian/White students were advised to seek help from the first person they told at statistically significantly higher rates than all other racial and ethnic groups.

Resource

Suggestions based on results of study:

- Increase efforts in mental health promotion with BIPOC (Black, Indigenous, and People of Color)
- Consider whether the typical means of reaching BIPOC students are culturally relevant
- Promote the importance of help-seeking
- Pairing mental health providers with academic service providers, such as career counselors, might allow for the identification and treatment of mental health issues in these students because they may find academic assistance more culturally appropriate.





(Brownson et al., 2014)

**SCAN ME** 



## Mental Health Stigma



"Mental health is deeply stigmatized in India and South Asia, mainly because of lack of awareness, miseducation, and wrong responses to illness - all are prevalent. Modern and cosmopolitan India is becoming informed and aware, but that is minuscule, 20-30 percent of 1.5 billion. The presence of multiple religions, languages, cultures, beliefs and value systems complicates the landscape."

"In rural communities, some people have been taught to pursue self-reliance. Still others, myself included, grow up in religious households in which mental health issues are viewed as sinful, or evidence of weak faith. We are taught that if we pray hard enough, and have faith, God will "fix" our anxiety or depression. In addition, there is a lack of trust in anyone to maintain confidentiality in a small, close-knit community. There is fear of negative judgment from others as being incompetent, less capable, or "crazy."

"I am an Adult Child of an Alcoholic, and I was raised to keep everything behind closed doors. I was expected to always have a smile on my face and not express any emotion, except for happiness. Crying or feeling sad was seen as a sign of weakness."









## Mental Health Stigma

"In my experiences growing up in African-American culture, significant mental health issues in adults and children were the subjects where we were removed from the room, as it was "grown-up talk," and we didn't need to be listening while the "grown" folk spoke about these issues. As a result of those conversations, I saw mental health issues manifest themselves in same-aged peers and family members being sent "back east," which was typically a family member living outside of the area who didn't have any children to take care of, or confined to a room at "granny's house," and children were not allowed to be anywhere near that person unsupervised. In retrospect, I never knew if the lack of use of professional mental health care services was due to lack of money and/or resources, lack of knowledge about availability of help, or simply not wanting people to be "in our business," or knowing that issues existed."





## Mental Health Stigma

"My parents wanted me to go to counseling to be cured from being gay. If that's what counseling is about, I don't want anything to do with it."

"In my Hispanic/Mexican culture, there is a fear of being labeled "loco" or crazy if we ever expressed mental health concerns. The men in our families also had a tendency to view those with mental health issues as weak and mentally unfit. Therefore, many stayed quiet and are now experiencing the effects of that silence."







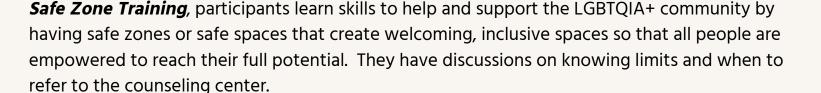




**Women In Support and Empowerment, or WISE**, is a supportive space for Black, Indigenous, and Women of Color (BIWOC)- WISE women talk and participate in activities, such as Sister to Sister, that facilitate self-exploration, self-reflection, and self-love as attendees share similar, yet distinctive journeys in college and through life. Feel valued, be challenged, leave empowered.



The *Men of Color Alliance (MOCA) Affinity Group* engages male students of color at Midwestern State University in culturally-responsive programs and activities that result in improved retention and graduation rate of this population, as well as developing greater connection to the MSU campus community. MSU is a member of the Texas Education Consortium of Male Students of Color.







## MSU Counseling Center

The mission of the Midwestern State University Counseling Center is to provide opportunities for students to know themselves as individuals, to form deeper relationships with their peers, and to increase their wellness.

In person services 8:00 a.m. to 5:00 p.m. Monday through Friday. Online counseling is also provided.

Faculty/ Staff Help

Self-Help Apps



#### Not enough time in the day?

We hear you and MSU is now offering free virtual counseling for students who are looking for evening appointments.

To register and sign-up using your my.msutexas.edu email address, please visit the BetterMynd website.



#### **How To Access TAO**

#### Interested in Counseling?

This screening will ask you a few questions in each area and provide some feedback along with some ideas about next steps you can take.





## Myths About Mental Health

- Mental health issues are uncommon.
- People dealing with mental health issues cannot function.
- Struggling with your mental health is a sign of weakness.
- Going to a counselor is like paying for a friend.
- I will never struggle with mental health issues.
- Mental health issues aren't real issues.
- Struggling with mental health issues means that you are "crazy."
- Someone who looks like they have it all together on the outside, does not struggle with mental health issues.
- You only need to get help for your mental health if things are really, REALLY bad.
- No one goes to counseling.

## Resources

- Call/text the Suicide & Crisis Lifeline at 988 (confidential, free, 24/7)
- Crisis Text Line: Text HELLO to 741741 (confidential, free, 24/7)
- Helen Farabee Center, Local Mental Health Authority
   (psychiatric services, counseling services, crisis intervention)

940-397-3143 (office)

800-621-8504 (24-hour crisis number)



- MSU Counseling Center 940-397-4618
- MSU Psychology Clinic 940-397-4340
- First Step Inc. 940-723-7799
   (Rape Crisis Center, Domestic Violence, Sexual Assault)
- Red River Hospital 940-322-3171 (inpatient psychiatric hospital)
- Red River Recovery Center 940-761-3034 (inpatient drug/alcohol treatment)











## Reflection













# Thanks!

Do you have any questions?

tara.fox@msutexas.edu
wendy.helmcamp@msutexas.edu
angela.bullard@msutexas.edu
dittika.gupta@msutexas.edu
kelly.medellin@msutexas.edu
cassandra.obrien@msutexas.edu
carrie.taylor@msutexas.edu

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