



INCLUDING STUDENTS WITH MENTAL HEALTH CONDITIONS

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Acknowledgements



The mission of the Transitions to Adulthood Center for Research is to promote the full participation in socially valued roles of transition-age youth and young adults (ages 14-30) with serious mental health conditions. We use the tools of research and knowledge translation in partnership with this at risk population to achieve this mission.

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By the end of today's discussion, participants will be able to:

- Describe the common challenges of students with mental health conditions
- Articulate how condition-related executive functioning implications affect critical academic skills, particularly in virtual learning environment.
- Apply information gained from group discussion to consider how services can change on their campus (virtually and in-person).





Discussion-Based Learning

- We are going to go over a little information...and then we chat!!
- This has been designed as a discussion
- Use the chat feature to contribute to the discussion
- Raise your hand if you would like to talk
 - I would **love** if you activated your camera when you talk





WARM UP QUESTION FOR THE GROUP: LET'S "CHAT"

What are the common/ typical
accommodations for students with MS?





How are these different from AAT for a student with bipolar?

What are the similarities and differences?

And why?



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Prevalence on Campus



- Students with MHC are considered to be the most rapidly growing population on campus (AUCCCD, 2016).
- 20% of students reported a diagnosed psychiatric condition (ACHA-NCHA, 2016) .
- Approximately one-third of the student population experience symptoms of a mental health condition (Eisenberg et al., 2013).
- Utilization rates of student counseling services on campus has also steadily increased.
 - Over the course of the last 10 years, campus service utilization has increased each year (Lipson, Lattie, & Eisenberg, 2018).



Attrition Rates



- Students with MHC have the highest rates of college dropout compared to any other group, including those with other disabilities (Kessler et al., 1995; Salzer, 2012; Arria et al., 2013).
- Estimated dropout rate of 86% (Kessler, et al., 1995; Salzer, et al., 2008; Collins & Mowbray, 2005)
 - triple the rate of freshmen at 24%, the highest drop-out rate of any general student population (U.S. News and World Report: “Freshman Return Rate”)
- 70% of a 264 student sample reported at least one failed attempt at school; 25% of those were on their second, and 44% were on their third or more attempt (Mullen, unpublished data)



Common Barriers For This Population



- Mental health symptoms,
- Lack of specialized support,
- Inadequate executive functioning skills,
- Financial aid issues,
- Lack of adequate accommodations,
- Avoidance of disclosure due to fear of discrimination, and
- Lack of access to specialized services

(Mullen et al., 2017; Markoulakis & Kirsh, 2013; Collins & Mowbray, 2005; Mowbray et al., 2001; Manthey, et al., 2015)



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GPA & Persistence



- It has been a common belief that students with MHC have poor grades (unsubstantiated in the literature)
- Students with MHC in our samples had GPAs of 2.9-3.1 at baseline
- GPA alone does not tell us the full “story” of someone’s academic progress, persistence, or performance.
- What we need to know is the *pattern of persistence*?
 - Do students with MHC look different from any other group?



“White Knuckling”



My hypothesis is that students drop out or fail to return for a variety of reasons:

- The amount of personal effort required to have decent GPAs is exhausting
 - Cycles of crashing and burning and then good performance
- Do not have adequate supports on campus or in the community
 - Approximately 25% of our previous samples have used Disability Services
 - VR pays for college less often for this group than other disability groups
 - Supported education programs are few and far between





CHAT IT UP...

Thinking of the students who come to your office...

Is this “white knuckle” theory true of students who access your services consistently?

Could this be true for students who do not access your services?



Barriers Endorsed by College Students



Over **70%** of respondents:

- Concentration (85%),
- Time management (77%),
- Stamina (75%),
- Organization (71%),
- Prioritizing tasks (70%)

Over **50%** of respondents:

- Difficulty memorizing information
- Managing psychiatric symptoms
- Studying for exams
- Taking exams
- Preparing for class
- Writing papers
- Taking notes
- Meeting deadlines

(Mullen, Gill, Davis, Salzer, unpublished data)

I think these are the reasons why students are white knuckling it...



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My Ah-ha moments...



- Preliminary analysis of educational barriers revealed that students more commonly endorsed issues associated with executive functioning tasks than “classic” mental health symptoms
- Students may not be failing out/dropping out of school because of their mental health symptoms per say, but because they had *difficulty with executive functioning skills and academic self-management*.
- Called into question (for me) what we thought we knew about students with MHC may be assumptions based on prior contemporary beliefs...rooted in stigma and discrimination



Core Executive Functioning Domains



- Inhibition:
 - response inhibition- resisting temptations & impulsivity
 - interference control- selective attention & cognitive inhibition
- Working memory:
 - ability to “hold” information while manipulating other information
- Cognitive flexibility:
 - thinking “outside the box”, seeing different perspectives, easily adapt to change circumstances

See Diamond (2014) Executive Functions, Annu Rev Psychol



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Cognition & Skills



Commonly Measured Cognitive Domains

- Processing Speed
- Attention/Vigilance
- Visual Learning
- Verbal learning
- Reasoning/problem solving
- Social Cognition
- Prospective Memory

Common Skill Domains Affected

- Organizing
- Planning
- Prioritizing
- Initiating tasks
- Completing tasks
- Regulating emotions
- Self-monitoring
- Note-taking





CHAT IT UP...

What are the ways you see difficulties with EF skills in services?

As a practitioner, does this get in the way of you providing effective services?



Academic Persistence & Performance



- Difficulties with EF skills affect a student's ability to actively engage in learning behaviors and “course correct” when things are going poorly
- Pair these EF skill barriers with the cyclical nature of MH symptoms...and now we have significant barriers to academic persistence and performance
- EF skills are essential building blocks to self-regulated learning



Self-Regulated Learning (SRL)



- SRL is “an active, constructive process whereby learners set goals for their learning and then attempt to monitor, regulate, and control their cognition, motivation, and behavior” (Pintrich et al., 2000).
- Students who use greater numbers of SRL strategies have better academic outcomes than students who lack self-regulatory skills (Zimmerman, 2000).
- Lower cognitive functioning, including executive functioning skills, is strongly associated with poorer psychosocial, academic, and vocational functioning (Green, 2006; Green et al., 2015; Wykes, 1994; Kurtz, 2011; McGurk, et al., ; Mullen et al., 2017)
- Lack of sophisticated EF skills is a barrier to SRL and academic persistence



Four Phases of SRL



Student's skill level are associated with:

- how do I organize myself to accomplish this task/goal (planning),
- what is my progress toward accomplishing this goal (monitoring),
- how do I minimize distractions to this goal (control), and
- how do I feel about the process (reaction, reflection).



Students who struggle with EF skills



- Late for classes/appointments
- Difficulty taking notes
- Difficulty remembering due dates
- Difficulty finishing assignments/papers/tests on time
 - difficulty estimating how long things will take
- Distracted easily
- Physical disorganization:
 - can't find things, backpack's a mess, losing objects
- Difficulty completing thoughts: “what was I talking about?”
- Difficulty connecting information
 - Writing coherently, linking earlier learnings with current material



Things to Consider



Develop

Let's talk about how campuses currently develop EF & SRL skills.

What do we currently do?
Do you have suggestions about what we *could* be doing differently?

Accommodate

Let's talk about how campuses currently accommodate EF & SRL skills.

What do we currently do?
Do you have suggestions about what we *could* be doing differently?



Covi-19 Related Implications



- Going on the assumption that many/most students with MHC struggle with EF skills and self-regulated learning.
- The implications to only-online learning is significant
- Most students with MHC have difficulty with organization
 - Navigating LMS
 - Organizing work on and off of the computer
 - Professors are often challenged by LMS course development & execution
- Managing electronic-only reading
 - Many students with MHC state they “do better” with paper copies of articles/readings
- Harder for professors to identify a struggling student



CHAT IT UP...



The expectations for Fall semester will be different than last Spring's semester.

- How do students prepare for this?
- What are AAT that may be helpful for EF challenges & online learning?
- What can we take from students with other disabilities who experience cognitive barriers?

Can we apply these to students with MHC?





THINKING BACK TO OUR STUDENT WITH MS...

Are we thinking anything differently after our discussion today?



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Thank you!!!



Any additional questions or thoughts?



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