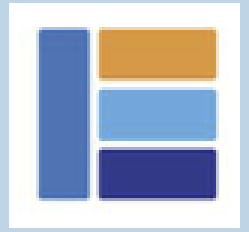# Supporting Academic Re-engagement for Students with Mental Health Conditions: Strategies for Resilience and Inclusion

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Rutgers University

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Boston University

Today's Agenda

- A quick poll
- Status of ongoing college mental health crisis
- Overview of college re-entry programming
- Two studies describing coaching, student experience, and re-entry experience
- College re-entry strategies
  - Instructors
  - Administrators
  - Office of Disability Services (ODS) staff
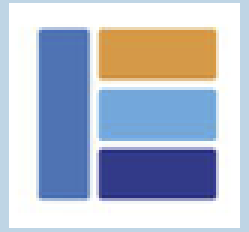- Group discussion using vignette

Which of the following best describes your role in supporting college students?
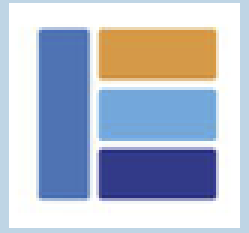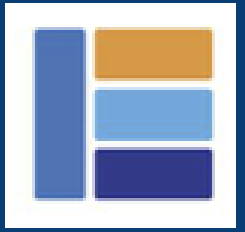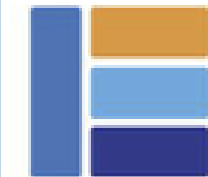
What Does the Data Say?

Why We Are Here

- College student mental health
  - Essential component of overall wellness
  - Inextricably linked to their overall success in higher education (Eisenberg et al., 2009)
- Students → more depressed, lonelier, anxious than any other generation of students before them (ACHA, 2014)
- Mental health challenges → very strong negative impact:
  - Academic performance
  - Postsecondary retention
  - Graduation rates (Eisenberg et al., 2009; Kitzrow, 2003)
- Impacts on employment trajectory

Major Depression by Year (Healthy Minds, 2024)

Major Depression by Year

Year	Value
2007…	8%
2009…	8%
2010…	9.2%
2011…	9.3%
2012…	8.3%
2013…	8.8%
2014…	11.6%
2015…	10.5%
2016…	10.3%
2017…	13.6%
2018…	18.4%
2019…	18%
2020…	17.6%
2021…	21.3%
2022…	23.3%
2023…	20.3%
2024…	19.1%
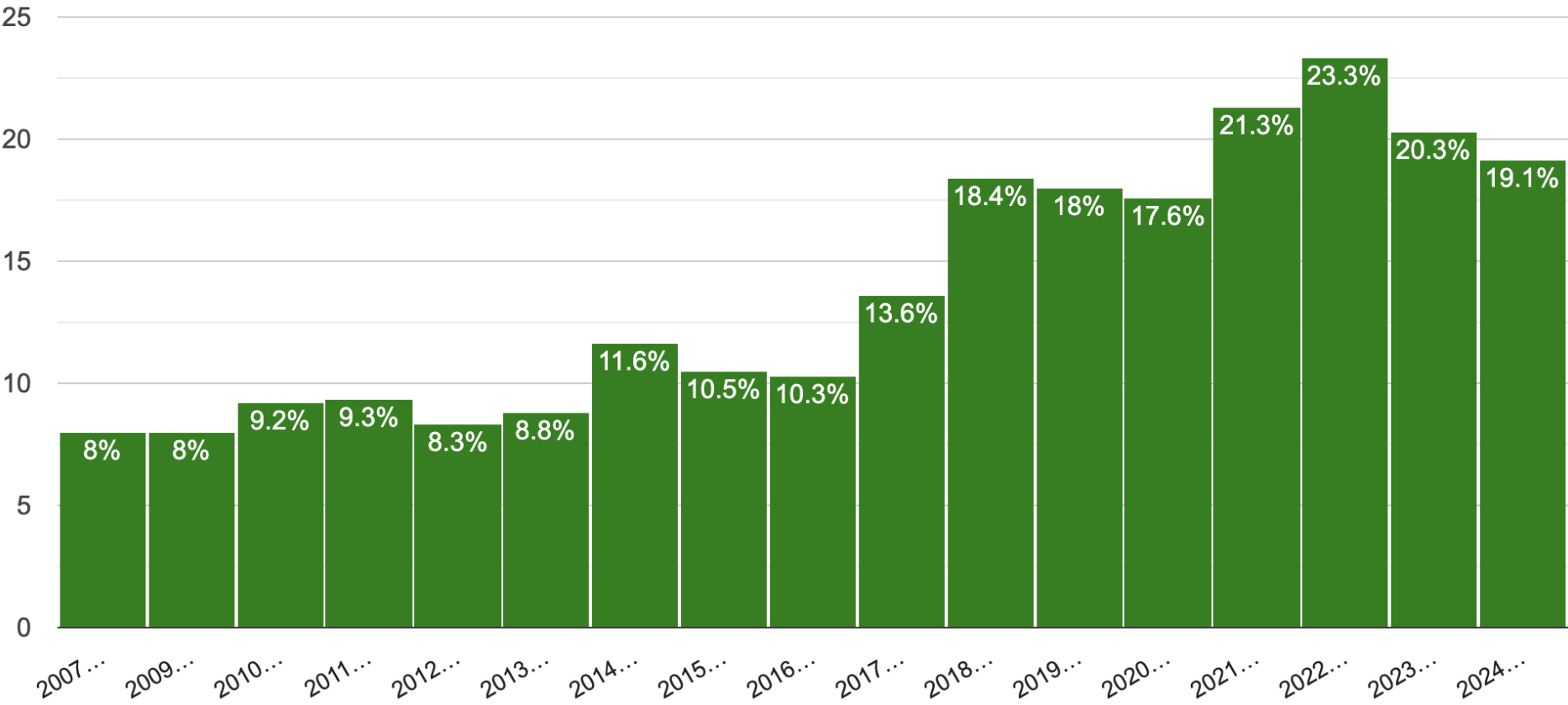
Severe Anxiety by Year (Healthy Minds, 2024)

GAD 15 or Above by Year

Year	Percentage	n
2013	6%	n=17905
2014	8.4%	n=16100
2015	8%	n=14911
2016	7.9%	n=29903
2017	10.4%	n=42640
2018	13.5%	n=51065
2019	13.8%	n=44481
2020	13.8%	n=81742
2021	16.4%	n=122116
2022	17.9%	n=85398
2023	16.7%	n=68435
2024	16%	n=94878
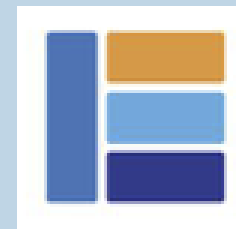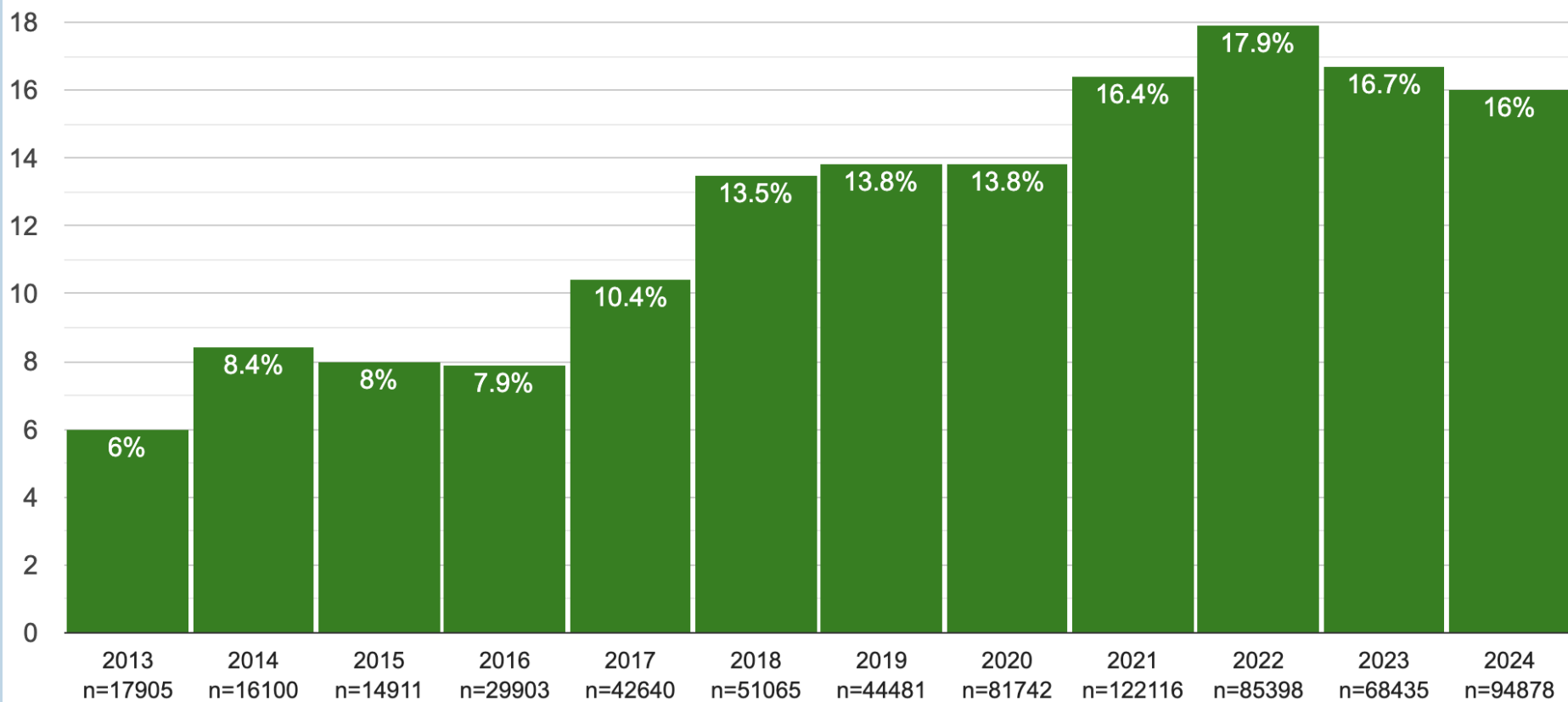
Perceived Public Stigma by Year

(Healthy Minds, 2024)

Perceived Public Stigma by Year

Year	Value
2007…	64%
2009…	50.5%
2010…	49.8%
2011…	49.9%
2012…	48.5%
2013…	49%
2014…	47.5%
2015…	48.1%
2016…	52.3%
2017…	47.4%
2018…	46.9%
2019…	46.8%
2020…	48%
2021…	45.3%
2022…	40.4%
2023…	41.2%
2024…	41.7%
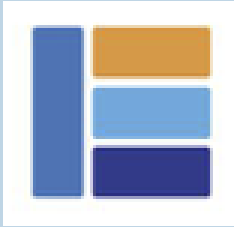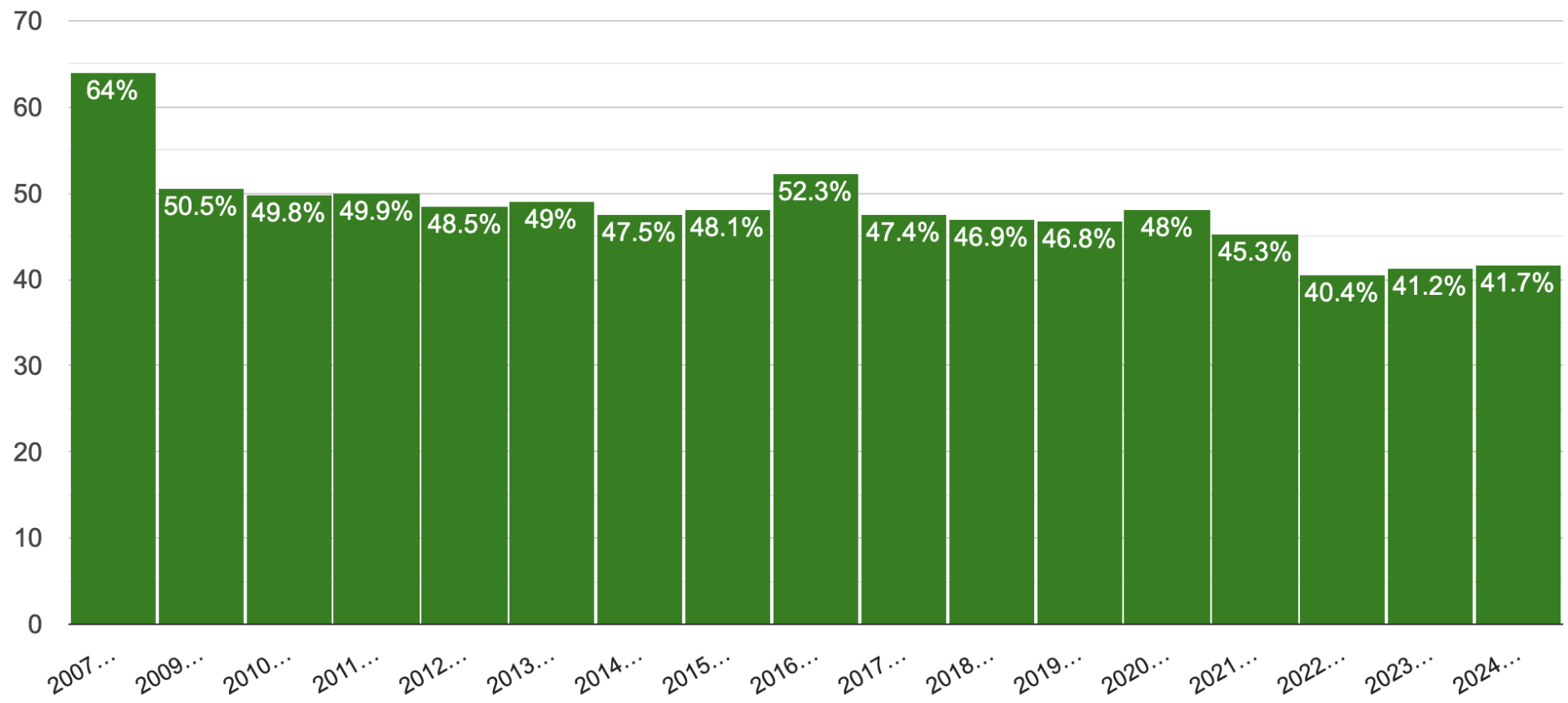
Using Psychotropic Medication
(Healthy Minds, 2024)
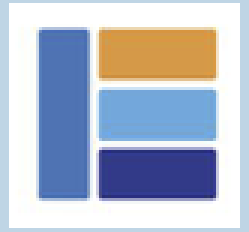
Currently Using Psychotropic Medication by Year

Year	Percentage
2007…	8.8%
2009…	10.4%
2010…	10.6%
2011…	12.2%
2012…	13.3%
2013…	11.4%
2014…	13.3%
2015…	13%
2016…	13.6%
2017…	16.4%
2018…	17.2%
2019…	18.2%
2020…	17.5%
2021…	19.4%
2022…	24.6%
2023…	23.8%
2024…	26.3%
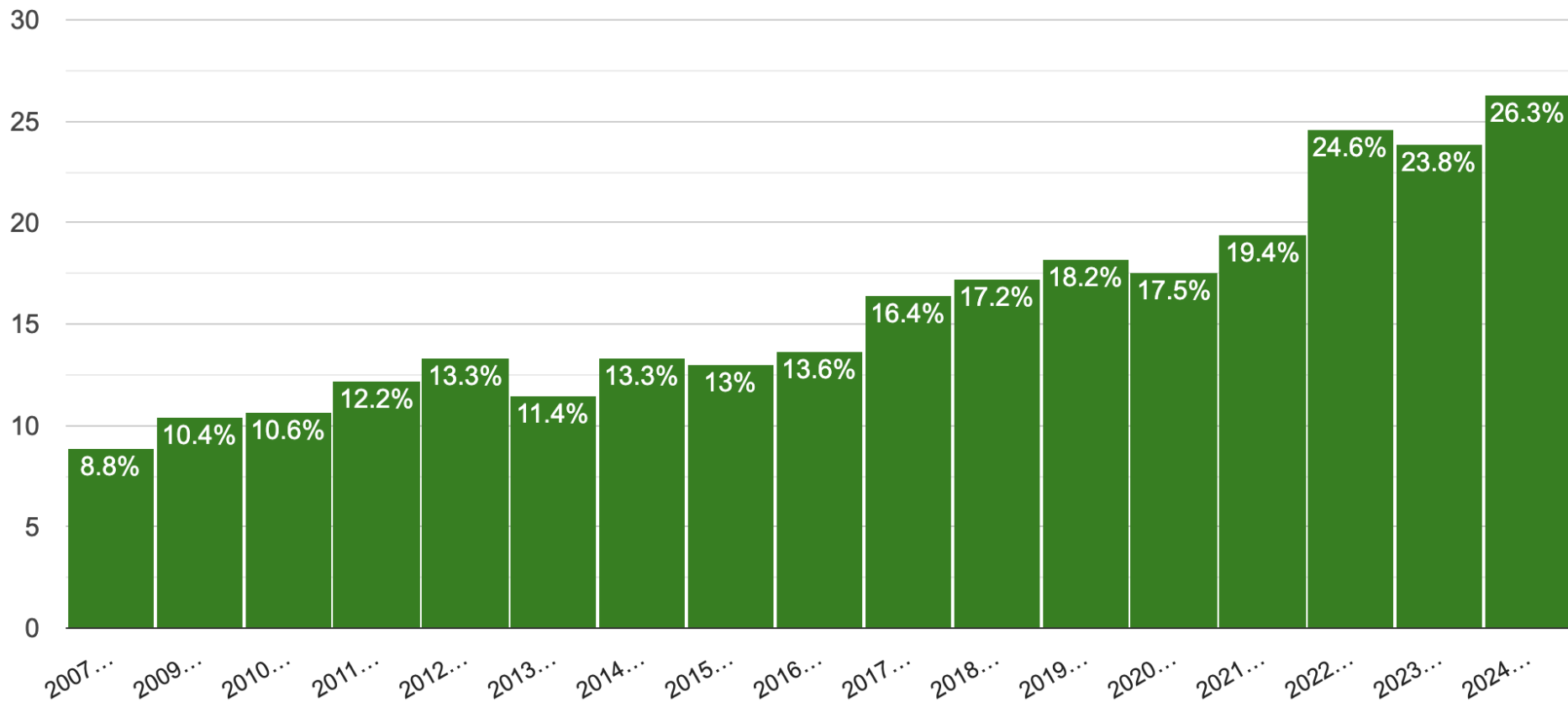
Binge Drinking by Year (Healthy Minds, 2024)
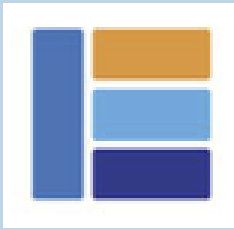
More Than 3 Times Binge Drinking by Year

Year	Percentage
2007…	15.9%
2009…	17.9%
2010…	15.6%
2011…	18.1%
2012…	15.9%
2013…	17.8%
2014…	13.8%
2015…	13.9%
2016…	15.4%
2017…	13.3%
2018…	12.8%
2019…	13.3%
2020…	11.3%
2021…	9.1%
2022…	6.4%
2023…	10.4%
2024…	7.2%
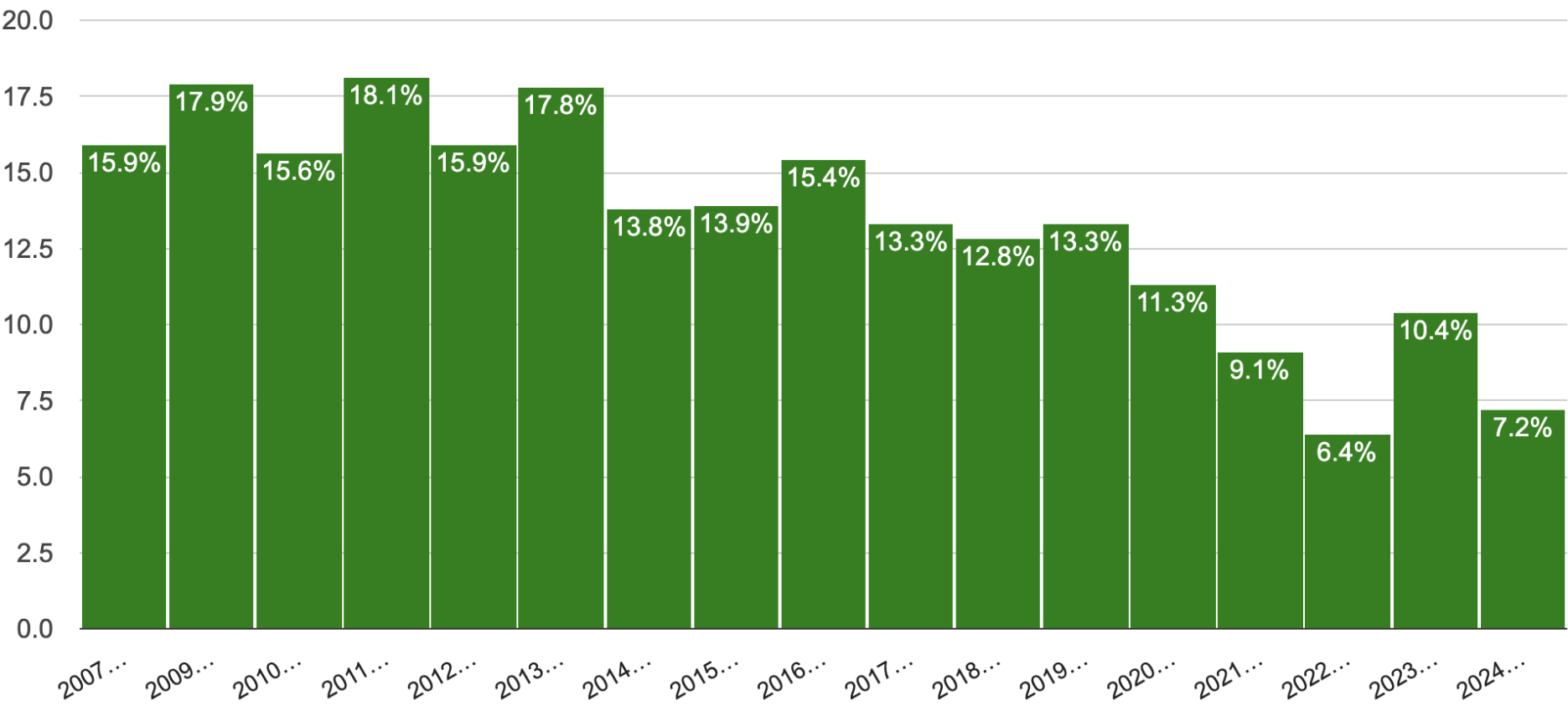
Marijuana Use Past 30 Days (Healthy Minds, 2024)
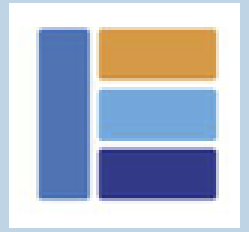
Marijuana use in Past 30 Days by Year

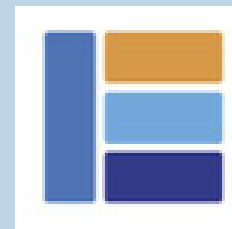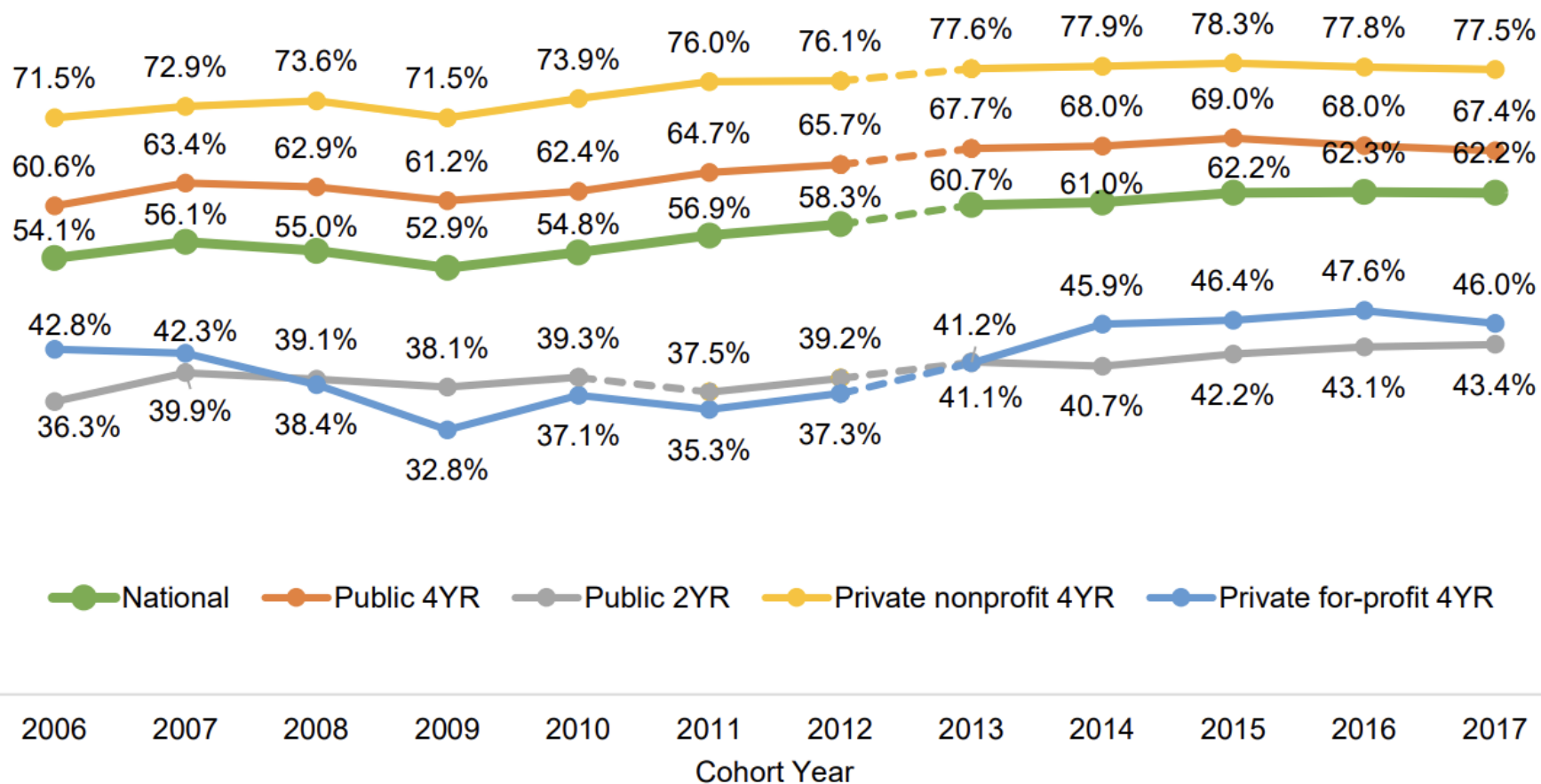| Year	Percentage
2007…	14.4%
2009…	15%
2010…	20.1%
2011…	15.4%
2012…	15%
2013…	16.1%
2014…	19.2%
2015…	17.1%
2016…	21.2%
2017…	21.9%
2018…	21.5%
2019…	24.3%
2020…	21.2%
2021…	19.6%
2022…	22.5%
2023…	22.9%
2024…	19.3%
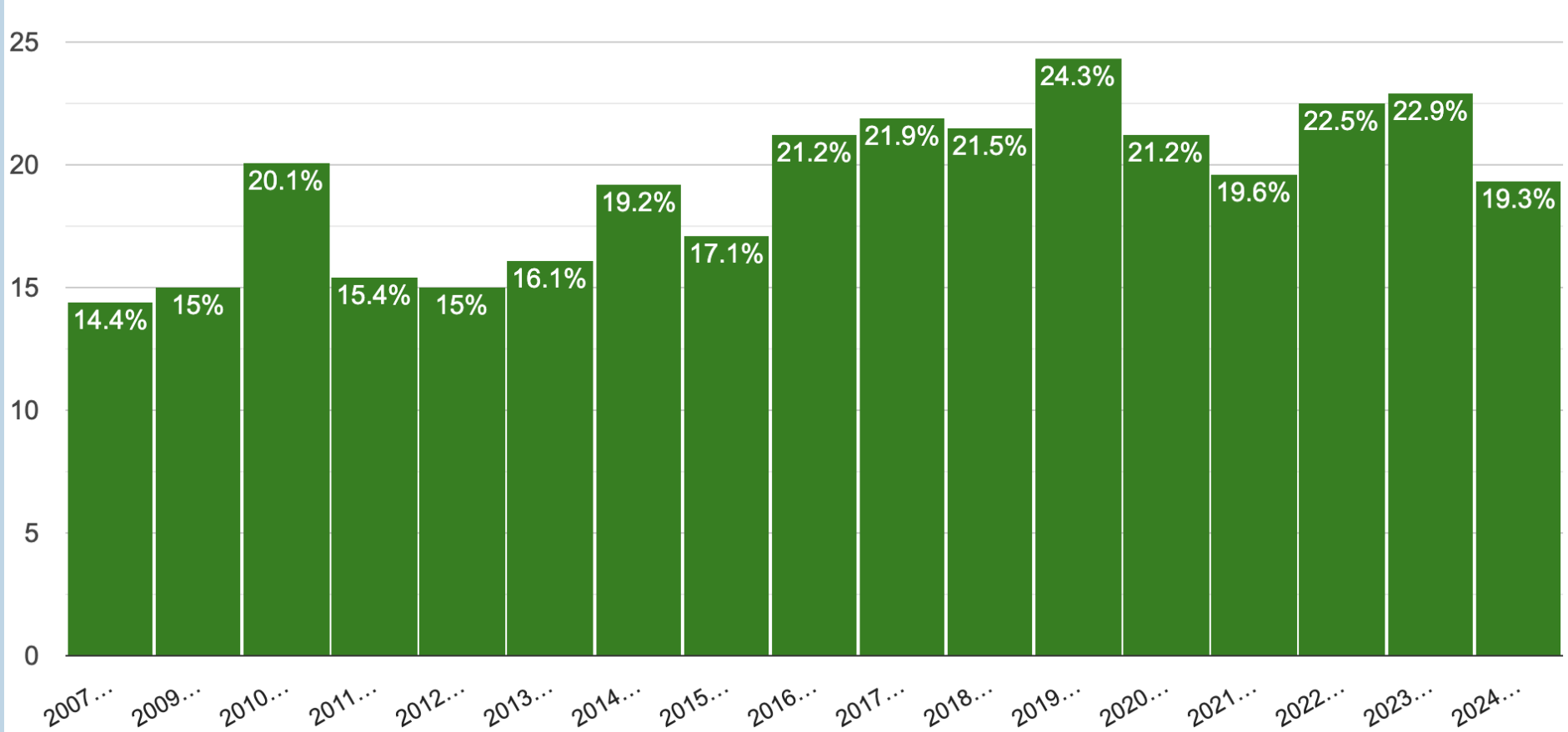
Current Snapshot of Today
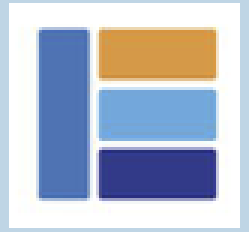
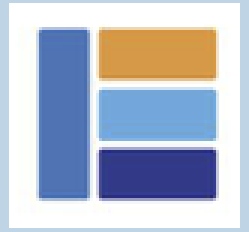| Most Recent Healthy Minds Data (n = 94,878)	Percentage of students
Major depression	19.1%
Any depression, including major and moderate	38.5%
Anxiety disorder	34%
Eating disorder	13.1%
Suicidal ideation (past year)	13%
Suicide attempt (past year)	1.5%
Psychiatric medication (past year)	31.2%
Mental health therapy/counseling (past year)	35.6%

Postsecondary Completion Rates
(Lee & Shapiro, 2023)

Figure 1. Six-Year Completion Rates by Starting Institution Type: 2006 – 2017 Entering

Legend: National | Public 4YR | Public 2YR | Private nonprofit 4YR | Private for-profit 4YR

Cohort Year	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Private nonprofit 4YR	71.5%	72.9%	73.6%	71.5%	73.9%	76.0%	76.1%	77.6%	77.9%	78.3%	77.8%	77.5%
Public 4YR	60.6%	63.4%	62.9%	61.2%	62.4%	64.7%	65.7%	67.7%	68.0%	69.0%	62.3%	62.2%
National	54.1%	56.1%	55.0%	52.9%	54.8%	56.9%	58.3%	60.7%	61.0%	62.2%	68.0%	67.4%
Private for-profit 4YR	42.8%	42.3%	39.1%	38.1%	39.3%	37.5%	39.2%	41.2%	45.9%	46.4%	47.6%	46.0%
Public 2YR	36.3%	39.9%	38.4%	32.8%	37.1%	35.3%	37.3%	41.1%	40.7%	42.2%	43.1%	43.4%

Cohort Year
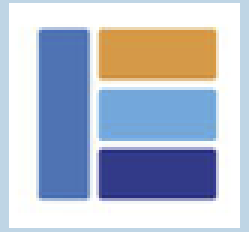
College Dropout/Stopout

- National dropout rate for all students = 36% (NCES, 2023)
  - Full time, non-completion within six years (2016-22)
  - Permanent dropout, long-term stopout, transfers who never finish

- When do they stop/dropout?
  - Most likely to be early in schooling
  - 13.1% full time students in first year
  - Drop/stopout rates decrease as they move closer to a degree

- Students with Mental Health Conditions
  - 64% stop/dropout due to issues stemming from condition (Gruttadaro & Crudo, 2012)
 - National Longitudinal Transition Survey-2 data → 65% stop/dropout (Newman et al., 2011)
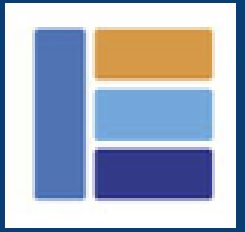
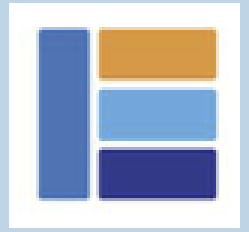# What Happens During Stopout?

Barriers to Re-entry

- Executive functioning (EF) deficits
- Symptoms of mental health condition
  - Anxiety, social isolation, internal stimuli, etc.
- Medication side effects
- Lack of resiliency
- Stigma (internal/external)
- Environmental barriers
- Social determinants of health
- Financial (loss of aid, repeating courses, etc.)
- Inflexible student return policy
- Housing insecurity
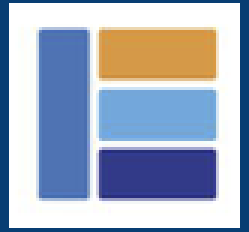
College Re-entry Programming: Two Qualitative Studies

NITEO (Boston, MA)

- Latin for "thrive"
- Launched in 2014
- BU Center for Psychiatric Rehabilitation
- Goal of supporting students on leave from colleges and universities to develop, regain, and apply skills and supports that promote the return to and then retention of college students living with serious mental illnesses.
- Aim of the program
  - Impact the delivery of college mental health services
  - Include recovery and rehabilitation interventions that can support students to remain in and return to college.
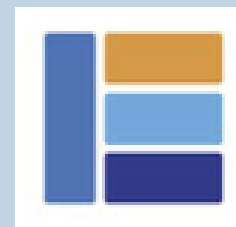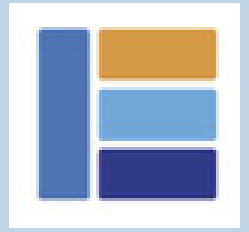
NITEO Program Overview (Rogers et al., 2023)

Table 1. NITEO (Latin verb: to thrive or flourish): program elements.

Program elements	Description
Who is eligible	Any student who has stopped out/dropped out of a post-secondary educational setting
Who may be a match	Any student whose goals, values, and readiness to engage in NITEO align with the program's mission and structure
Program Structure	Classes, Coaching, Activities offered on a university campus
Curricula	• Eleven classes are offered each week. • Class curricula are designed to promote skills in academic proficiency, psychological well-being, stress resilience, and social connectedness. • Classes use multi-modal exercises and small-group discussions • Designed to help students practice and develop the critical academic and wellness skills
Length and Intensity	One semester (15 wk) of intensive services, three days per week. Follow-up coaching the following semester
Staff	Coaches/Instructors generally with Masters' degrees in counseling or social work; supplemented by interns in Masters' or doctoral programs
Peer Mentors	Alumni of NITEO who help to organize and host activities outside of the classroom to promote social engagement

NITEO Video

Nateo started in 2014 because we saw a

NITEO Study (Rogers et al., 2023)
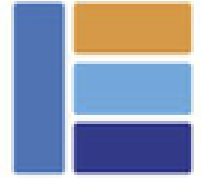
NITEO: Results of two qualitative studies

Rationale: The prevalence of mental health symptoms on university campuses is high and rising, resulting in detrimental effects on academic performance. Few resources exist to address the needs of students who must leave school for mental health reasons.

Methods: We conducted a study of our college re-entry program (NITEO) designed to assist students to re-engage in college.

Two research components: in-depth qualitative interviews with 1) all college coaches in NITEO (N=5); 2) a sample of NITEO students (N=31).

Results: Themes from Coaches (n=5)
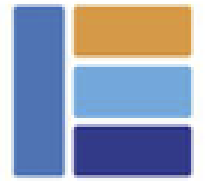
Theme 1: The Working Alliance

- Building relationship
- Following Student's Lead
- Creating a psychologically safe space
- Being creative and flexible
- Being persistent

Theme 2: Facilitating Self-Determination

- Building Autonomy
- Setting mutually agreed upon, detailed goals
- Holding students accountable
- Using gentle confrontation to progress

Theme 3: Facilitating Competence

- Building skills for academic success
- Using a strengths-based approach
- Teaching coping skills
- Reframing failure
- Persisting despite symptoms

Theme 4: Enabling Relatedness

- Addressing the need for social connectedness
- Coping with social anxiety
- Teaching social skills

Results: Themes from Students (n=31)
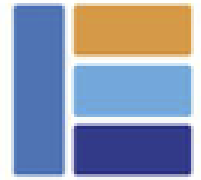
Theme 1: The NITEO Program Catalyzes Growth and Connection

- Provided structure, routine and purpose
- Educated students about wellness, a necessary component of academic success
- Staff provided a warm welcome and ambience
- Builds a sense of community and social connectedness
- Stimulated interpersonal and intrapersonal growth and build confidence
- Helped to build academic resilience
- Revealed the importance of seeking assistance
- Combined academic and creative elements

Theme 2: Coaching Builds Skills and Promotes Accountability

- Coaches build a working relationship
- Coaches are skill teachers
- Coaching provides structure and accountability
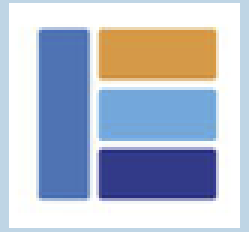- Coaches step out of traditional role when necessary

Theme 3: Peer Mentors are Supportive and Role Models

- The value of shared experience
- Peer mentors provide an additional source of support
- Peer mentors are role models

Theme 4: Other Students in NITEO Impact the Experiences

- The value of identifying with other students
- Other students help combat the isolation and loneliness
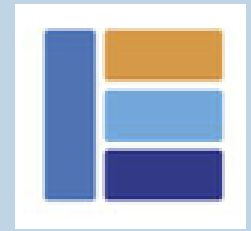- Impact of other students

Conclusions from NITEO Study

- These findings suggest that the different components of NITEO foster skills and resilience while providing a supportive community
- NITEO can be an effective approach to assist students with mental health conditions to re-engage in college.

Quotes from NITEO Alumni

"Without NITEO I would have degenerated further, not got back up those basic skills. And perhaps, who knows, I would have never went [sic] back to school."

"It felt like [my coach] was on my team and not because she was being paid to do it and not just because I was assigned to her. It felt like she really got to know me as a person and was helping me do what was best for me. "

"I think the community of it, of the peer mentors and the teachers and having a coach, was really helpful... [It was] the support network that I came away with feeling really grateful for."

"It helped to have somebody like a peer, close in age, that could really empathize with what you're going through... They know what to expect and can candidly answer any questions that we had. [PMIs] were super open with everything and made us feel welcome here."

"I don't think I would be able to do as well in school as I am... without having gone to NITEO. It's definitely helped me organize my workload... and not be scared to ask questions to professors."
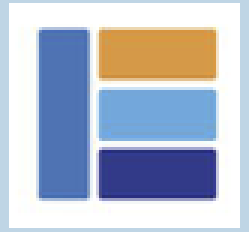
Fountain House College Re-entry
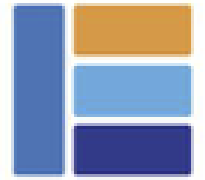
- Founded in 2014
- Located in Manhattan
- Associated with Fountain House Clubhouse
- 14-week (15 hrs/wk.) curriculum
  - Develop academic skills
  - Restore physical wellness
  - Reclaim social community
- Specialized staff, skill-teaching focus
- Follow-along services upon re-entry

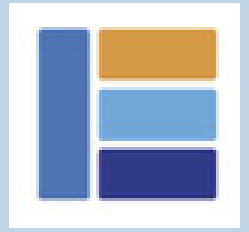# College Re-entry Study (Malenczak, 2023)

- Basic qualitative design (Meriam & Tisdel, 2015)

- Primary data collection tool: Semi-structured interviews

- Secondary tool: Survey

- Purposive sampling employed (Etikan et al., 2016)

- Recruitment facilitated by director to CRE alumni list

- Compensation: $50 (Amazon Gift Card or Venmo)

- Recruited until data saturation reached (Bowen, 2008)

Inclusionary Criteria

- English-speaking

- Mental health diagnosis

- 18-32 years old

- Completed at least one semester of college prior to stopout

- Stopped out for at least one semester

- Re-entry attempt was successful as defined by Satisfactory Academic Progress (SAP)
  - Completes semester GPA > 2.0 or higher
  - Earns minimum of two thirds (66.7%) of academic credits they are eligible for

Data Analysis
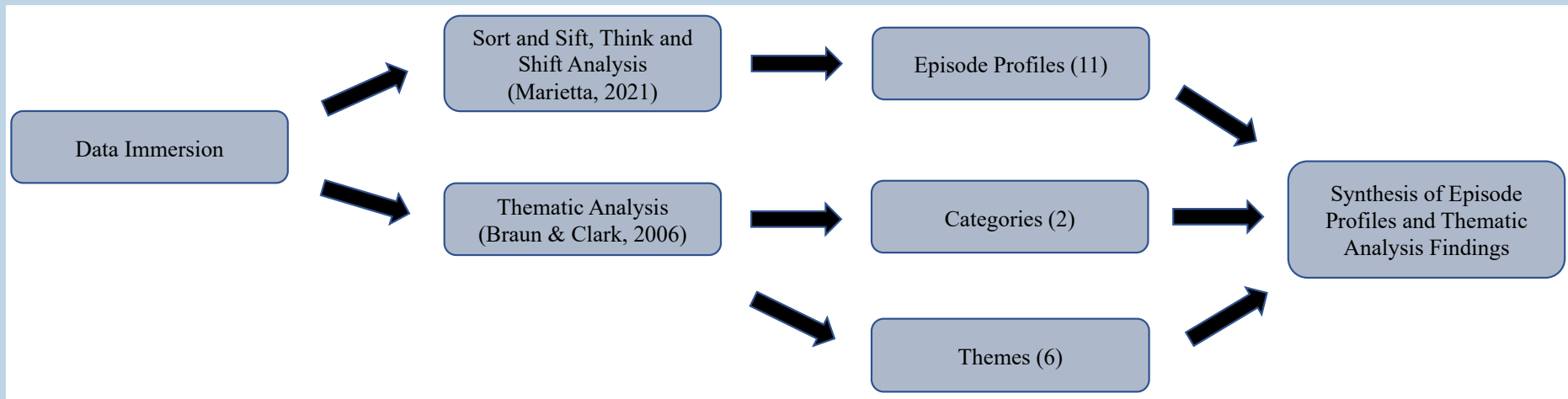
Sort and Sift, Think and Shift (Maietta et al., 2021)

Wide application across many types of qualitative research (Pahwa et al., 2021)
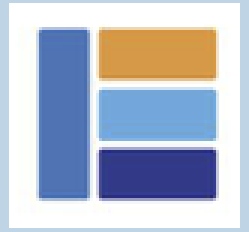- Create episode profiles of each participant experience
- Quick, visual snapshot for each narrative
- Chronological timeline of mental health/academic trajectory

One slide for each participant illustrating their academic trajectory
- Single quote (key moment) of the interview
- Participant strengths
- Academic/mental health strategies and supports
- Trajectory of important academic/mental health events
- High points (yellow) → improved functioning and success
- Low points (blue) → relapse, trauma, and stopout

Episode Profile #1
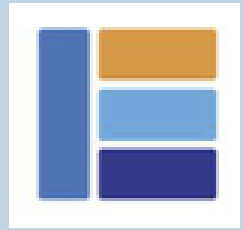
Helpful Supports/Strategies

- Structure from family (37-40) → Self-structure "The more, um, that I can structure my own schedule, the more that I had control over like kind of, or just the more agency I had" 142-6
- "I love commuting. Um, it's a way for me to like, like listen to music and, you know, like read the news and stuff. So it was cool" 225-6
- "If I'm ever having a hard time, I definitely look at those essays" 448-9
- "Support was having a therapist, a really consistent therapist. That's the treatment that I needed" (532-3)

Participant #4
"Like I'm not careless. I'm just like, you know, like fearless." (447)

Strengths
"I was able to, um, identify, like the triggers, which is crazy. Now that I'm saying it out loud" (473-7)
Humble "helped me to realize the world does not revolve around me" (485)
Critical thinker → Analyzed Covid situation early and pre-emptively made decisions based on her mental health (499)

"within that time period of taking that nutrition class, I was very focused." 423-4

even though I withdrew from those classes before I can get a grade, I went into something else. I like took a class on at the New Botanical Garden, 504-18

"A degree is not worth my life. It's very valuable, but just not at this moment." → Changes majors to an online program due to pandemic, does poorly, withdraws from classes (stopout) and switches back to original major (499-500)

Volunteered at H4H → "I just felt good about making that decision" 179-82

it was very difficult to kind of just like, be social without having to compromise my own treatment. Um, but I definitely needed to be social, to like stay sane 102-4

"Things work this way because someone like actually did the work for it to work this way." (149-61)

"College… wasn't accommodating to my disabilities." 101

"I cannot do this, I want to come home." (111-2)

"Sorry Mom, I'm just gonna work." (143-4)

"Culture shock" (15) → Stopout
- learning how to maneuver in another city, (22-3), new survival mechanisms 26-7
- "I learn audibly" → friction with professors, cuz they thought I wasn't listening 55-9
- I went to class in sweats, like I didn't like, it looked like I didn't care, but it's just like, no, my main focus was like, okay, what's the work today? 62-73

"At that time, I was only having bad days. So that's when I knew" → Stopout (126-7)

- "It's like a, like a lifestyle, a student lifestyle class." 234-6
- "It's kind of just like growing into your feelings and emotions through different types of sensations, whether it's like listening or cook or stuff like that. We had like dinners together and stuff." 240-45
- "I kind of got to understand like, like where I stand in, like society"
- "We have people that we have to answer to and listen to."
- "We have the space, we have to respect because it's in a townhouse, and it it's beautiful."
- "You learn community and how to like interact with outer students"
- "They helped us with our application, they helped us with follow-up emails, getting in touch with advisors" 325-6
- "They don't plan it out. They help you plan it out. " (328)
- "We always would check in, um, which were enlightening moments " (357) "Even up to this day, they, I think I got a text maybe like once a quarter and I love it." (367)
- English teacher → "He was kind of just teaching us how to like how, how to have and express our own insights." (438-9)

Episode Profile #2
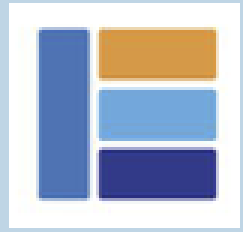
Helpful Supports/Strategies

- "For someone like me, I have to have a routine" 423
- "I only give myself three tasks a day and one of them is the bigger task." 452-3
- Mood/exercise trackers 455-6
- "If you eat healthy, if you go take a walk in the sunshine, if you go to the gym, you're gonna feel better." 468-9
- "I try not to drink too much." 469
- Vitamins/supplements (480), space to study (514)
- Sister/mom/friends (500-3), student clubs (489)

Participant #7
I'm definitely a hundred percent finishing my degree. Yep." 406-09

"After CRE I actually became very, very successful in New York before the pandemic, But yeah, that changed during the pandemic" 94-95

Traveling the world, but my "education became like a backseat" 57

"I had separated from my husband. I started dating somebody, um, and this relationship was very volatile" 100-01

Helps develop Fabulous app 139-63

"I was always a straight A student until eighth grade" 23

"In 8th grade to 12th grade, I was still taking honors classes, but I was struggling with like behavioral problems… it was just a little bit, um, difficult for me to manage without proper, without proper (?) intervention" 23-26

Met husband, had Masters and good study skills 52-55

"I got pregnant in fall of 2020, from somebody that I met during the pandemic, and we had a son" 400

"I'm moving to another position hopefully next week. Um, a really, um, like a management director position. And then once a, I, once I have more of a set schedule, um, I'm working on my FAFSA right now and everything like that." 406-09

"No structure, no skills for me. Really." 38

Attends CRE

- "CRE has really improved my life drastically" 125
- "We do so many exercises and uh, and like organization of things" 122
- "The study skills I learned in CRE have are probably the skills that are gonna allow me to graduate" 32-3
- Pomodoro method 135
- "Anna's always been like a very, very, very caring, thoughtful person" 204-05
- "Jason listened to my story, met me and then gave me the opportunity to attend CRE" 209-10
- "I got a lot out of the class we took, um, which was, it was, it was with a poetry grad student." 223-24

"And I ended up just like reaching like a new low, and I decided to like go inpatient. And then when I was inpatient, I, I, um, I was very, very symptomatic" 103-04

Previous PTSD diagnosis, abuse from mother @ 13 y/o. 14-15

"I was in college with my high school sweetheart, um, in (town/school redacted). And, and then, uh, he got in a car accident and died. And, um, then after that, it was impossible to go to classes cuz we took two or three classes together and I had really bad PTSD" 12-14

Son dies of cancer at 3 mos. 401

Strengths
- Strong coping skills
- Extremely self aware
- Resilient

Participants' Health Investments
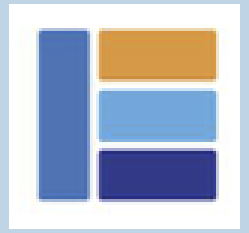
Health Investment	(%)
Psychiatric Hospitalization	73
Partial Hospital Programs (PHP's)	27
Outpatient/IOP/Co-occurring Programs	36
Individual Therapy	82
Psychiatric Medication	91
Physical Health Investments	18

Results of Thematic Analysis

1. Establish Structure/Routines during Stopout

2. Needing Independence

3. Having Strong Natural Supports

4. Having Comorbid ADHD/ADD Diagnoses

5. Emotional Growth during Stopout

6. Importance of Online Learning

Online Learning = Easier to Manage Symptoms

- *I think in some ways like, um, online learning, like can be a little bit easier in terms of, **you don't have to be in a whole classroom with li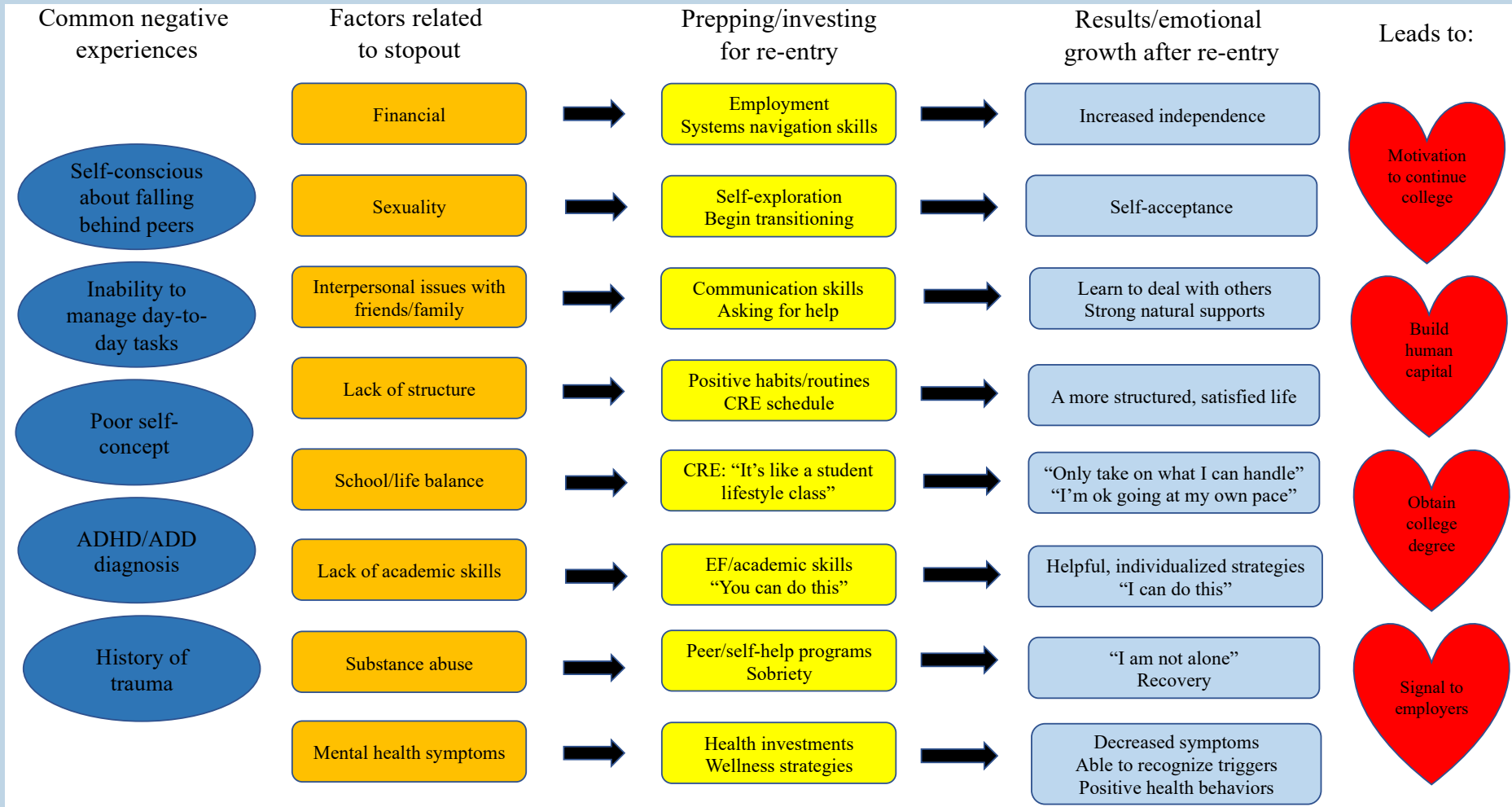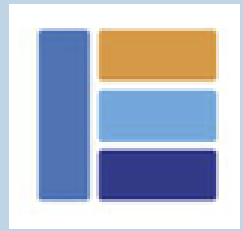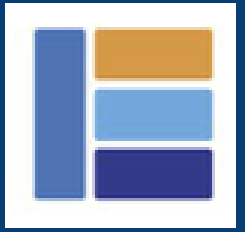ke all these other people.** Um, I mean, it's still weird and it's still this, but I find that, like that like aspect a little bit easier. Um, yeah. I, you know, I was, I think it was like overall, it was a pretty good like summer class (#2).*

- *There'll be classes, which I'll be like, Ugh, I don't want to go to this, **but if it's online, I'll just be like fine, whatever. I'll just log in, you know?** So it makes it easier if I'm in a depressive episode to just go to class (#8).*

- *As a person with psychosis, **grounding is so much more easy when you're on Zoom.** It's like just being able to be like, I'm gonna turn off my camera for a second, you know, and like not have that be such a thing. I remember in, in school it's like if you're sitting in a classroom full of people and you start questioning your reality, there's nothing I could do about that in that situation (#11).*
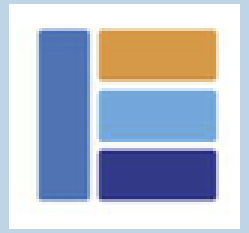
Synthesis of Episode Profiles/Thematic Analysis

Common negative experiences	Factors related to stopout	Prepping/investing for re-entry	Results/emotional growth after re-entry	Leads to:
Self-conscious about falling behind peers	Financial	Employment Systems navigation skills	Increased independence	Motivation to continue college
Inability to manage day-to-day tasks	Sexuality	Self-exploration Begin transitioning	Self-acceptance	
Poor self-concept	Interpersonal issues with friends/family	Communication skills Asking for help	Learn to deal with others Strong natural supports	Build human capital
ADHD/ADD diagnosis	Lack of structure	Positive habits/routines CRE schedule	A more structured, satisfied life	
History of trauma	School/life balance	CRE: "It's like a student lifestyle class"	"Only take on what I can handle" "I'm ok going at my own pace"	Obtain college degree
	Lack of academic skills	EF/academic skills "You can do this"	Helpful, individualized strategies "I can do this"	
	Substance abuse	Peer/self-help programs Sobriety	"I am not alone" Recovery	Signal to employers
	Mental health symptoms	Health investments Wellness strategies	Decreased symptoms Able to recognize triggers Positive health behaviors	

Supporting College Re-entry

College Re-entry Strategies for Success

Academic
Show up to class no matter what
Leverage apps/tech
Access supportive, flexible teachers
Obtain accommodations
Accountability meetings
Form alliance with another student
Join extracurriculars
Take coursework you enjoy
Review past successful schoolwork
Communicate with professors

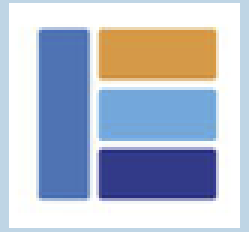| Executive Functioning |
|---|
| Break down complicated tasks |
| Focus on one goal |
| Use a task list |
| Keep a notebook of info together |
| Set up a study space |
| Write things down |

Wellness
Read for pleasure
Baking
Journaling
Keep busy
Pets
Eat nutritiously
Exercise
Apps for building healthy habits
Religion
Take vitamins/ supplements
Avoid drugs/alcohol
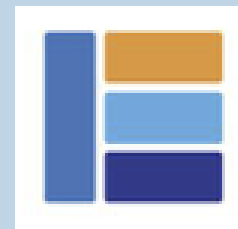
Re-entry Considerations

- Psychoeducation
- Healthy routines/structure as social rhythm (Margraf et al., 2016)
- Need for independence
  - Broader developmental transition (Tanner et al., 2008)
  - Social role exploration (Shinn et al., 2020)
- Role of employment
- Comorbid mental health/ADHD diagnoses
- Leverage natural supports
- Online learning considerations
- Support valued social role transitions
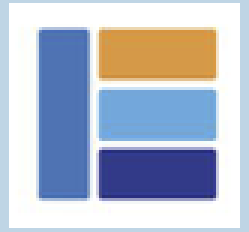 - College student → College Dropout → College Graduate

Link to Off-Campus Mental Health Interventions

- Psychiatric Hospitalization
- Partial Hospital Programs
- Co-occurring Programs (IOP's)
- Private Therapist
- Psychiatric Medication
  - Critical for students with schizophrenia
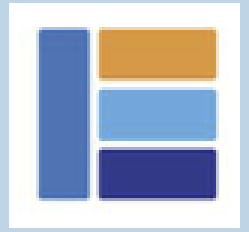- Physical Health Investments
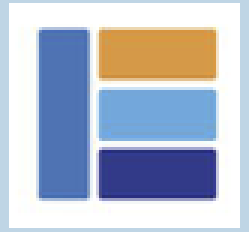
Role of Resilience in Re-entry

- Resilience = Emotional Growth (Theme #5)
  - Tied to larger mental health recovery process (Deegan, 2005; Song, 2017)

- Transfer of belief → Increased self-efficacy
  - "You can do this" → "I can do this"
  - "I need to go at my own pace" → "I'm okay going at my own pace"

- Resilience as a protective factor against stopout (Eisenberg et al., 2016)
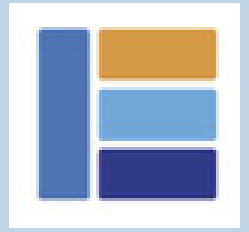
Preventative Practices

- Stopout preventative strategies
    - Mindfulness (Biebel, et al., 2018; Burford & Hardy, 2019)
    - Positive psychology interventions (Eisenberg et al., 2016)
    - Solution-focused wellness (Beauchemin, 2018)
    - WRAP for college students (Hamilton et al., 2015)
    - Cognitive remediation
- See handout for more specific interventions
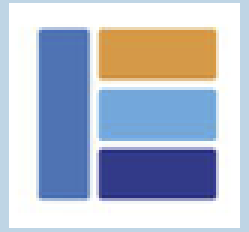
Information for Disability Services

- Confirmed research about how students use ODS
  - Common accommodations used (Hartrey et al., 2017; Salzer et al., 2008; Stein, 2013)
  - Range of opinions on helpfulness (Knis-Matthews et al., 2007; Salzer et al., 2008)

- Expanded on ODS research to improve services (Kupferman & Schultz, 2015; National Council on Disability, 2017)
  - Centrally located campus space
  - Formal introductions between staff/student
  - Single point-of-contact
  - Assistance with determining helpful accommodations

Strategies for College Administrators

- Offer broad array of programming for struggling students
  - Academic/EF/wellness
- Provide options for online learning
  - Empowering, flexible, more personal choice
  - Minimize mental health barriers, but…
- Support healthy routines and structured daily activities
 - Academic achievement
  - Social inclusion

Let's Try to Help Jordan (They/Them)

Jordan, a 19-year-old first-year college student, arrived at Rutgers excited to start a new chapter. A strong student in high school, they had always been able to manage some moderate anxiety quietly, never needing formal support. But by mid-semester, the pressures of mounting academic demands led to an overwhelming sense of imposter syndrome, which began to take a toll on their mental health.

Jordan stopped going to classes, avoided friends, and couldn't sleep. After failing two midterms and experiencing a panic attack in class, they reached out to the counseling center and ultimately decided (with the support of their parents) to take a leave of absence. Jordan officially withdrew from all their classes and returned home feeling both relief and shame, unsure of whether they'd ever be able to manage the anxiety that comes with higher education to return to college. Still, they felt a strong desire to try again but weren't sure what steps to take during their time away to make the next attempt more successful.
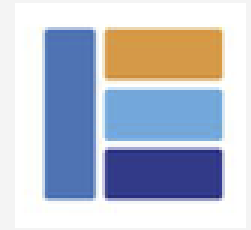
Thank You for Attending
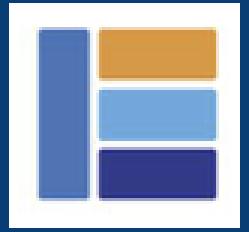
Connect with Us!

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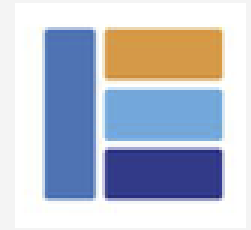
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