

# Recommendations for Prioritizing Student Mental Health and Campus-wide Healing and Recovery during COVID-19



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## Background

For years, student mental health has been a growing issue on college and university campuses. Even before the pandemic, national data sources showed a high and rising prevalence of depression, anxiety, eating disorders, suicidality, and other concerns in student populations over the past decade.<sup>1</sup> In 2019, approximately one in three students met the criteria for a clinically significant mental health problem, translating to nearly seven million students nationwide.

Student mental health and campus-wide healing and recovery during COVID-19 must be prioritized. Many experts have predicted a “second curve” of negative mental health outcomes due to COVID-19-related stress, isolation, and unprecedented job losses.<sup>2,3,4</sup> In fact, research from Active Minds found that 80% of college students have experienced a negative impact on their mental health during COVID-19, with 20% reporting that their mental health has significantly worsened.<sup>5</sup> Students most commonly reported stress, anxiety, disappointment, sadness, loneliness, and isolation among negative mental health outcomes experienced. Nearly half (48%) report experiencing a financial setback during the pandemic. More than half of college students surveyed said that in the immediate aftermath of COVID-19, they did not know where to go if they or someone they knew needed professional mental health services right away. Additionally, recent reports have cited negative COVID-19-related stress among college and university staff and faculty and their concerns about returning to campus.<sup>6,7</sup> These stressors have no doubt been compounded by the ongoing violence against Black individuals and communities highlighted in recent nationwide conversation and protests.

From the student perspective, the top recommendations communicated to Active Minds for college and university leaders to consider as they prepare for the next academic year is to prioritize student mental health and help students heal, process, and recover from current national turmoil when they return to campus.<sup>5</sup>

Active Minds provides the following short and long-term recommendations to support college and university leadership with prioritizing mental health and helping the campus community heal and recover from the impact of COVID-19 and national civil unrest.

## Recommendations

### **1. Maintain telehealth services and widely promote them.**

With anxiety and depression on the rise among students and considering that research has demonstrated mental health as integral to student success,<sup>8</sup> it is in the best interest of institutions to meet mental health needs of students, including those who will continue to live off-campus, especially when three out of four are open to using telehealth for mental health counseling. While only 35% of students in a recent study said that they have used telehealth in the spring semester, the majority of those who had used them were satisfied with their experience.<sup>9</sup> This information, coupled with recent survey findings that more than half of students did not know where to go for mental health support during COVID-19<sup>5</sup>, suggests there may be a lack of awareness among students about the virtual resources available to them.

### **2. Include student leaders on cross-campus COVID-19 Response Task Forces.**

Stronger campus communities happen when students are involved in mental health policy decisions and programs that affect them. Research shows that student involvement increases awareness and usage of campus health services, generates new solutions and favorable long-term results, and increases student academic performance and retention.<sup>10</sup>

### **3. Avoid reducing mental health budgets or staffing.**

Mental health has always been important, but never more urgent. Amid the difficult financial decisions for leaders under the strain of the pandemic, we urge university leadership to consider the economic case for investment in student mental health.<sup>8</sup> Specifically, the negative effects of mental health problems on student retention suggest that institutional investments in student mental health are likely to generate both increased tuition revenues for institutions and higher earnings for students who attain a college degree.

### **4. Adapt and innovate mental health services.**

In the wake of the pandemic, the campus community will look to leadership to re-establish a sense of safety. High-risk individuals and groups, particularly students with marginalized identities, may not seek services on their own. Efforts should include reaching out to and promoting vigilance toward those most at risk for mental health issues.<sup>11</sup> Consider providing mental health resources in diverse formats to accommodate individuals with different levels

of comfort-seeking services. Formats may include embedded clinicians in residence halls, departments, offices, and student services; discussion and support groups; traditional, individual clinical support; continued telehealth and other technology-based options; peer support; education and programming that normalizes post-pandemic and racism-related grief and the recovery process; student-driven reflection activities and policy proposals; self-care practices; and proactive, positive mental health techniques.

### **5. Develop a clear, comprehensive communications plan that addresses student concerns, particularly academic and mental health needs.**

Active Minds' survey found that uncertainty about academic accommodations and flexibility and available mental health resources were chief concerns among students soon after the beginning of the pandemic in the United States. It is recommended that mental health resources and any academic accommodations available are communicated clearly, often, and through multiple channels.

### **6. Embed courses with wellbeing practices.**

Particularly within hybrid or full-on remote learning models, students are dependent on faculty members as mental health first responders and as key facilitators of students' sense of belonging and connection to the university. Faculty members can integrate practices and expectations that promote well-being, such as avoiding midnight or late night deadlines for assignments, beginning class with an informal check-in or a mindful moment, assigning self-care as homework, and building in opportunities for reflection and processing of the pandemic and current events.<sup>12</sup>

### **7. Support staff and faculty well-being.**

Faculty and staff are on the front lines of serving and supporting students, leading the charge during these uncharted times. Supporting them is one of the most effective ways leaders can support students. Leaders may want to consider realigning expectations for productivity and increasing flexibility. Adjusting timelines for tenure, reappointment, and the evaluation and promotion process may mitigate some of the stress and anxiety as faculty negotiate the balance of work and life.<sup>11</sup> In particular, protect and support campus mental health professionals as they are often on the front-line for mental health recovery efforts and are not immune to emotional difficulties, trauma, and strain.

## **8. Inform decision-making through assessments.**

Campus leaders should establish or update their plan to assess mental health among their students, staff, and faculty populations. They should plan to collect survey data on their own or through participation in national studies, such as the Healthy Minds Study and National College Health Assessment, as soon as possible and on an ongoing, scheduled basis to understand immediate needs and changes over time. The plan for data collection should outline how the data will be shared and used to inform the campus' ongoing efforts to support mental health and crisis recovery.<sup>11</sup>

## **9. Commit to providing equal opportunities for health.**

Crises like the pandemic and systemic racism have not impacted students equally and will only exacerbate the unique mental health issues faced by students of color, LGBTQ+ students, and low-income students. Leaders need to be aware of the emotional impact of the pandemic on students of color given pre-existing health disparities in African American and Latinx communities, as well as xenophobia and anti-bias motivated attacks on Asians and Asian Americans. When analyzing data, leaders should disaggregate by populations – namely by gender, race, and ethnic group – to ensure that all students are benefitting from mental health programs and services. Further, campus partners who work directly with students—cultural and identity centers, faculty or academic advisors—likely have the ability to gather data on their needs quickly.<sup>11</sup>

## **10. Support student-driven programming and maintain opportunities for social connection.**

The value of the college experience for many includes the opportunities for connecting with peers and developing their own leadership, purpose, and growth through their residential, extra-curricular, and non-academic experiences. Students report highly valuing opportunities to engage with peers virtually through student organizations, social networking, and maintaining a sense of shared experience with other peers (i.e. virtual new student orientation and first-year experience, discussions, commencement ceremonies, etc.).

## **11. Establish a sense of routine and develop a plan in case of another outbreak.**

Getting the campus community back to a routine is supportive and helpful in the healing process. Campus leaders must anticipate a lasting impact of the crisis and national turmoil on individual members of the community and remain sensitive and vigilant to those at risk for or exhibiting signs of distress. Outline a plan for working across teams and services to provide wraparound support for students who need it and to make decisions in case of another outbreak.

## **12. Invest in a comprehensive, public health approach to mental health.**

Often, postvention efforts can be used to catalyze renewed investment and appreciation for the value of prevention. Through a data-driven approach, leaders in a postvention response can focus their assessment and implementation efforts on building a case for the value in proactive mental health interventions in supporting student success, sense of belonging on campus, and retention and graduation.

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## **Additional Resources**

For information about how universities across the country are effectively prioritizing the mental health and wellbeing of both students and faculty, learn about various institutions across all types and sizes that have been awarded the Healthy Campus Award for their efforts at [www.activeminds.org/award](http://www.activeminds.org/award). Active Minds also offers a [position statement](#) on empowering the student voice in campus mental health decisions; a set of [frameworks](#) for shaping a positive mental health climate with and through peer-to-peer networks; and a [guide for faculty](#) on practical steps they can take to support student mental health remotely and in person. Additionally, Active Minds offers resources to support student-driven policy change. Learn more at [www.activeminds.org/transform](http://www.activeminds.org/transform).

## Citations

1. For more information, see the Healthy Minds Study: [healthymindsnetwork.org/research/hms](https://healthymindsnetwork.org/research/hms); National College Health Assessment: [www.acha.org/NCHA](https://www.acha.org/NCHA); and Center for Collegiate Mental Health: [ccmh.psu.edu](https://ccmh.psu.edu).
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6. Anderson, Greta. (2020). *Coping with a Pandemic*. Inside Higher Ed. Retrieved from <https://bit.ly/3hTa8b4>.
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