

# triangleimestoday



## Education benefits from behavioral health

JOY HIMMEL, PSYD, LCPC, NCC, RN, FACHA

As the fallout of the COVID-19 pandemic begins to settle, the effects on the U.S. health care system are numerous. One area of particular concern is the health of the student population which has been impacted by school closings and distance learning. Many students have incurred setbacks in their education and suffered from lack of social interaction. As many experts have been predicting, behavioral health is an escalating problem for our children and young adults who are reporting increased symptoms of depression, social anxiety, panic, OCD, and eating disorders.

In 2020–2022, the Center for Collegiate Mental Health reported **94%** of individuals seeking counseling services reported that COVID-19 impacted their life, and **66%** identified negative effects on their academic performance. This confirms what experts knew before COVID, that the demand for mental health services has been rising dramatically for more than a decade and the growth we are seeing now is not unique to the pandemic.

The stigma associated with mental health issues often causes those who may potentially benefit from treatment to stay away. To combat this perception, there needs to be an organized effort across college campuses that addresses wellness holistically and collaboratively, providing a seamless delivery of care and service options for students. Help seeking for mental health issues needs to be normalized with multiple system entry points to gain assistance.

## Culture change from the top down

Developing a trauma informed campus involves more than just programming. Changing the culture needs to be top down and includes policies, values, and interactions.

Understanding the needs of students entails paying attention to diversity and inclusion in all of its forms. Inclusion is apolitical and includes respecting beliefs, views, culture, backgrounds, and valuing their right to give voice to them.

In addition, health care providers must administer wellness on a continuum using a more developmental model/approach. Stepped care, for example, where the resource equals the intensity of need, provides the right level of care based on need with robust evaluation of outcomes (not everyone presenting for counseling services needs individual therapy). *continued on page 2*

### Conferences & Exhibits

- **TASCS**  
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- **NACHC**  
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- **CASA**  
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- **NAWHC**  
Sep 8–9
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Many campuses are already using some form of stepped care by offering some of the strategies listed below for lower-risk students with mental health concerns.

- **Self-help strategies; campus support resources, wellness coaching; use of virtual self-learning modules, wellness apps, peer mentoring programs**
- **Psychoeducation groups/workshops, self-paced CBT apps/programs, brief interventions, symptom reduction and skill-based groups, community referrals**
- **Providing a menu of services also means providing options such as drop in, same-day appointments, timely triage, remote location counseling options, crisis services, and virtual appointments**

Data shows that students with mental health problems are twice as likely to leave school without graduation. Campus administrators often use low GPA in the previous semester to identify students at risk of dropping out. These results suggest that effort to identify students who are likely to withdraw would be more effective if based on the combination of low GPA and mental health symptoms.

For the well-being and success of our students, campus leaders and administrators must develop a safety net that prioritizes safety, health, and inclusion. The Campus Prevention Network found that participants who participated in prevention programs are **52%** more likely to feel valued in the classroom, **57%** more likely to report that they are happy at their college, and **62%** more likely to feel like they belong.

### **Joy Himmel, PsyD, LCPC, NCC, RN, FACHA**

Dr. Himmel currently holds a Psy.D in Psychology, MA in Mental Health Counseling, and BSN in Nursing. She is a licensed Clinical Professional Counselor and Registered Nurse. She has over 40 years' experience in behavioral health in hospital-and community-based programs and college health. She currently serves as the Counseling Center Director for Old Dominion University in Virginia. She is a member of the COVID Task Force for the American College Health Association and became a Fellow in 2014. She has been a site surveyor for the Accreditation Association for Ambulatory Health Care (AAAHC) since 2009, is part of the teaching faculty for Achieving Accreditation, and currently serves on the Board of Directors. Recent publications and presentations at national meetings have focused on suicide prevention strategies, achieving accreditation in college health, quality improvement strategies, medical home, telehealth, and integrated patient centered models of care. ▲



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