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"THE EFFICACY OF MENTAL HEALTH ORGANIZATIONS"

By

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A capstone project submitted for
Graduation with University Honors

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University Honors
University of California, Riverside

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Abstract

This project will explore the effectiveness of community presentations in spreading awareness about depression to various students. By studying the importance of studying preventative education behind depression students can be better prepared with resources to not only prevent depressive episodes but also to find proper treatment. While being a part of the Mini Medical School (MMS) and the "Depression Awareness Group", our group has presented to several venues. The presentation includes learning objectives such as the types of depression, causes, symptoms, risk factors, treatment plans, statistics, and ways we can prevent this, especially at a time when the world is facing a global pandemic. The presentation includes several true or false questions to get audience members engaged and to test their prior knowledge about depression. Not only does this presentation help spread awareness, but it also provides resources and different options for treatment plans.

Acknowledgments

There were a lot of helpful hands at play behind this project, whom I cannot thank enough for all the support. I would like to thank my faculty mentor, Dr. Joab Corey who has always given me the best advice and steered me in the right direction. I would like to thank Jane Kim, my Honors Counselor, for talking through my ideas and making the overarching idea of a Capstone Project more digestible. I would also like to thank Stephanie Miller, my HNPG150 teaching assistant, for their understanding of my project and for giving helpful comments on my abstract for my capstone proposal. Lastly, I would like to thank Dr. Brandon Brown for all of his efforts in supporting my Capstone project and advising me accordingly. All of these individuals have extended a lot of understanding and grace to me while overseeing this project. I am very thankful for a support system such as these wonderful individuals.

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Background: My Experience Working with Mental Health Awareness Organizations on Campus

It has been known that the University of California Riverside has many mental health awareness organizations. They have a multitude of organizations, some of which specialize in supporting students' mental health whereas some have subcommittees focused on mental health. As it is a growing topic amongst many college students and campuses, I decided to look further into the UCR School of Medicine Mini-Medical School Pipeline Program to analyze the efficacy of the organization, as well as the work of other organizations. In the two years, I have spent working with MMS, one of them being a project leader, in the Depression Awareness Group, I have gained a lot of perspectives. The reason why I have based my project on this organization is because of the realizations I have made.

It is very important for universities to prioritize organizations and programs that have components focusing on mental health awareness, resources, and factual information. To prioritize these organizations, sufficient funding is needed to be given so said organizations are able to raise awareness for the clubs via advertising on social media or other platforms, bring resources to club members, and provide incentives to their given audience for further engagement. Realizing these factors that are crucial to an efficacious organization made me want to delve further into how efficacious MMS is and what other organizations at UCR have to offer regarding mental health.

This project is designed to compare the effectiveness of programs designed to provide education for mental health issues across UCR and I am doing this to isolate strategies that are most efficient in reaching and treating students.

Introduction

      To delve into the efficacy of organizations that take into consideration offering mental health awareness and resources to UCR students and neighboring communities, it is important to assess the number of relevant resources distributed, students reached, and the amount of money and hours used to achieve these goals. These are the factors to be most considered because it goes to show how many people the organization has impacted with their resources if they have been taking advantage of that service provided. By looking at the money and hours of volunteers and workers, assess the costs of these services. The inputs and outputs are the main factors in analyzing the efficacy of organizations that deal with the mental health of UCR students and the surrounding communities.

      The work MMS does for the community is highly education-based. There are over 20 different health education topics that vary greatly, for example, Depression Awareness, Autism Awareness, Breast Cancer, Women's Health, etc. Each of these groups has 5-14 undergraduate students and one Project Leader that creates educational presentations and presents this information to the community. These presentations are at a 5th-grade reading level so the target audience can be broad and inclusive of most people. All of the information presented is approved by several physicians that are advisors of MMS. With the Depression Awareness group, in the past two years, we have presented at least once each quarter, for an overall of 7 times. In these past presentations, the average target audience has been high school students and in these 7 presentations, there was an average number of 15 attendees. Due to limited venue locations, online venues, and the pandemic, there has definitely been a decrease in the number of attendees, overall, for the Depression Awareness group.

Though I have been a part of MMS for the past two years, I have researched other organizations that have delved into the importance of providing mental health services, such as The Well on the UCR campus which currently provides in-person and online services to students.

The Analysis section of this paper covers the extent of the problem with mental health illnesses being a big part of the undergraduate and graduate experience for UCR students and on-campus departments that help mitigate these crises. It also delves into the actions needed to combat this, such as a push for policy and a widespread advertisement of these departments. The next section discusses the impact being in MMS has had on my career. The last section of this paper covers future directions I would like to take with this project.

Analysis

Mental Health and Wellbeing Data: The Problem at Hand

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"In 2014, 1 in 24 adults in California experienced a serious mental illness, defined as difficulty in carrying out major life activities. About 1 in 6 adults experienced a mental, behavioral, or emotional disorder (any mental illness). One in 13 children in California had a serious emotional disturbance that could interfere with home, learning, or getting along with people. Children do not have an equivalent "any mental illness" designation." [1]

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DISCLAIMER: Discussions of mental health illnesses, including suicide and suicidal ideation

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Over the course of 4-6 years, undergraduate and graduate students face various crises that can affect their mental health and well-being. At times, a student does not need to face a specific situation that deteriorates their mental health, they can simply face psychological stress or test positive for loneliness. Out of a random sample of 5,000 students, 613 graduate and undergraduate students responded to the American College Health Association's National College Health Assessment in the Spring of 2021. [3,5]

Figure 1.1 shows that 33% of respondents reported a high score (13-24) for psychological distress. On the UCLA Loneliness Scale, 61% of respondents reported a high score(6-9). There were a handful of reasons why students were having challenges, where 82% reported procrastination as a challenge, 64% reported personal appearance as a challenge, and 63% reported academics as a challenge. This goes to show the priorities and main difficulties of younger adults in university. [10]

Figure 2 shows that 10% of respondents had intentionally engaged in self-harm within the past year. The Suicide Behavior Questionnaire-Revised Screening Score showed 29% of

respondents to have a positive suicidal screening. 3% of respondents indicated they had

attempted to commit suicide in the past 12 months. 39% of respondents experienced "high

levels" of stress in the past 12 months. [10]

These suicidal ideations amongst young adults reaffirm the need for on-campus, easy

abscess, efficacious mental health organizations, departments, and services. [3,10]

U.S. households by food security status, 2020

Food-insecure households - 10.5%

Households with low food security - 6.6%

Households with very low food security - 3.9%

Food-secure households
89.5%

■ Food-secure households
■ Households with low food security
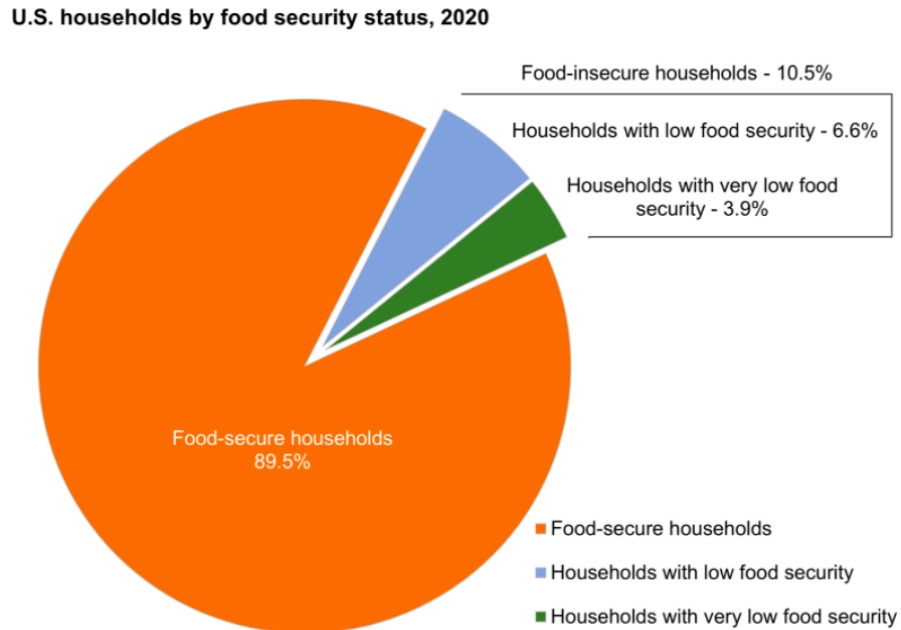■ Households with very low food security

Figure 1. USDA, Economic Research Service, data from December 2020 Current Population

Survey Food Security Supplement, U.S Census Bureau

There are a plethora of reasons as to why these percentages are so high amongst young

adults such as inflation rates being at a record high, increasing costs of rent, and food insecurity,

which Figure 1 above explores. According to the British Broadcasting Company, this year alone

there is the "soaring rate of US inflation that prompted the Federal Reserve last month to lift its

key interest rate for the first time in three years. The US central bank also signaled that the

interest will raise several times this year." Not only do young adults have to worry about inflated

rates, such as gas, but they also have to worry about the three-fold rise of interest rates as well,

which can affect student and housing loans. [9] According to Figure 1, food-insecure households make up 10.1% of the population in the United States, where households with low food security are 6.6% of that 10.1% and households with very low food security are 3.9% of that 10.1%. [11]

There is also the political climate that has caused severe distress for many young adults in college following the George Floyd race riots, the January 6th Capitol Building insurrection, the switch of political parties in the government, and the Russian-Ukraine border disagreements. According to the New York Times journalist Michelle Goldberg, "'40 percent of Americans consistently identify politics as a significant source of stress in their lives.' Shockingly, about 5 percent have considered suicide in response to political developments." Reports from both Republicans and Democrats had higher levels of political stress due to the Trump administration, but levels from Democrats were higher than their opposing party. Furthermore, nine out of ten registered voters believe there is an evident mental health crisis in the United States. [12]
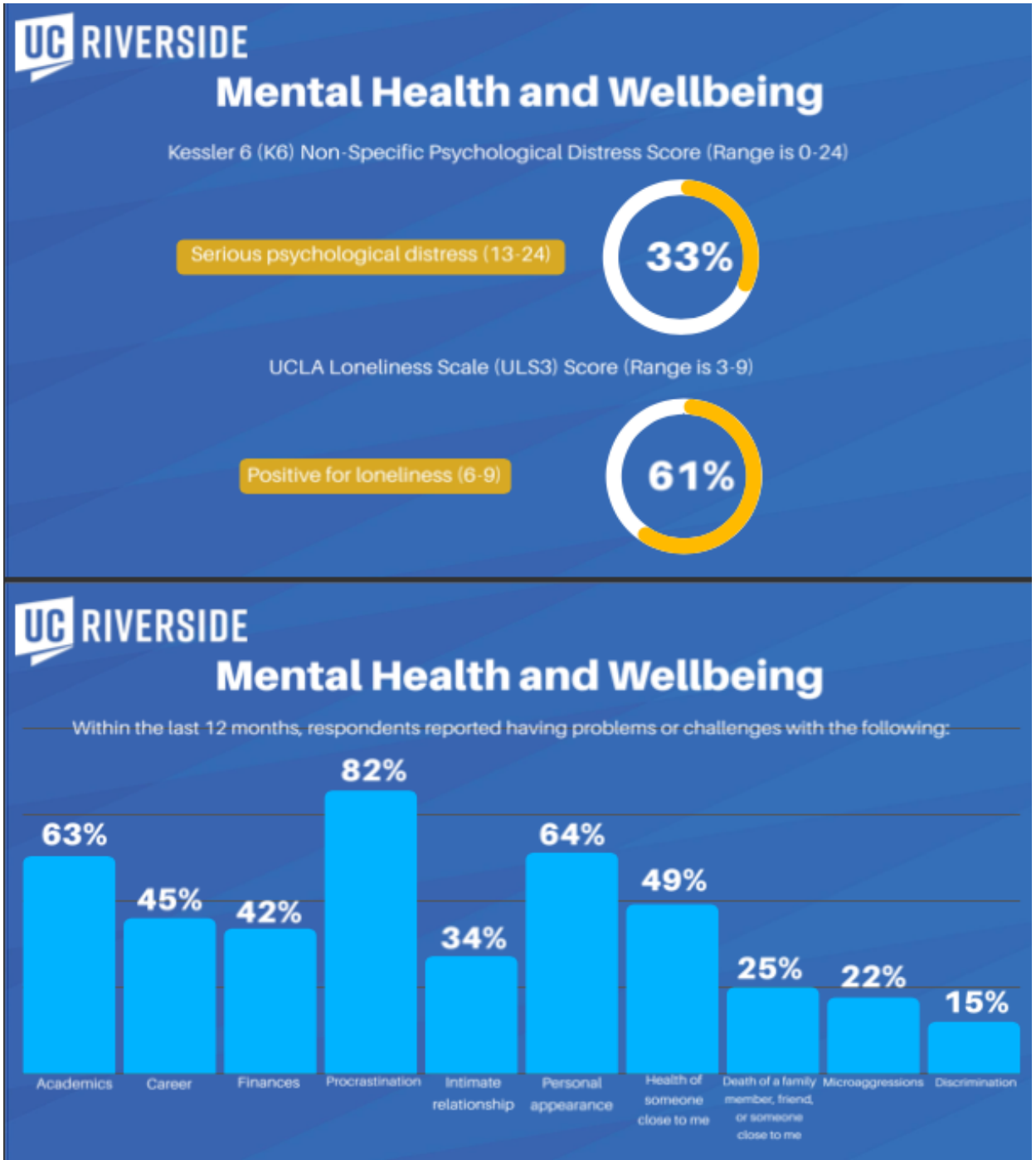
Figure 1.1 Data from National Health Assessment, 2021, graph, American College Health

Association, 25 April 2022, <https://well.ucr.edu/document/acha-ncha-iii-2021-results>

Figure 2. Data from National Health Assessment, 2021, graph, American College Health

Association, 20 April 2022, <https://well.ucr.edu/document/acha-ncha-iii-2021-results>

The Well

The Well is a well-being services department at UCR, that provides services ranging from Health Coaching to Sexual Health Saftey. Their mission aligns with several other departments and organizations on the UCR campus, as they strive to "provide quality health promotion and education, enact policy and provide resources that foster student well-being, academic success, and support a healthy campus environment." [8] They have also focused on providing mental health services and awareness by holding online meetings with the 3 Health Educators and several Certified Peer Educators. Here students create an appointment and can communicate any concerns with these Educators to receive guidance, advice, and a safe environment to voice any concerns. From there the Educators will follow up through email with the situation and provide resources on the next steps to better help the student. [7]

With how efficacious these services, including mental health geared ones, have been, the data is shown in Figure 3. In the past 2021-2022 school year, The Well's programs have reached a little under 2,000 Highlanders. According to Figure 1.1, 33% of respondents faced severe psychological stress, yet only 8.4% have utilized The Well's programs. This is a gross under-utilization of resources at UCR. In Figure 3.1, "The Well evaluates our programs and services for effectiveness and impact, through participation numbers, website analytics, and assessments that measure learning outcomes and satisfaction." [8] In the 2018-2019 school year, there is an overwhelming number of students who have accessed different resources and programs The Well provides as just under 12,000 students visited The Well, showing this is a sufficient and important department on the UCR campus. [6,10]

| Students Reached through Well Programs | 1,913 |
| Well Booking Services | 2,048 |

COVID-19 Wellness Kits	1,225
Sleep Kits	906
Walk-In Appointments	1,361
Face-Covering Kits	1,351
Sexual Health Supplies	290
Period Products	114
Health Coaching Appointments	65

Figure 3. The Well Data (updated monthly by The Well Staff (Last updated on April 5, 2022))

Visits to The Well	11,956
Students who accessed Active-Minds Peer Educator Efforts	6,134
Students who accessed Golden ARCHES peer-led workshops	956
Students who accessed Quarterly Therapy Fluffies stress relief	1,195
Visits Free food, tea, food pantry	5,598
Visits to do homework, rest, relax	1,672
Visits R'Pantry	16,374
Students who accessed AlcoholEdu	6,176
Students, staff, and faculty trained via online suicide prevention gatekeeper module	1,286
Graduate Students	1,485
Student peer educators and mentors trained	262
Visits for safe-sex supplies	3,277

Figure 3.1. Data for 2018-2019 from The Well services

Awareness and Behavior: Problems with Policy and Funding

When assessing the efficacy of services, it is important to keep in mind why these services under behavioral health are being more readily provided. This has been more widespread because, in the Inland Empire, there is a gap between mental health care and the ability to receive treatment that is only recently being bridged. [2] Even so, there is a long way to go. Taking into consideration the levels of awareness and behavior, Figure 4 shows the overall interconnection between Intrapersonal, Interpersonal, Institutional Factors, Community Factors, and Public Policy. Not only do students have their own "intrapersonal" actions and beliefs, but these ways of life also interact with many more on an "interpersonal" level. [8]

Because everything is related to the Public Policy aspect, when campuses have departments and organizations that allow for mental health services to be provided, the further policy can be pushed to show the support for those services. As data is accumulated on how efficacious an organization is, the campus can provide them the same amount of services or a greater amount, or they can gear the services to the students' needs. [4]
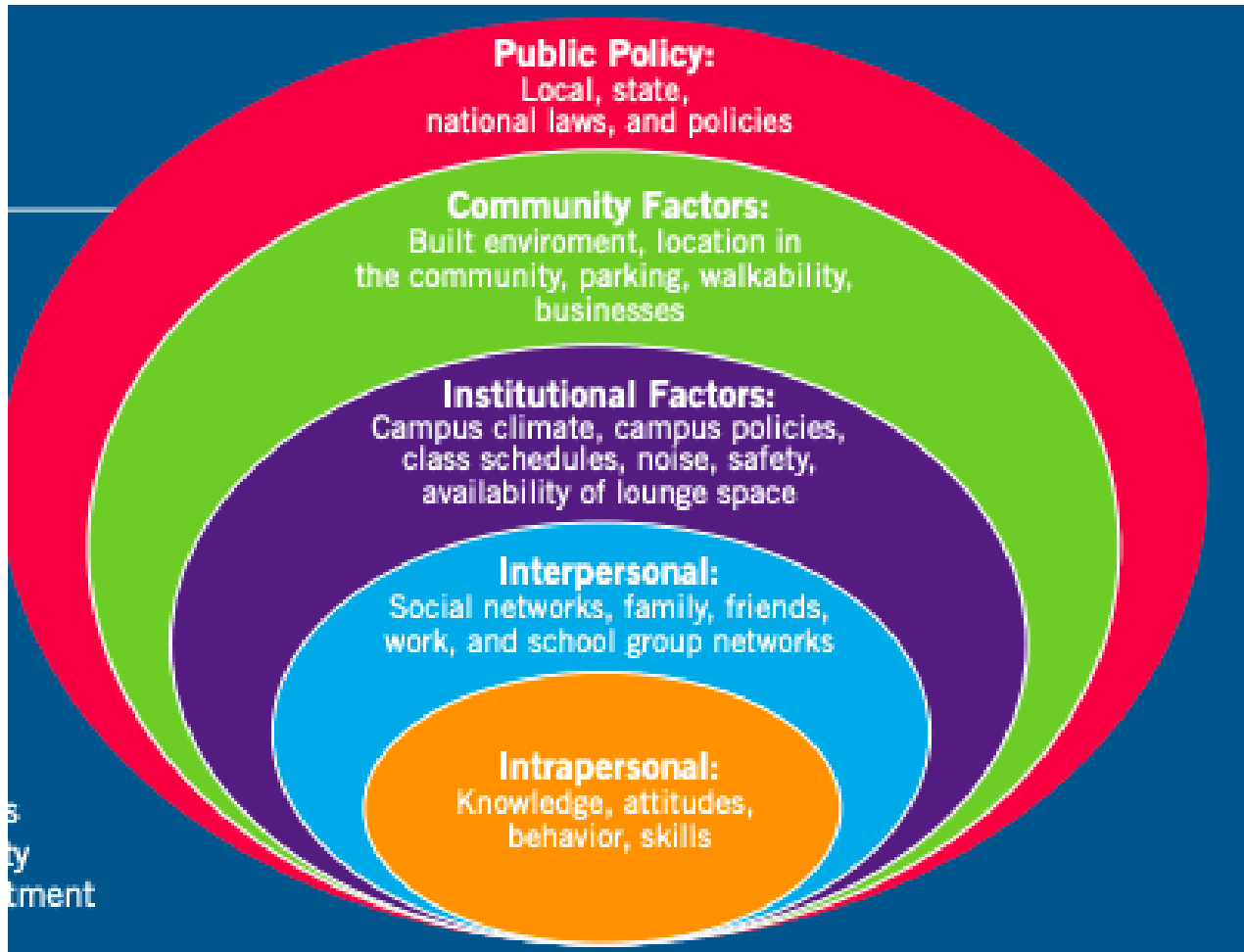
Figure 4. AWARENESS & BEHAVIOR CHANGE 2019, infographic, The Well Yearbook, 1

May 2022,

<https://well.ucr.edu/sites/g/files/rcwecm1846/files/2019-11/The_Well_Yearbook_2018-19_Web

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As we have learned in rudimentary Economics courses, "Nothing in the market is free." We do not have any resource that is provided to us that is innately free, except for air and saltwater. Unfortunately, even on-campus UCR services that many students are pushed to engage in are advertised as "free" but this comes from grants the university receives, referendums passed, and fees in each quarterly tuition statement. Though advertised as "free" many students do not realize the opportunities that they are funding, yet let the benefits slip through their hands. Figure 5 shows the statement details of one quarter for a full-time student at UCR for the years 2021-2022. There are sixteen fees in the below statement, yet none indicate funding for any mental health service, department, or organization. While it is difficult to obtain reliable data regarding how much funding these organizations get as a student, the student fee report shows that 20 dollars go to the SRC, 12.50 dollars goes to ASUCR, but there is no amount of money earmarked for these mental health organizations.

Thus there is a perceptible lack of transparency for students about where the money for funding for mental health-related services comes from and the fraction of their quarterly statements goes to those services. When in contact with the Interim Director & Mental Health Educator of The Well, she also mentioned how it was not allowed for staff to give information about funding to students, and in turn directed me to the data available to the public regarding their 'Data and Impact" on The Well's website. A clear and transparent budget and funding report would allow students to understand the money they are already paying for mental health services, and incentivize them to utilize these services that they know for a fact that they are paying for. Transparency with the budget would also allow for a review of where funding is lacking regarding mental health services and create a push for increased funds. Increased funds can not only allow for further advertisement of existing mental health services but also the relief

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of overworked mental health professionals, such as the staff at The Well and the therapists at the

Counseling and Psychological Services(CAPS) department.

Statement Details					
Date Posted	**Term**	**Description**		**Charges**	**Credits**
		PREVIOUS ACCOUNT BALANCE		$0.00	
Current Activity					
08/16/2021	Fall 2021	TECH COURSE MATERIALS FEE		$68.00	
08/16/2021	Fall 2021	UGRAD HEALTH INS PREMIUM		$589.26	
08/16/2021	Fall 2021	STUDENT SERVICES FEE (UG)		$376.00	
08/16/2021	Fall 2021	TUITION (UG)		$3,814.00	
08/16/2021	Fall 2021	KUCR FEES		$3.00	
08/16/2021	Fall 2021	ASUCR FEE		$12.50	
08/16/2021	Fall 2021	PROGRAM BOARD FEE		$40.00	
08/16/2021	Fall 2021	UCSA FEE		$0.75	
08/16/2021	Fall 2021	UCR STUDENT SERVICES FEE		$6.00	
08/16/2021	Fall 2021	EDUCATIONAL OPPORTUNITY PROG.		$1.50	
08/16/2021	Fall 2021	STUDENT CENTER FEE		$90.00	
08/16/2021	Fall 2021	RECREATION FACILITY FEE		$20.00	
08/16/2021	Fall 2021	DIVISION I FEE		$35.00	
08/16/2021	Fall 2021	GCAP FEE		$2.50	
08/16/2021	Fall 2021	STDT VOICE INITIATIVE FEE		$1.33	
08/16/2021	Fall 2021	STDT THEATRE ADM FEE SSTAP		$2.50	
08/16/2021	Fall 2021	HIGHLANDER EMPRMNT STDT SVCS		$16.00	
08/16/2021	Fall 2021	RECREATION CNTR EXPANSION (UG)		$149.00	
08/16/2021	Fall 2021	HIGHLANDER FEE - FA		$3.50	
08/16/2021	Fall 2021	BASIC NEEDS & AID - FA		$5.00	

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

Statement Date: 08/17/2021

| 08/16/2021 | Fall 2021 | HIGHLANDER ABROAD FEE - FA | | $2.00 | |

Figure 5. UCR Student Statement Details, 2021, University of California Riverside, 10 May

2022, <https://portal.ucr.edu/uPortal/f/home-student/normal/render.uP>

Though it is difficult to make use of every mental health service, I believe the average

UCR student should utilize at least 2-3 services in their undergraduate career. Studies have

shown the severity of behavioral health for college-aged students, and the need for departments

and organizations that consider mental health. I believe students becoming more aware of the services, such as The Well, provides would make them more willing to make use of those services.

There is not much data collected or allowed for students to access yet mental health awareness organizations are still quite efficacious and attempt to reach a wider population in UCR and surrounding communities. Be it services education, peer coaching, stress relief kits, or Therapy Fluffies, the need is still prevalent thus the options should not cease to the already existing but should be forthcoming. There should be a greater push for funding for these services, especially as in the past two years of the pandemic, people need the help of mental health professionals, their peers, and greater understanding.

Potential Solutions

If it were in my hands to create potential solutions to the problem at hand with mental illnesses being such an evident crisis, not only in the United States, but also on the UCR campus, and students not accessing the resources that the university provides, I would think of the following solutions as a next possible option. Because there needs to be an increase in awareness of the mental health services, I believe an increase in word-of-mouth advertisement for these services. For example, if a college student is having a mental health crisis and they are sharing their problems with a friend who has utilized CAPS, the friend should share their experience with their free on-campus mental health service with the friend facing the crisis. This sparks the destigmatizing of talking about mental health and how to deal with mental health illnesses amongst trusted friends. There can also be an increase in advertisements such as pamphlets and posters around populated areas of campus. Another way to spread awareness is through

increasing social media presence. The Well currently has 2,036 Instagram followers and has had 15 posts in the past week. Though the efforts for this department are off to a good start, there has to be consistent posting from various mental health services so they can reach the majority of UCR students. Because not all students use social media, and not all students utilize school services and events, there still needs to be in-person tabling done.

I know that it is a difficult time to be a student and the current times have issued us with a considerable amount of obstacles to overcome this quarter, so for anybody who finds themselves struggling with personal issues, please feel free to reach out to me or the considerable amount of resources available from the university. Here are some resources currently available to students:

Student Support Services:

https://somsa.ucr.edu/student-support-services

Campus Health and Wellness Resources

https://somsa.ucr.edu/campus-health-and-wellness-resources

Counseling and Psychological Services

https://counseling.ucr.edu/

Sample Syllabus Template including Mental Health Resources

As I mentioned, data supported by policy and vice versa is very important. A potential policy that UCR could implement that would effectively spread awareness for mental health services and departments would be mandating professors to provide resources in their syllabi. Because the Committee on Courses requires professors to create tentative outlines, a list of textbooks and readings, a make-up policy, etc. on their syllabus, there is currently no provision for listing mental health resources on campus. With the number of students suffering from mental health issues, it might benefit the university to create a mandated syllabus statement that directs students to various mental health resources on campus. A sample template for the syllabus statement, created by Joab Corey, is shown above.

Further Directions

Due to this project being an analysis of previous data collected by mental health organizations on the UCR Campus, in the future I would like to conduct my surveys on how often UCR students would want to utilize these organizations, or if they have been positively impacted by these already. I think this would give anecdotal evidence about the impact of these organizations, and in turn whether or not these organizations are efficacious to UCR students. Although there is a significant amount of data to support that students do use these organizations, as there is still funding for them and operations are still in use, I believe these anecdotal situations would be prime examples of why there should be more funding for these certain organizations. This could help the future of incoming students as they would have a stable ground when they are having a mental health crisis. Asking the following questions may give my project further insight into how UCR students would solve their mental health crisis if experienced and their opinions on the options UCR has for them.

- Have you ever had a mental health crisis?
- Have you ever utilized The Well or CAPS resources or Academic Counseling?
- What are you most likely to turn to when you are stressed about school or the future or living expenses?

I believe organizations that specialize in mental health are often overlooked and underfunded, but college students face high levels of stress as they struggle with courses, jobs, internships, young adulthood, and societal pressures. I believe interviewing or surveying students would help add insight to this project, and a Community Health Presentation could be a LACE project for a UCR School of Medicine student.

The Impact on My Career

I believe not only my time at MMS has left an impact on what I want to pursue in the future, but this capstone project has also been monumental in my next steps. Before joining MMS, I was sure that mental health was very important to me, not only in my college career but also in my future as an aspiring physician. Realizing the gap in resources and education when it comes to mental health in the Inland Empire, has been a great concern of mine. Participating in several presentations where our group interacted with over 50 high school students and community members, has been eye-opening. There are many students that want to be engaged in learning about Depression because of their current circumstances or because of someone they have known to have a mental illness. It is not something to be taken lightly, especially since the COVID-19 pandemic has created several years of social isolation that we are still trying to amend.

Being a part of MMS, made me realize how being a future psychiatrist would be one of the goals that I would aspire to achieve. To take further steps toward becoming a psychiatrist and taking a more first-hand approach to the need in the field, I applied for a scribe opportunity as an Inpatient Psychiatry Scribe at the Arrowhead Regional Medical Center, to which I was later offered a position. I consider this inspired by my time in MMS because of the topic that I was focused on in the organization and how interesting it was to learn more about depression and spread education to the community. I hope to work alongside trained physicians who can help me further understand the importance of mental health and its various components.

Conclusion

It is evident that there is a need for mental health services among UCR students based on the research done by the American College Health Association. There is a multitude of reasons why young adults face these mental illnesses, varying from academic challenges, facing food insecurity, and the political and economic status of the country. This can very well accumulate to psychological distress manifesting into various symptoms. Though there are services on campus for students to utilize, due to lack of awareness, many mental health services are being grossly under-utilized.

With the lack of transparency in funding, it is hard to decipher whether or not these departments require greater funds or if there could be a potential reallocation of funds to these services. The university and individual departments that provide mental health services, should be more clear with their budgets so that there can be a more effective analysis of what is needed to better cater to the students.

Along with a more transparent budget, there needs to be a push for the awareness of existing mental health services on campus. This can be done through more posters and pamphlets around college, but also a better use of social media. Reaching the targeted audience through social media is not only a cost-effective method but can also allow for a greater number of students reached. Lastly, generating a novel policy that allows for professors to include a list of mental health services in their course syllabus is an effective way to reach every single undergraduate student as they are prone to read their course syllabus to its entirety.

Overall the need for more efficacious mental health services is still a concern for the UCR campus, and the listed possible solutions can help alleviate some of the challenges they are currently facing.

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