

Mental Health First Aid: Coming to a Campus Near You:
How to Build a Mental Health Training Program, Practical
Applications, and the Importance of Leveraging Community
Partnerships

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Conflicts of Interest Statement

- The presenters today have no actual or potential conflict of interest in relation to this program presentation.

SUNY Erie Campus Composition

- 2 year public community college
- Three campus locations; urban, suburban, and rural
- Approximate Number of Students: 11,000
- Demographics

Compeer of Greater Buffalo

- Founded, 1973
- We believe that the healing power of friendship by just one caring adult is life changing for an individual recovering from a mental health illness
- In 2012 the Compeer Program was designated by SAMHSA as an evidence based program for people with mental health challenges
- Children/Youth, Adults, Older Adults, Veterans
- Mental Health First Aid
 - Three years
 - 2,500 trained

Presenting Issues: The Need for Community Collaboration

- Lack of licensed counselors available on campus
- Increase in the number of students exhibiting behaviors in classroom
- Lack of faculty and staff training in order to effectively identify and intervene with students
- Polarizing national issues affecting students
- Lack of institutional resources
- Non-residential campus

What is Mental Health First Aid?

- An 8 hour education and certification program
- Introduces participants to risk factors and warning signs of mental health problems in adolescents
- Emphasizes the importance of early intervention
- Teaches individuals how to help an adolescent in crisis or experiencing a mental health challenge using role-playing and simulations
- Teaches how to provide initial help and connect young people to local and national professional, peer, social, and self-help care

Mental Health First Aid Included in SAMHSA's National Registry of Evidence-based Programs and Practices

Mental Health First Aid: Why get trained?

Mental health problems are **COMMON.**

Learn how to **NOTICE** when someone needs help

STIGMA is associated with mental health problems.

Promote **UNDERSTANDING.**

PROFESSIONAL HELP is not always on hand.

Encourage community members to **SUPPORT ONE ANOTHER.**

Individuals with mental health problems often **DO NOT SEEK HELP**

Help more people **GET THE HELP THEY NEED.**

Many people are not well informed and don't know **HOW TO RESPOND.**

Learn how to **INTERVENE.** You might **SAVE A LIFE.**

Mental Health First Aid: Training Models

- Mental Health First Aid is an evidenced based, peer reviewed, and international training program
- Instructor trainings are available for special populations based on age and type of profession. i.e. Mental Health First Aid for Public Safety, youth, and higher education
- The training focuses on mental illness disorders and substance use

Becoming a Mental Health First Aid Trainer

- Individuals interested in becoming a certified trainer can enroll in a five (5) ,eight (8) hour day training program
- Participants of the instructor trainings are comprised of professionals, community members, family members, social workers
- Those interested in pursuing professions in or are currently active in healthcare, psychology, counseling, or social work are the most common enrollees in the certification training

Project AWARE/ Mental Health First Aid: Program Overview

- Compeer of Greater Buffalo is the lead agency. Works in tandem with seven community agencies including Buffalo Federation of Community Centers, Community Connections of New York, Crisis Services, Erie County Department of Mental Health, Erie County Medical Center, Horizon Health Services, and Jewish Family Services of Buffalo and Erie County
- Primary focus is on City Campus due to multiple risk factors. The area surrounding City Campus is designated as a Health Professionals Shortage Area
- Assign a Project Coordinator
- Provide three trainers who will administer MHFA
- Serve on the Inter- Agency Council

Project AWARE/ Mental Health First Aid: Program Overview: SUNY Erie Responsibilities

- Train 100 participants in year one, 200 in year two, and 200 in year three
- Administer a mental health assessment annually
- Coordinate a community services fair at all three campus locations
- Assist with scheduling and marketing of the trainings
- Developing a plan of sustainability

Behavioral Health Survey:

- Assessed the frequency of symptoms that student's experienced related to anxiety, depression, and substance use.
- Assessed the of identified behaviors during the Last 6 Months by asking if the behavior occurred at all, several days, more than half the days, or nearly every day.
- No incentive is given for participation.

Semester/Year of Survey	Total Number of Respondents
Spring 2016	244
Spring 2017	338
Spring 2018	361

SUNY Erie's Behavioral Health Survey: Outcomes

- Data taken from SAMSHA Project AWARE Quarterly Evaluation and Performance Report, January 2018
- This survey collected information regarding students' self-report of depression, anxiety, and behavior consistent with substance use disorders
- From the first year of survey distribution to the second, there was a decrease in the proportion of individuals that scored in the mild and moderate categories of depression and anxiety. However, there was an increase in the proportion of individuals that scored in the moderately severe and severe categories from Year 1 to Year 2
- This increase could be due to increased awareness of the mental health symptoms after completing the MHFA training

SUNY Erie's Behavioral Health Survey: Key Takeaway's

- Results across both populations that completed the survey were consistent with about 83% of individuals not feeling the need to cut down on drinking or drug use
- From the first year of survey distribution to the second, there was a small decrease in the proportion of individuals that felt bad or guilty about their drinking or drug use
- Less than 10% of individuals felt they have been criticized by others regarding their drinking or drug use. However, there was an increase in the percentage of individuals that have felt annoyed by people criticizing their drinking or drug use from Year 1 to Year 2
- From the first year of survey distribution to the second, there was a slight increase in the proportion of individuals that felt they have had the need to drink or use drugs first thing in the morning

Recruitment of MHFA Trainees

- Registration link for participants through Baseline
- Advertising: posting on ECC Today, flyers, Starfish, CTLA weekly newsletter, College Professional Development Days, Department Chair Retreats
- Linkage with Academic Departments: Allied Health Programs, Social Science, Mental Health Assistant: Substance Abuse Counseling
- Community interest
- Changes in the composition of trainees over time

Post-Training Feedback

- Eligible trainees are asked to complete a 90 day post-assessment
- Of the 256 trainees eligible for the post training feedback survey, 49 (19%) individuals started the survey. Of the 49, 35 (71%) completed the survey and are included in the analysis below
- 80% of trainees reported having daily interaction with youth, both personally and professionally
- 66% of trainees reported having contact with youth that could benefit from the MHFA training
- Trainees were asked about their frequency in using MHFA techniques to recognize the signs that a young person may be dealing with a MH crisis. 48.6% use it but not that often, 8.6% use often, 5.7% use very often, 27.1% not at all

Post-Training Feedback

- Use of MHFA techniques to be aware of your own views and feelings about MH problems
34.3% use often, 17.1% use very often, 31.4% use it, but not that often, 17.1% not at all
- Use of MHFA techniques to assist a young person in seeking professional help or connecting with supports
5.7% use often, 40% use it, but not that often, 54.3% do not use at all
- Use of MHFA techniques to listen to a young person in distress and offer basic “first aid”
5.7% use it very often, 5.7% use often, 45.7% use it but not often, 49.2% do not use it at all
- 81% of trainees are female and white
- Most ages of participants were 25-44 or 16-24
- 98% would recommend the course to others

Recruitment of MHFA Trainees

STRENGTHS

- Certificate adds to credibility of program. Particularly with students. (use in partnership with Career Services to place on resume, badging, co-curricular transcript)
- The training supports a culture of reducing stigma concerning mental health, and enhanced mental health literacy.
- A community partnership builds on pre-existing resources. Builds upon knowledge of community resources to better connect students.
- Allows individuals to help assist individuals experiencing a mental health crisis.

WEAKNESSES

- Initial low attendance at program's inception.
- Identified gap in the number of referrals needed from training participants.
- Only 50% of registrants attend the sessions.

Recruitment of MHFA Trainees

STRENGTHS

- Grant collaboration promotes the opportunity to share resources, supplement programs costs such as Facilitator Training and materials.
- Agency appointed facilitators can assist with training in a pinch!
- Training identifies community supports as well as an annual community services fair.
- We have found that people who have been trained find that they are more confident and prepared to respond to a mental health crisis after participating in a training

WEAKNESSES

- Prospective Trainees did not want to commit to 8 hour training time.
- Being a commuter campus creates challenges in training students.
- Faculty adjuncts constitute 60% of current faculty. They are only compensated for teaching leaving few opportunities to partake in professional development.

MHFA: Program Next Steps

- Continue partnership with Compeer to provide on-campus MHFA training.
- Stress the significance of making referrals to training participants by showcasing success stories.
- Expand marketing and recruitment efforts for the program to exceed 500 participants over the next three years.
- Target male dominated academic programs and student leadership groups.
- Utilization of technology to further leverage program goals. (Starfish, Remind, Web Ex, enhanced surveys/focus groups)
- Increase MHFA community referrals after training commences via Coffee Clutches and peer supports.
- Keep in line with changing needs of trainees to offer flexibility in trainings by offering customized trainings. i.e. Higher Education, youth, Police Officers.