

Changing the Way We Serve Students on College Campuses: A Mental Health Resiliency Program Transitioning College Students on a Leave of Absence Back to Campus

Courtney Joly-Lowdermilk, M.S.Ed

Sarah Satgunam, LCSW

Boston University Center for Psychiatric Rehabilitation

Agenda

- medical leave of absence
- NITEO: a wellness and resilience program
- college mental health coaching
- program outcomes
- discussion

Felt very sad

	Percent (%)	Male	Female	Total
No, never		28.0	16.5	20.4

Felt so depressed that it was difficult to function

	Percent (%)	Male	Female	Total
No, never		51.3	42.8	45.6
No, not last 12 months		20.7	21.6	21.3
Yes, last 2 weeks		9.1	11.7	10.9
Yes, last 30 days		5.3	7.0	6.5
Yes, in last 12 months		13.5	16.8	15.7

Felt so depressed that it was difficult to function

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No, never		51.3	42.8	45.6
No, not last 12 months		20.7	21.6	21.3
Yes, last 2 weeks		9.1	11.7	10.9
Yes, last 30 days		5.3	7.0	6.5
Yes, in last 12 months		13.5	16.8	15.7
<i>Any time within the last 12 months</i>		28.0	35.6	33.2

Any time within the last 12 months

	28.0	35.6	33.2
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Felt overwhelming anger

	Percent (%)	Male	Female	Total
No, never		42.9	38.6	39.9
No, not last 12 months		21.9	21.5	21.6
Yes, last 2 weeks		10.8	12.6	12.0
Yes, last 30 days		7.3	9.3	8.7
Yes, in last 12 months		17.2	18.1	17.8

Any time within the last 12 months

	35.3	40.0	38.5
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Seriously considered suicide

	Percent (%)	Male	Female	Total
No, never		79.1	76.0	76.9

Attempted suicide

	Percent (%)	Male	Female	Total
No, never		92.2	90.3	90.8

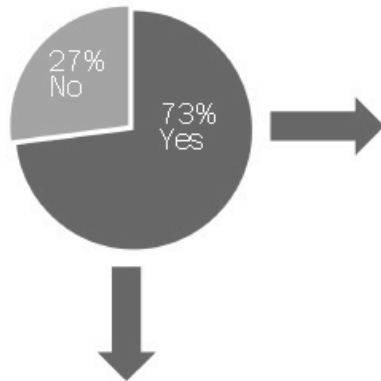
Within the last 12 months, how would you rate the overall level of stress experienced:

	Percent (%)	Male	Female	Total
No stress		2.9	0.6	1.4
Less than average stress		12.3	4.4	7.0
Average stress		40.2	36.6	37.7
More than average stress		37.0	46.4	43.2
Tremendous stress		7.6	12.0	10.6

college students speak, and **73%** of those with a mental health condition report **experiencing a mental health crisis while in college** triggered by anxiety, depression, difficulty adjusting, stress...

Survey respondents shared what triggered their mental health crisis and how well their colleges responded to the crisis. In most cases, colleges were not aware of mental health crises. Survey respondents also provided tips on how colleges should address mental health crises.

Have you experienced a mental health crisis while in college?



What triggered your crisis?

- Extreme feelings of anxiety, panic, depression about school and life.
- Difficulty adjusting to a new routine and environment.
- Feelings of homesickness, loneliness and isolation.
- Stressed or overwhelmed about course load.
- Posttraumatic stress disorder episode triggered by class content.
- Medications stopped working.

Tips on Addressing Crises

- * Work with students on how to prevent mental health crises and how best to address them when they happen.
- * Provide resources, referrals and help immediately. Schedule follow-up appointments within 24 hours of a crisis.
- * Do not penalize students or revoke financial aid.
- * Support students in contacting family, friends and their support network.
- * Help students notify professors if they miss classes and/or assignments.

Stigma and Help Seeking for Mental Health Among College Students

Daniel Eisenberg

University of Michigan, Ann Arbor

Marilyn F. Downs

Tufts University, Medford, Massachusetts

Ezra Golberstein

Harvard Medical School, Boston, Massachusetts

Kara Zivin

Department of Veterans Affairs and University of Michigan, Ann Arbor

Mental illness stigma has been identified by national policy makers as a barrier to help seeking for mental health. Using a random sample of a diverse set of 13 universities, we conducted one of the first empirical tests of the association of help-seeking behavior with both perceived public stigma and stigmatizing attitudes (personal stigma). There were three main findings: (a) public stigma was considerably higher than personal stigma; (b) public stigma was higher among students with any of the following characteristics: international, more religious, or from a poor family; and (c) personal stigma was significantly and negatively associated with measures of help seeking (pursuing of psychotropic medication, therapy, and nonclinical sources of support). Perceived stigma was not significantly associated with help seeking. These findings inform efforts to reduce the role of stigma as a barrier to help seeking.

Keywords: stigma; help seeking; mental health; college students

The majority of adults with mental disorders in the United States do not receive mental health care (Wang, Lane, et al., 2005) despite the availability of evidence-based treatment (U.S. Department of Health and Human Services, 1999). Those who do receive services often delay seeking help or do not adhere to recommended treatment (Sirey, Bruce, Alexopoulos, Perlick, Raue, et al., 2001; Wang, Berglund, et al., 2005). These low rates of treatment for mental disorders are evident in all age groups (U.S. Department of Health and Human Services, 1999).

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Please address correspondence to Daniel Eisenberg, Department of Health Policy and Management, University of Michigan, M3517, SPH II, MC 2029, 109 S. Observatory Rd., Ann Arbor, MI 48109-2029; e-mail: dteis@umich.edu

“It’s only in the last month or two that I actually started keeping my parents in the loop about how my mood is. Before that...never my parents, never my sister, always secret. The whole process of telling [my mom] is going to be more distressing than the thing actually was...And then all these questions. I mean, I love [my parents] to bits, but it’s like... [their support] is not the most helpful thing.”

Eisenberg, D., Downs, M. F., Golberstein, E., Zivin, K. (2009). Stigma and help seeking for mental health among college students. *Medical Care Research and Review*, 66, 522-541.

Student Dropouts

"A depressive episode made it impossible for me to go to classes and I did not get help until it was too late and I was withdrawn and I could never afford the cost to go back because I lost my scholarship for being withdrawn."

- Survey Respondent

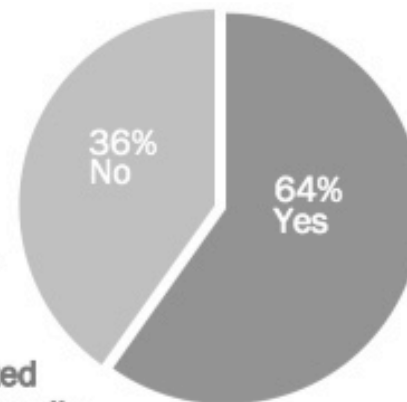
college students speak, and **64%** of those with a mental health condition **attribute their leave of absence to mental health**

ity of survey respondents who said they are no longer stopped within the past five years) are not attending mental health related reason.

of these survey depression, bipolar atic stress disorder

Are you no longer attending college because of a mental health related reason?

and what might have family, campus- health the survey respondents aware of or did not while they were students.



More than 45 percent of those who stopped attending college because of mental health related reasons did not receive accommodations. Additionally, 50 percent of them did not access mental health services and supports.

NITEO: “thrive, bloom”

- prepare transition-aged youth (18-25) on MLOA for return to college
 - increase hope, resilience, and self-determination
 - change typical trajectory of underachievement
- one semester (~14 weeks) of academic and wellness courses
 - classes meet 3 times per week (~14 hours)
 - wellness
 - mindfulness
 - writing seminar
 - academic seminar
 - photo voice
 - career seminar
- two semesters (~28 weeks) of college coaching, continued as needed

Wellness Seminar

- content areas include:
 - domains of wellness
 - conflict resolution
 - choices and consequences
 - limited thinking patterns
 - self care
 - sexual hygiene
 - drugs and alcohol use
 - interpersonal relationships, active listening, and empathy

Wellness Seminar

- Practicing empathy
 - listening to and understanding others' perspectives and emotions
 - strengthening interpersonal relationships
 - role-playing using the script "You feel ____ because ____."

STUDENT A:

"If I tell someone I'm actually going through a problem right now, it feels like I failed, really. It feels like I've lost control."

STUDENT B:

"**You feel** afraid to share your experiences with others **because** you don't want to be judged."

To be a college student, or not to be?

The Boston Globe

By Howard Axelrod | NOVEMBER 09, 2014

A FEW weeks ago, I told my freshman composition class that we needed to have a talk. Those were the words I used — “We need to have a talk” — as though we were in a relationship, and we’d been failing each other in obscure ways that needed to be articulated. The class groaned.

They had a point. A mandatory writing class at a small state college generally isn’t the



“...I had all this support, and I still was struggling so much. It wasn’t a matter of having the right supports in place. **I just wasn’t ready.**”

“My dad kind of forced me to apply. But basically, I **didn’t feel like I was ready** to go to college. I felt like **I didn’t really want to go to college.**”

Mindfulness

- topic areas include
 - gratitude practice
 - loving kindness practice
 - meditation
 - relaxation techniques
 - physiological stress responses
 - cognitive restructuring
 - hope, optimism, happiness
 - mindfulness through martial arts

Writing Seminar

- topic areas include
 - reading fluency
 - critical thinking
 - writing fluency
 - assistive technology
 - thesis statement development
 - editing/peer editing
 - research: finding and using sources

then papers are graded...	Letter Grade	Grade Point	Percentage
assess performance	A	4.0	94 - 100%
cope with grade	A-	3.7	90 - 93%
inquire about feedback	B+	3.3	87 - 89%
advocate for direction on next paper	B	3.0	83 - 86%
rewrite and resubmit	B-	2.7	80 - 83%
	C+	2.3	77 - 79%
	C	2.0	73 - 76%
	C-	1.7	70 - 72%
	D+	1.3	67 - 79%
	D	1.0	60 - 66%
	F	0.0	0 - 59%

“...the anxiety surrounding will I get a good grade...I would worry before I handed in a paper, and after I handed in a paper, and after I got it back. **Every aspect of a grade was stressful.**”

“I’m never satisfied with how I do things, unless I actually **do well, which is getting As.**”

“I have **overly high expectations** of myself, so then I **feel really bad when I mess up a little bit**, and then it makes me not want to deal with it. And it makes me blow it out of proportion, kind of.
And then it’s **overwhelming for me when it shouldn’t be.**”

Academic Seminar

- topic areas include
 - learning styles and strategies
 - executive functioning
 - test-preparation
 - test-taking
 - self-advocacy
 - disability disclosure
 - group presentations
 - SMART goal setting

“I put food [in the refrigerator] and then I’d **forget** about it. Keeping myself organized is hard.”

“I maybe told one professor that I had a diagnosis. I **didn’t really tell people** because I started noticing that I felt like I was being **treated differently...**”

Photo Voice

- topic areas include

- social justice
- stigma
- marginalization
- career identity
- empowerment
- power
- discrimination
- prejudice

“The media makes me...it makes me feel...not just different, but **dangerous.**”

“The doctors wrote a note that said he needs to have less homework and he may need to **take breaks**, and he may want to have **students in the class give him their notes** because he may have trouble focusing because he’s on a cocktail of meds. I was on Risperdal, and I was absolutely conked out. But the **school did none of that.**”



We see an old **forgotten** home, a place we are warned from and predisposed to avoid. Few see that **it was once beautiful and full of life**, a place where families lived and amazing individual histories were created. **Few see the true potential of what it once was or might be again.**

“What a lazy Larry,” one might state.

What if you felt **trapped in a vast impenetrable box**, filled with brackish water, with seemingly no way to escape? All you could do is keep your head above the surface. **Outside observers may just see the tip of the iceberg, a head lazily bobbing** in a shimmering pool. Their perception skewed by the reflections in the water:

Ignorance...Incompetence...Selfishness...
“You gotta do something with your life!”

But **they can't see the massive bottom and the dark abyss of despair beneath this obscuring mirror**. Nor do they know of your sensitive eyes blinded by the saltiness. How much time has passed, you wonder? How far have you drifted? Now you are expected to reach the islands that once encompassed you:
Achievement...Success...Independence...
“Snap out of it!”

Alone, would you be able to pierce the prison that holds you? Forsaken, would you be able to tread water indefinitely? Blinded, would you be able to seek out the islands that may be anywhere? Only an escape artist can live up to those standards. No progress will occur until your eyes are rinsed clean by the gentle raindrops:

Guidance...Compassion...Time...
Are you really a lazy Larry?

Michael Groark



Career Seminar

- Vocational skills building
 - interviewing
 - resume and cover letter writing
- Guests share career paths, triumphs, and failures
 - college athletic coach
 - grammy-winning musician
 - veterinarian
 - civil rights lawyer
 - mental health clinician
 - psychiatric rehabilitation pioneer

NITEO Coaching

- Coaching Process Overview
- Spotlight on Coaching Tool: Mapping



Three-Phase Coaching Process

Phase I: Intensive

- Semester 1 (w/ Niteo group intervention)
- Weekly face-to-face meetings
- Orient, engage, plan, build supports & skills

Phase II: Transition

- Semester 2
- Weekly contact
- Facilitate successful transition to role/environment

Phase III: As Needed

- Semester 3 & beyond
- Contact/support as needed

Coaching Objectives

- **Increase student readiness to re-engage in postsecondary education**
 - Promote student sense of hope, self-efficacy, resiliency
 - Help student build personal support network
 - Develop and practice goal-oriented skills: academic, self-advocacy, wellness, self-determination, disability disclosure
- **Increase educational and vocational attainment**
 - Set and monitor progress toward academic and career goals
 - Facilitate transition back to college
 - Support use of campus and clinical resources

Coaching Practice Principles

- student-centered
- forward progress is the goal
- promotes hope and growth
- integrated with treatment
- strengths-based
- time-unlimited
- meaningful role-oriented
- flexible supports to accommodate students
- team-oriented
 - weekly team meeting
- high expectations

Coaching Practice

- **Support Coordination**

- contact disability and counseling services
- find clinicians
- schedule appointments with clinicians
- promote optimum utilization of clinical supports
- collaborate with team members/providers
- develop natural supports

- **Preparing for Return**

- time management/planning
- write letters of recommendation
- campus tours
- gather supporting documentation
- write personal statement

Coaching Practice

- **Skills Practice**

- time management
- goal setting
- problem solving
- resiliency building

- **Readiness Activities**

- research and evaluate job/volunteer/school opportunities
- complete applications
- interview preparation

- **Homework**

- coach will:
- student will:

Three-Phase Coaching Process

Phase I: Intensive

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Phase II: Transition

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Mapping

- Create series of thematic maps over period of four sessions (two maps/session)
- After mapping is complete, create action plan
- Set, review, and adjust goals week to week (mastery experiences)

What is Mapping?

- Mapping is a **personal futures planning** tool. (PFP is a guided process that assists an individual to formulate a vision for his/her future.)
- Maps are visual representations of a person's strengths, needs, preferences, and goals
- The planning process is student-driven. Coaches facilitates by **asking open ended questions** and **drawing visual representations.**

Inspiration: RENEW

- Structured school-to-career transition planning process
- Youth (15-21) with emotional and behavioral challenges
- Benefits:
 - Increased self-determination and self-efficacy skills
 - Improved functioning in school and community
 - Improved outcomes in education/employment

For more info: <http://renew.unh.edu>

Self-Determination

Definition

- A person's right and ability to control the direction of his/her life

Skills

- Self-Awareness
- Decision-Making
- Planning
- Problem-Solving
- Self-Advocacy
- Self-Confidence

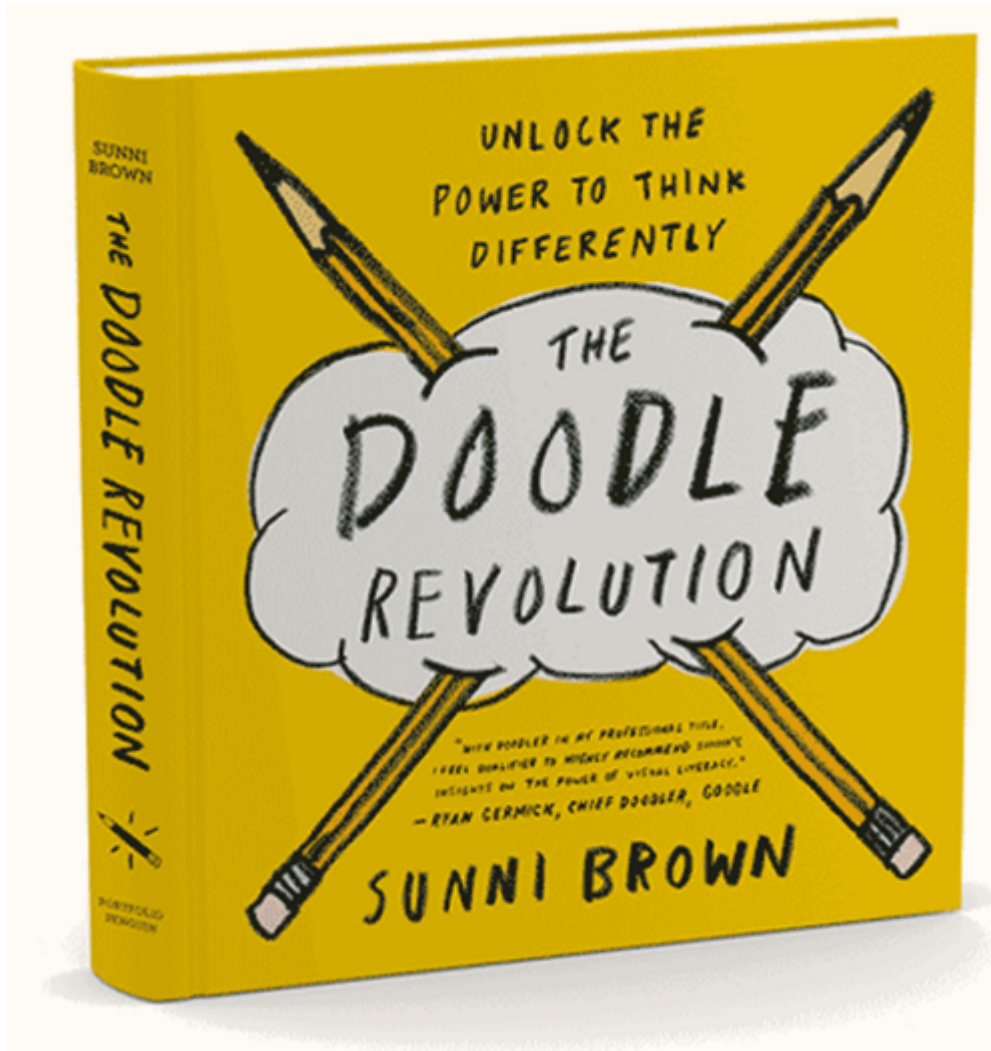
Mapping as a Coaching Tool

- An engagement tool
- A facilitation tool - focal point for conversation
- A way for students to process experience
- A recovery-oriented record
- A process for teaching self-determination skills: self-awareness, goal-setting, problem solving



Time Out!

You want me to draw?!?!



Doodling: Anti-Intellectual?

http://www.ted.com/talks/sunni_brown

Graphic Facilitation

- Use of large scale images to lead people towards a goal
- Used in executive world & counseling world



Learning Graphic Facilitation



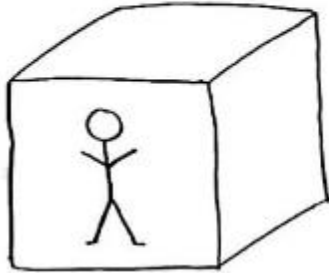
Basics

1. People
2. Place
3. Process
4. Speech
5. Text (less is more)
6. Color
7. Effects

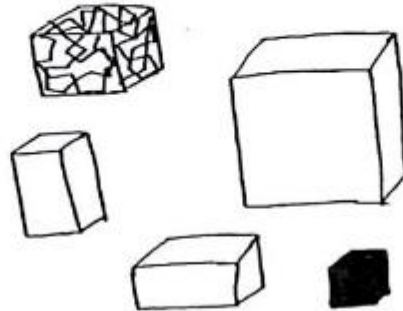


The 8th Element: Visual Language for Your Field

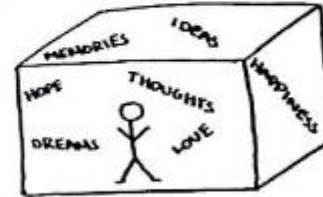
For me, having anxiety and depression is like being trapped inside a perspex box.



The nature of the box varies, day by day, hour by hour.



On a good day, there might be room for untainted thoughts, happy memories and pleasant experiences.



The sides are clear enough for me to see the outside world.

On a bad day, there is room for nothing but the cacophony of negative thoughts and feelings within me.



The sides fog up and I get only brief glimpses of the outside world.

On the worst days, I barely fit.

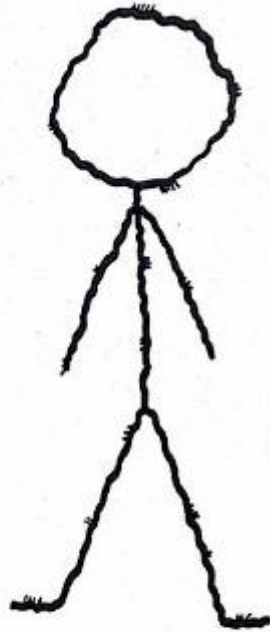


There is nothing but darkness.

But, no matter what, the box is always there.



Invisible to the rest of the world.
Very real to me.

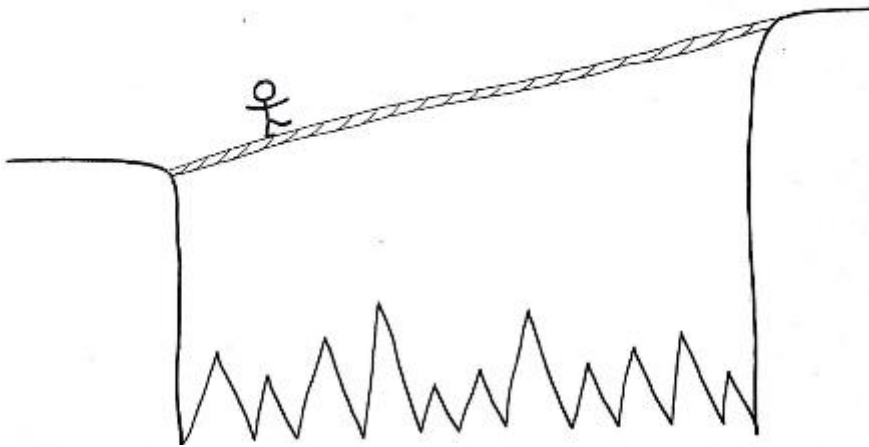


Sometimes, mental illness makes me feel like such a wobbly mess that I start to fray at the edges.



I worry that one day I will unravel completely.

Never underestimate what a huge challenge it can be for some people to just make it to the end of each day



You've conquered this mountain before



and you can do it again now. Stay strong!

NITEO Portfolio

- Who I Am Today
- My Story
- My Strengths & Accomplishments
- My Relationships
- My Fears, Concerns, & Barriers
- My Dreams
- Goals
- Resources for Success



Who I Am Today

- **Purpose:** Get to know student – who he/she is, what life is like for him/her today
- **Possible Open-Ended Questions:**
 - What are some of your roles in life? (e.g. sibling, student, worker, excellent video gamer)
 - How do you feel most of the time? What does a good day look like? How about a bad day?
 - What do you wish was different?

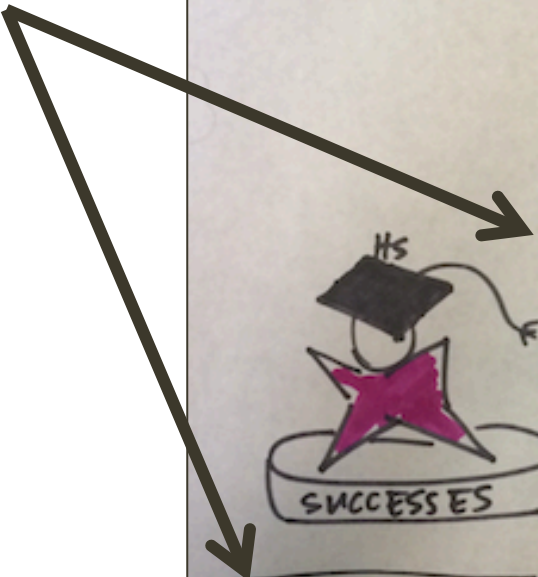
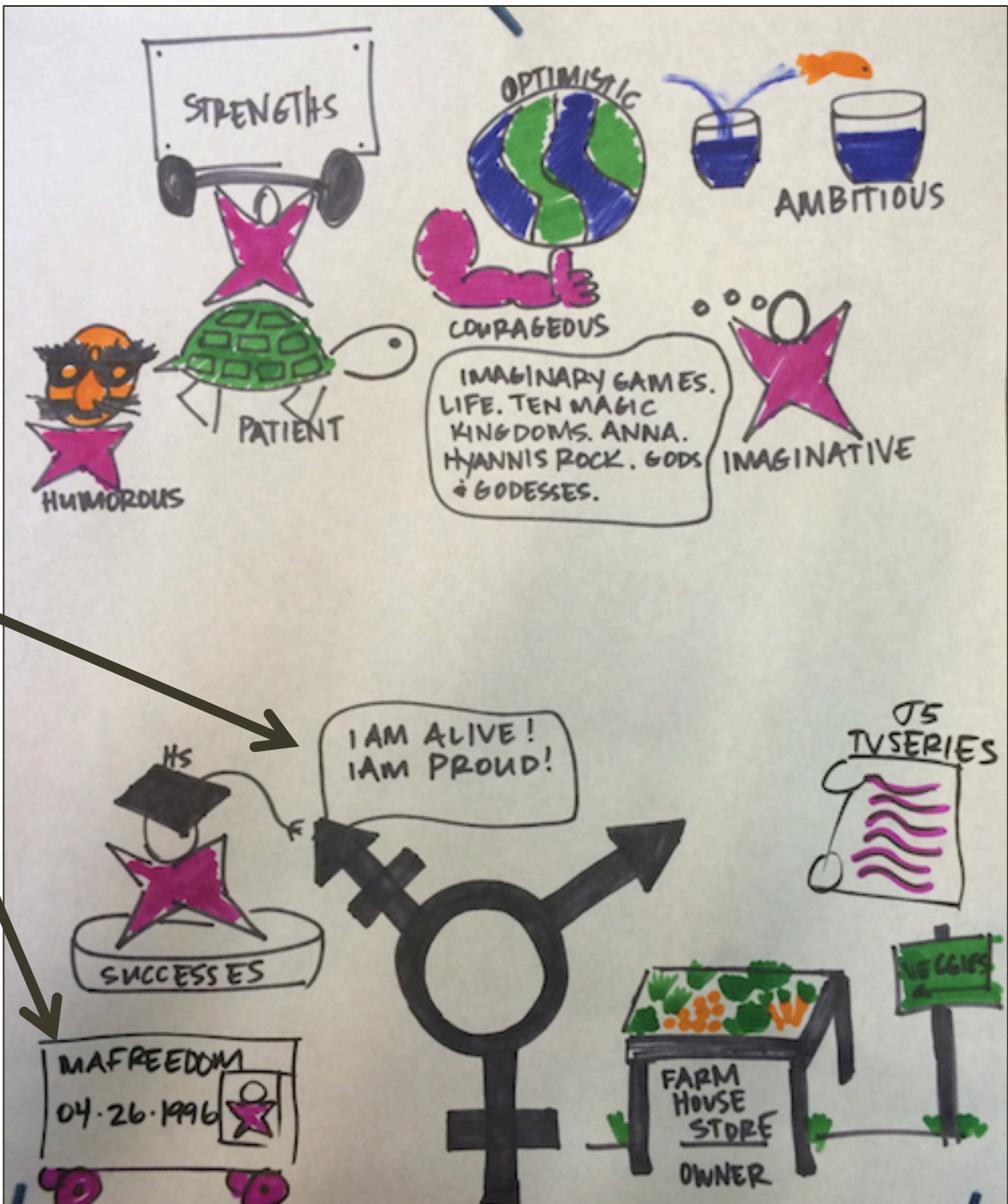
From Malloy, J.M., Drake, J., Francoeur, K., Cloutier, H., Couture, D., & O'Rourke, S. (2015). "RENEW facilitator's manual: A secondary transition model for youth and young adults." University of New Hampshire Institute on Disability.

http://www.iod.unh.edu/pdf/RENEW/RENEW_YouthPortfolio_101012.pdf

Strengths & Accomplishments

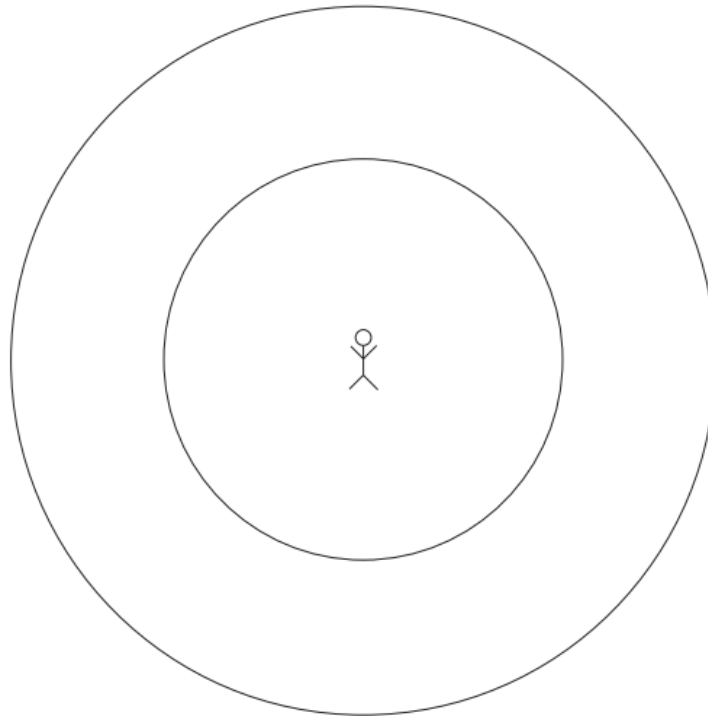
- **Purpose:** To help student inventory their strengths, which will be critical to achieving their goals.
- **Questions:**
 - Think about times in your life when you were proud of yourself, and what strengths, skills, and talents you possess.
 - What would your family say? What would your friends say?
- Use real-time info to fill in the gaps

From Malloy, J.M., Drake, J., Francoeur, K., Cloutier, H., Couture, D., & O'Rourke, S. (2015). "RENEW facilitator's manual: A secondary transition model for youth and young adults." University of New Hampshire Institute on Disability.



My Relationships

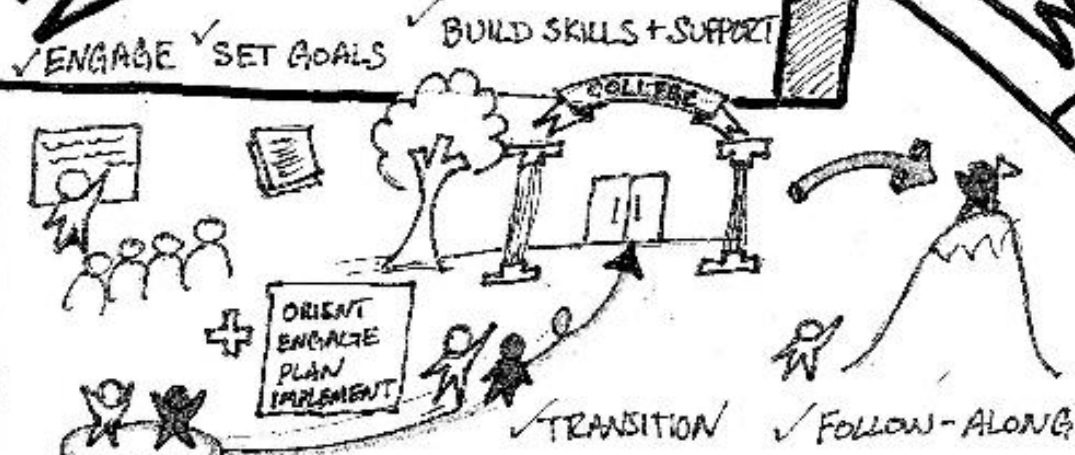
- Purpose: Inventory of the people in your life who are important to you and people who you rely on for help. This is a way to brainstorm people who might support you in working toward your goals.



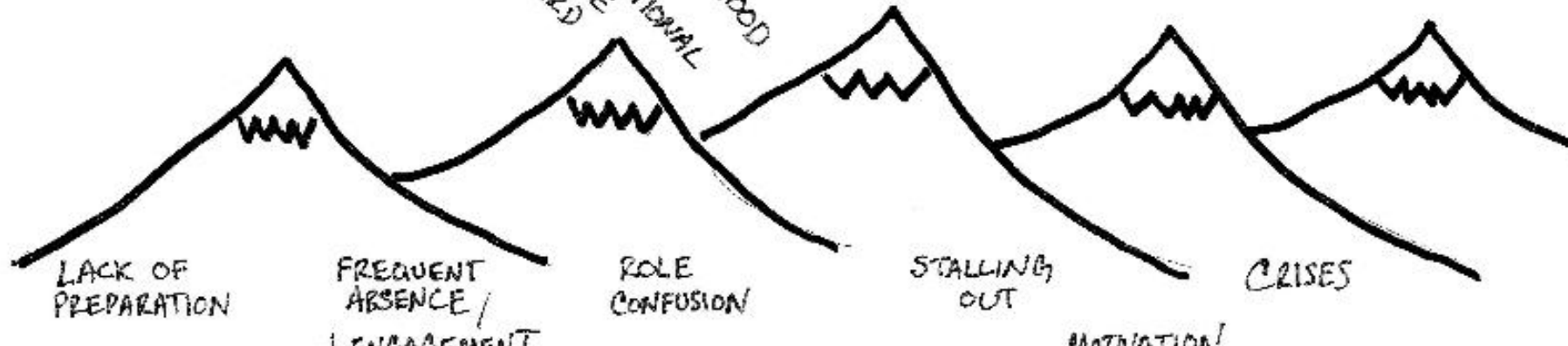
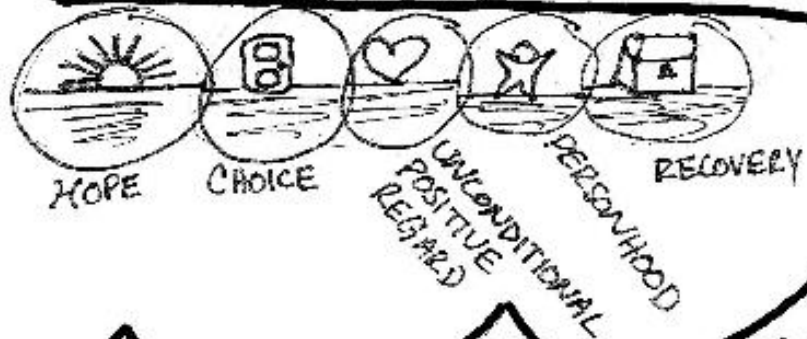
My Goals

- What is the long-term vision?
- What steps can you take to reach your goal?
- What strengths can you rely on to help you reach your goals?
- What supports can you utilize to help you?
- What might get in the way?

NITEO COACHING



- BO CAMPUS
- MAPPING
- COACHING TECHNIQUES
- MOTIVATIONAL INTERVIEWING
- READINESS ASSESSMENT
- CURRICULUM
- COMMUNITY CONNECTIONS



Good Practices...

- Always begin by orienting student
- Use student's words whenever possible
- Use your active listening skills to facilitate the dialogue
- Reach for balance: represent positive and negative
- End on a positive note
- Summarize your observations, but refrain from making interpretations

Sensitive Topics

- Use caution/care when depicting sensitive topics.
- “How can we represent that?”
- Remember, not relive.
- If mapping elicits difficult emotions, help student make a plan to follow up with a support (e.g. clinician, friend, etc.)

Program Evaluation

- nineteen young adults (n=19)
 - Mean age of 21 years
 - 12 male (63%), 6 female (32%), 1 transgender female (5%)
- all students disclosed at least one diagnosis:
 - anxiety disorder (53%)
 - mood disorder (53%)
 - schizophrenia or other psychotic disorder (26%)
 - ADHD (5%)
 - personality disorder (5%)
 - substance-abuse disorder (11%)
 - eating disorder (5%)
- 100% had some college experience
- 85% previously matriculated at a private, 4-year institution

demographics combined fall 2014 and spring 2015

Program Evaluation

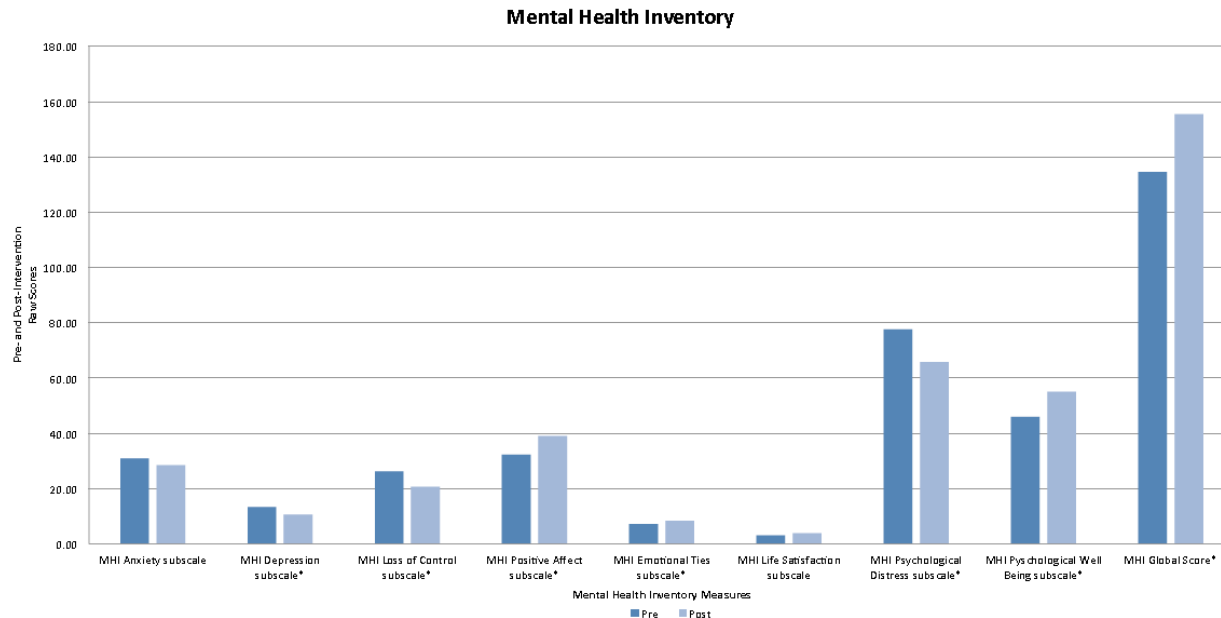


FIGURE 2: Mental Health Outcomes *significant (p < 0.05)

* statistically significant increases in positive affect (p=0.011), emotional ties (p=0.018), and psychological well being (p=0.010);

* statistically significant decreases in depression subscale (p=0.008) and psychological distress (p=0.023)

Program Evaluation

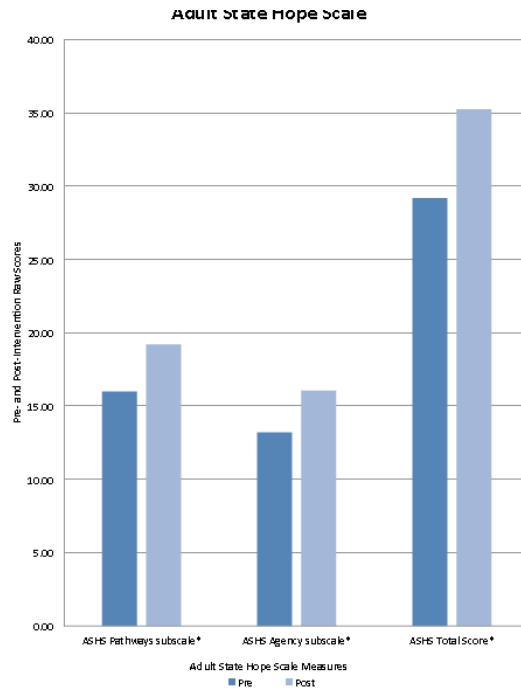


FIGURE 3: Hope Outcomes
*significant ($p < 0.05$)

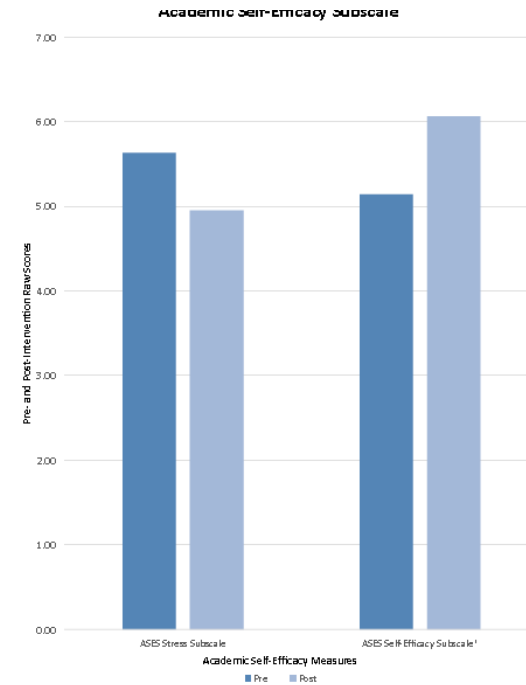


FIGURE 4: Academic Self-Efficacy Outcomes
*significant ($p < 0.05$)

* statistically significant increases in hope ($p=0.001$), goal-directed energy ($p=0.025$), planning toward goals ($p=0.000$), and academic self-efficacy ($p=0.026$)

Program Evaluation

- one month post phase-1 of the program:
 - increase in rate of college course enrollment (42% to 58%)
 - increase in employment rate (37% to 74%)
- continue to track students' progress 1 and 2 years post-program
 - college enrollment, graduation, employment rates
 - qualitative experience of school, work, life
 - psychosocial and academic functioning
 - use of clinical and non-clinical resources
- future testing and tracking: neuropsychological functioning and academic fluency

Parent Reports

“Everyone needs an 'angel' in his or her life: Someone who gives you hope; who believes in you no matter what you've done or how bad things have gotten; who can gently guide you back on track. As much as we may love our 'adult' children and want to help them, parents cannot fill that role at a time when our children feel they have 'disappointed' us and when they, naturally, want to establish their independence and pull away.

Sobriety programs and mental health professionals got my son (and me) through the crisis – but without Niteo my wonderful, funny, caring boy would never have had the skills or self-confidence to re-enter the world as a responsible adult with a mission.

The people at Niteo were truly my son's angels – and mine!”

Parent Reports

“Our son was diagnosed with bipolar disorder 4 years ago and had to drop out of [college] after his Freshmen year. He was enthusiastic about attending [college] and had received an academic scholarship, but the disorder was unmanageable at the time, and he needed help. My husband and I joined NAMI Family to Family and gained support and insight into the mental health world. We found a new doctor for him which has been quite successful and we learned about the Niteo Program at BU. My husband and I met with Larry and Courtney to make sure it would be a good fit for our son. We left that office with tears in our eyes because we knew this program was too good to be true. We watched him regain his confidence and balance within himself over the semester. He gained friendships and the students gathered outside of the classroom for social events that they planned themselves. When I asked him about the benefit to participating in the Niteo Program, he told me that it gave him the confidence to get back to college. Our son informed us that he signed up for a college class this summer and is paying for it on his own. He has held a job for 4 months now and is doing well. **This program has given our son hope and that hope transcends throughout this entire family.** We have always had faith in our son and his potential but without the Niteo Program, he would not have the confidence and self-esteem to make his dreams a reality.”

Student Reports

“I came to Niteo as an alcoholic in early recovery convinced things were about to go bad, like they always did, as soon as I got ready to go back to school. I was very much certain that nothing could convince me otherwise. Through Niteo classes and coaching, I came to believe that my low self-worth and unfortunate perspective on life were able to change. CBT, meditation, and writing played a role in that. The way it provided structure, the instructors, the friendly staff, and the resources at the center itself made a large impact on me. After Niteo, I attended [college] in the spring of 2015, taking just one class but working two jobs, and got an extremely high mark. Now I am taking two intensive summer courses at [college] and working two part time jobs. I have been sober 16 months and am ready to go back to school full time in the fall. Niteo was the bridge to that gap between lost and confused and hopeful and in tune, I would highly recommend it to anyone that began struggling after or shortly before they went to college. **The program has the potential to save lives, I have seen it first-hand.**”

Student Reports

“I had recently taken a medical leave of absence from [college] and became hospitalized after leaving. When I was released from the hospital, I felt unprepared to return to school after being out and away from school for such an extended period of time, leading me to find the NITEO program. This program suited me perfectly, as all of the young adults there were in similar situations as I was. This program has enabled me to realize **that I am not alone in my struggles** and that with the help of such dedicated staff and peers, **I can return to school feeling confident and determined.**

Now that NITEO has ended I am working closely with my one-on-one coach to help find me job opportunities and also to research colleges that might be suitable for me in the near future. I have applied to many work places and am in the process of finding work until I feel ready to return to school. If NITEO had not been there for me I would not have had the opportunity to meet the incredible staff and fellow students that helped me get back up on my feet.

NITEO and everybody who works there have been so incredibly kind and willing to go above and beyond to ensure I received the services I needed to succeed. **This place is the only one of its kind** and for anybody willing to put the time and work into getting help, it is for them.”

Student Reports

“I was brought to NITEO by my need for something to prepare me to get back into college, as well as structure for my days in the meantime. Through the classes and coaching **I learned a variety of things from how to structure an essay to memory skills, but I feel the most important lessons I learned were not explicitly part of the curriculum.** For example, I learned that I could still socialize with peers, something I had not done in a while, and that I am capable of sitting through hours of classes while paying attention and participating. These two revelations have been huge confidence boosters. Currently, I am searching for a volunteer position for the summer and I plan to attend [college] in the fall where I will study in the veterinary technician program. In my personal life, I am still in touch with peers I met at NITEO. There is definitely a correlation between my participation in NITEO classes and the coaching and where I am now. What I learned gave me the confidence to apply to [college], and now I have a college education ahead of me. **I would certainly recommend NITEO to another young adult struggling with what to do during their leave of absence.** I feel that the overall experience was beneficial to not only me, but to many of my peers in the program as well and so it would likely be helpful to numerous other people.”

FIGHTING FOR A FUTURE


Since Dori Hutchinson established Niteo in 2014, the majority of participants have completed the program, enrolled in college courses, and secured at least part-time jobs.

NITEO PROGRAM GETS COLLEGE STUDENTS WITH MENTAL HEALTH CONDITIONS BACK IN CLASS

BY JOEL BROWN



IMPACT: NITEO PROGRAM

 10 out of 12 students completed the first semester.

 Of these, 7 returned to school, and  3 found employment and plan to return to school after a second semester.

Abe* began hearing voices as a boy. When he started drinking and smoking pot as a teenager, the voices got stronger, and he was briefly hospitalized for psychiatric treatment. Despite ongoing therapy and medication, things fell apart in college. "I was so far off track," says Abe (who is not a BU student). "I was miserable. I was drinking a lot and having lapses in reality and bad symptoms." He was eventually suspended by an administration he says failed him, and moved back in with his parents.

Most students who leave college as a result of mental health problems do not return, says Dori Hutchinson, a clinical associate professor in the occupational therapy depart-

ment specializing in psychiatric rehabilitation. Many become socially isolated or marginalized, and a job, career, and fulfillment may seem out of reach. Many end up on disability. To help students before they slip that far, Hutchinson and her colleagues at the BU Center for Psychiatric Rehabilitation (CPR) started the Niteo program. (Niteo is Latin for "to thrive.") Established in 2014 and funded by a \$175,000 grant from the Sidney R. Baer, Jr. Foundation, the program provides recovery services and support to help students with serious psychiatric challenges return to school. The program is open to college students who live in the Boston area or attend school here, including BU.

College and mental illness can be a combustible mix. "There are kids who come to school with attention deficit

"Education gives people a valued role. They're not patients, consumers, or clients—they're students. And there's a foundation of optimism and hopefulness to that."

—Dori Hutchinson

DAVID NEUBER

problems, psychiatric and mental health problems like bipolar disorder, or a depressive disorder," says Larry Kohn, the center's director of development. These problems often worsen in college because of substance abuse and other risky behaviors and the stress that comes with having more independence and responsibility. Students who manage their illnesses with the help of doctors, therapists, and medication may still have difficulty meeting the demands of higher education on their own. When Hutchinson spoke at a 2013 meeting of the National Alliance on Mental Illness in Boston, "about 80 parents lined up to tell me the story of their kids, saying, 'My kid didn't get any support to stay in school.'"

This is where Niteo comes in. The program "uses education to nurture the idea that people can heal from their experiences with mental health challenges and move forward to live the kind of life they want," says Hutchinson, director of services at the center. "Education gives people a valued role. They're not patients, consumers, or clients—they're students. And there's a foundation of optimism and hopefulness to that."

The 30-week program is divided into two semesters. During the first, students come to the center on Commonwealth Avenue three times a week for classes in coping skills like mindfulness and stress tolerance, as well as academic skills like writing and test preparation. The second semester focuses on individual coaching to help the students over their personal hurdles, whether it's a practical task like organizing a schedule or getting to class on time, or more complex, such as overcoming the feeling of stigma. The program can be adjusted to address each student's needs, says Niteo program coordinator Courtney Joly-Lowdermilk.

Students in the first two cohorts, who started in fall 2014 and spring 2015, had nearly identical results. A dozen students enrolled each time; 10 in each group completed the classes and 7 have already taken at least one college course. About half also secured at least part-time jobs. The program starts a third cohort in September 2015. Hutchinson and colleagues hope to secure funding to keep the program going and to share their practices with campuses around the country.

At 23, Abe is a Niteo success story. An inpatient treatment program finally provided a diagnosis to explain his challenges: schizo-affective disorder. His psychiatrist steered him to the center, where he's known as an enthusiastic participant, working with both a college coach and a writing coach, speaking up in discussions, and even organizing social events for the group. He attends Alcoholics Anonymous meetings, has two jobs, and has been admitted to a new college. "I'm taking a course online there, and I have a 95 average," he says. "Niteo made it possible, because the last time I went back to college I was like a deer in the headlights."

This progress, he says, has convinced him "that if I stay sober and treat my symptoms and work hard at this, I can make a difference in my life. I sort of lost hope at one point, and Niteo is one of the things that brought it back." ☐

*Name changed for privacy

Contact Information

Courtney Joly-Lowdermilk, M.S.Ed

cjoly@bu.edu

617-483-3827

Sarah Satgunam, LCSW

ssat@bu.edu

617-483-3824

Dori Hutchinson, Sc.D., CPRP

dorih@bu.edu

617-483-3826

Center for Psychiatric Rehabilitation

Boston University

940 Commonwealth Avenue

Boston, MA 02215

www.bu.edu/niteo

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