Healthy Minds Study

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Outline of Presentation
1. Background and Methods (2 min)
2. Key Findings and Possible Implications (7 min)
3. Next Steps (3 min)

Background and Methods (2 min)

Research Collaborators

• Center for Student Studies, at the Survey Sciences Group, LLC (http://www.surveysciences.com/css.html):
• Pilot Healthy Minds Study
  – Co-developers and co-authors: Ezra Golberstein, Sarah Gollust, Jennifer Hefner
  – Co-authors: Jim Cranford, Emily Nicklett, Katie Roeder, Alisha Serras
• National Healthy Minds Study
  – Collaborators/co-authors: Jim Cranford, Marilyn Downs, Ezra Golberstein, Sarah Gollust, John Greden, Justin Hunt, Corey Keyes, Alisha Serras, Daphne Watkins, Kara Zivin
  – Study coordinators at 50 colleges and universities

Funders

• Pilot Healthy Minds Study
  – University of Michigan
    – Office of the Vice President of Research
    – School of Public Health
    – Dept of Health Management & Policy (McNerney Award)
    – Rackham Graduate School (two grants)
      – Blue Cross Blue Shield of Michigan Foundation
• National Healthy Minds Study
  – University of Michigan Comprehensive Depression Center
  – Participating colleges and universities
  – Virginia Department of Health (VDH)
  – Penn State Children, Youth, and Families Consortium

How can we invest most efficiently in the mental health of college students (What are the returns from potential interventions)?

Design and evaluate programs and interventions
Collect descriptive data

Broad Research Agenda
Key Features of Healthy Minds

- Sample
  - Random samples from full student populations
  - Methods to boost response rates and adjust carefully for differences among non-responders
  - Longitudinal design (comparisons over time)
- Topics
  - Focus on help-seeking and access to care
  - Also, broad range of factors related to mental health (e.g., stigma, social support, academic outcomes, substance use)
- Collaborative networks of schools

Healthy Minds Sample, 2007-2009
(26 campuses, 14,175 respondents)

Seven Key Findings from 2007-2009 Sample (in Seven Minutes!)

Finding #1: High Prevalence of Mental Health Problems, But also “Flourishing”

Finding #2: Fewer than Half of Students with Mental Health Problems Receive Treatment

Finding #1: Implications

- Affirms importance of more effective prevention and treatment of mental disorders in this population
- Also points to importance of promoting positive mental health (tapping into protective factors of students and campus settings)
**Finding #2: Implications**

- Affirms importance of programs and interventions to increase detection and linkage to treatment

**Finding #3: Substantial Variation Across Student Characteristics**

- Major Depression (%) by Demographic Group

**Finding #3 (cont’d): Substantial Variation Across Student Characteristics**

- Treatment in Past Yr (%) among those with a Mental Health Problem, by Demographic Group

**Finding #3: Implications**

- Supports the value of targeting and tailoring programs and interventions

**Finding #4: Several Apparent Risk and Protective Factors**

- Risk factors
  - Financial stress (both past and present)
  - Experiencing discrimination
- Protective factors
  - Social support
  - Living on campus
  - Religiosity

**Finding #4: Implications**

- Programs and interventions that address financial stresses and social context may improve mental health
- Relationship between campus residential setting and mental health warrants further study
Finding #5: Substantial Variation across Campuses (but not Types of Campuses)

- On the other hand, little apparent variation across groups of campuses defined by:
  - Public versus private
  - Enrollment size
  - Academic rank

Finding #5 (cont’d)

Finding #6: Stigma Is Important but Not the Only Important Barrier to Help-seeking

- If we could reduce the level of stigma by half, we project that treatment use among those with major depression would increase roughly from 44% to 60%
- Other factors that also appear to be important:
  - Beliefs in effectiveness of treatment
  - Lack of time
  - Belief that problem will get better on its own

Finding #6: Implications

- Affirms value of efforts to reduce stigma
- Also points to need to understand and address other factors more effectively
  - Many students have low stigma but do not seek treatment—mental health care simply does not make it to the top of their busy priority list

Finding #7: Mental Health Predicts Academic Outcomes

- Longitudinal analysis of Univ. Michigan students
- Depression associated with:
  - Drop in GPA distribution by 25 percentile points
  - Doubling of probability of drop-out
- Rough economic analysis of a hypothetical screening and referral program indicate that productivity benefits from improved academic outcomes would far outweigh costs of program
- Full manuscript at: http://www.bepress.com/bejeap/vol9/iss1/art40/
Finding #7: Implications
• “Business case” for mental health programs on college campuses looks good, but requires more definitive studies (ideally, a large randomized trial of a prevention and/or treatment program, with follow-up on academic outcomes)

Current Projects Building on Healthy Minds
• e-Bridge to Mental Health online intervention
  – PI: Cheryl King (University of Michigan)
  – Funder: NIMH (2009-2012)
• Peer effects in mental health among college students
  – PI: Daniel Eisenberg (University of Michigan)
  – Funder: W.T. Grant Foundation (2009-2011)
• Evaluation of Mental Health First Aid training for resident advisors (RAs)
  – Co-Pls: Nicole Speer (WICHE) and Daniel Eisenberg
  – Funder: NIMH (2009-2011)

Projects in Development
• Multi-campus study of the effects of residential settings on mental health and other outcomes
• Analysis of the role of procrastination in students’ help-seeking behavior
• National survey of law students on mental health and substance use

Future Iterations of Healthy Minds
• Plan to continue annually (next iteration will be February-April 2011)
• Aim to include more campuses that are typically underrepresented (e.g., community colleges, HBCUs, Tribal Colleges)
• Most measures will remain consistent over time, but some will change (we welcome ideas)
• More information at www.healthymindsstudy.net

3. Next Steps
(3 min)