

# Celebrating Champions

*Developing a Mental Health Champion  
Certificate Program*

Ashley Hartman, MPH, MCHES<sup>®</sup>, OCPC

# Learning Objectives

## Participants will have the opportunity to:

- Name two evidence-based mental health training options appropriate for the higher education setting.
- Develop one to three ideas to expand or enhance their current mental health training efforts on their campus.
- Identify one campus or community partner to collaborate with on their mental health training on campus.



Unclench your jaw.  
Lower your shoulders.  
We got this.



# Building a Comprehensive Approach

Designing an Approach that Meets Your Current Campus Needs and Capacity

Training can address:

- Identify and assist persons at risk
- Increase help-seeking
- Responding effectively to individuals in crisis
- Increase awareness of resources

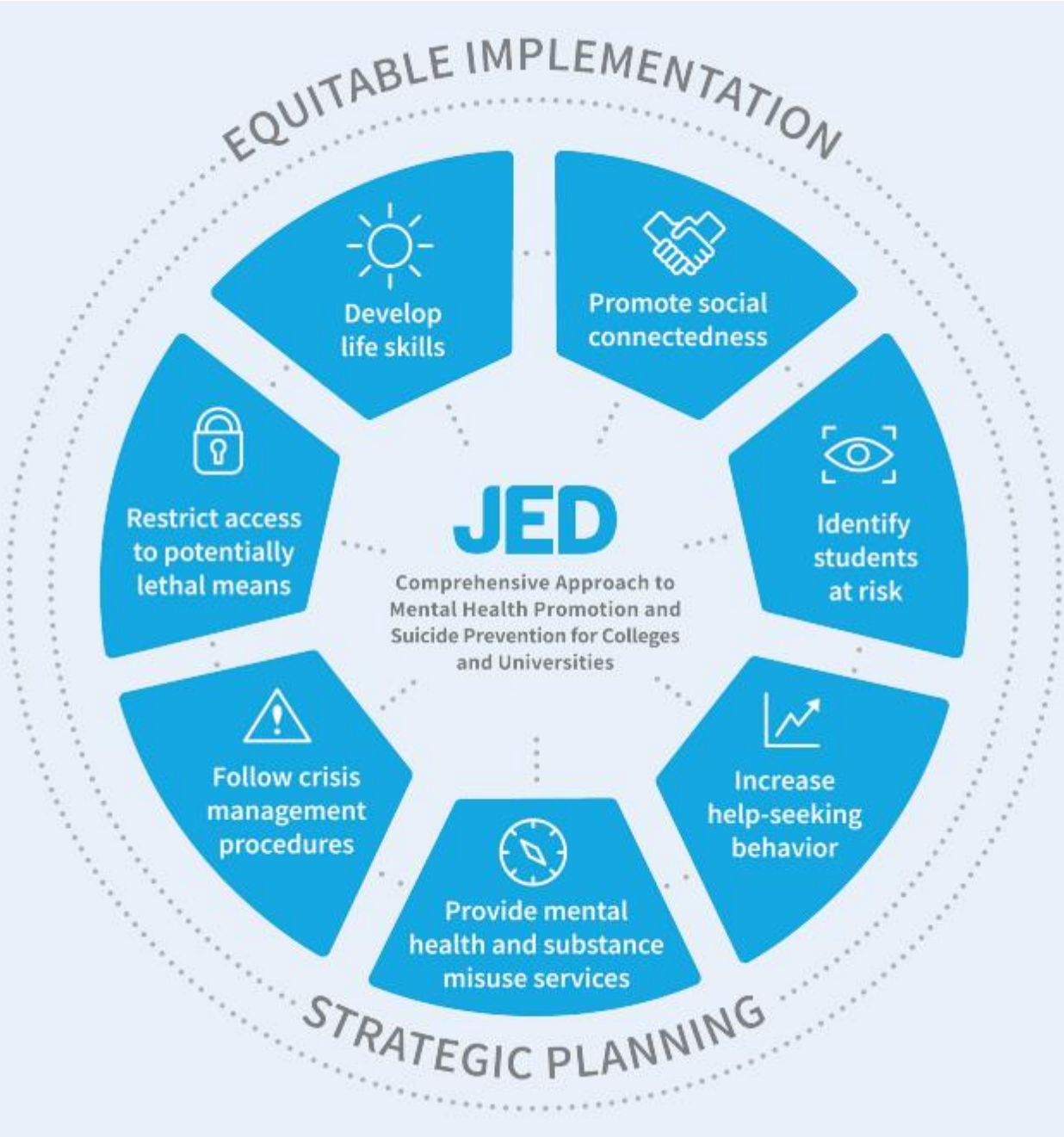
It can also:

- Enhancing life skills and resilience
- Promoting social connectedness and support



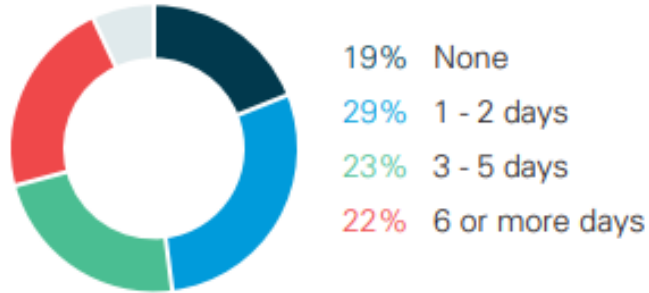
Source: <https://sprc.org/effective-prevention/comprehensive-approach>

Source: [https://jedfoundation.org/wp-content/uploads/2021/07/JED-Comprehensive-Approach\\_FINAL\\_July19.pdf](https://jedfoundation.org/wp-content/uploads/2021/07/JED-Comprehensive-Approach_FINAL_July19.pdf)



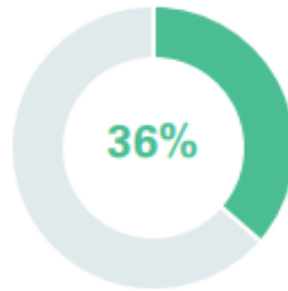
## ACADEMIC IMPAIRMENT

In the past 4 weeks, how many days have you felt that emotional or mental difficulties have hurt your academic performance?



## POSITIVE MENTAL HEALTH

Positive mental health



Positive mental health (psychological well-being) is measured using The Flourishing Scale, an eight-item summary measure of the respondent's self-perceived success in important areas such as relationships, self-esteem, purpose, and optimism (Diener, Wirtz, Tov, Kim-Prieto, Choi, Oishi, & Biswas-Diener, 2009). The score ranges from 8-56, and we are using 48 as the threshold for positive mental health.

Source: [https://healthymindsnetwork.org/wp-content/uploads/2025/04/2023-2024-HMS-National-Data-Report\\_041525.pdf](https://healthymindsnetwork.org/wp-content/uploads/2025/04/2023-2024-HMS-National-Data-Report_041525.pdf)

## Informal help-seeking

In the past 12 months have you received counseling or support for your mental or emotional health from any of the following sources?  
(Select all that apply)

|     |  |
|-----|--|
| 15% | Roommate                                       |
| 42% | Friend (who is not a roommate)                 |
| 32% | Significant other                              |
| 41% | Family member                                  |
| 4%  | Religious counselor or other religious contact |
| 2%  | Support group                                  |
| 6%  | Faculty member/professor                       |
| 3%  | Staff member                                   |
| 1%  | Other non-clinical source                      |
| 31% | None of the above                              |

### *Whom would you talk to about mental health problems affecting academic performance*

|                                |     |
|--------------------------------|-----|
| Professor from one of classes  | 33% |
| Academic advisor               | 28% |
| Another faculty member         | 6%  |
| Teaching assistant             | 2%  |
| Student services staff         | 11% |
| Dean of Students or Class Dean | 5%  |
| Other                          | 4%  |
| No one                         | 31% |

|  |     |
|--|-----|
| Personal stigma: agrees with "I would think less of someone who has received mental health treatment."                   | 6%  |
| Perceived public stigma: agrees with "Most people would think less of someone who has received mental health treatment." | 41% |

# Choosing a Training

## Suicide Prevention Gatekeep Training Options

Various evidence-based trainings are available

Choosing a Suicide Prevention Gatekeeper Training Program – A Comparison Table

Suicide Prevention Resource Center (last update May 2020)

- Mental Health First Aid
- Question, Persuade, Refer

### Considerations

- Audience (faculty, staff, students)
- Cost and what funding is available
- Length and format of training
- Evidence-based or home grown

Source: <https://sprc.org/online-library/choosing-suicide-prevention-gatekeeper-training-program-comparison-table/>

# Campus Mental Health

Every campus is unique. You know your campus best.

- What is the current need on your campus?  
What data (formal and informal) can inform your strategies?
- Where are their gaps in your current approach to campus mental health across the continuum of services, programs, and reporting processes?
- Campus mental health is a campus (community) wide challenge, with a campuswide solution.

## Partnerships

- Who are the main stakeholders in your work on and off campus?
  - Counseling and health services
  - Health and wellness
  - Local coalitions (suicide prevention)
  - Local mental health providers
- What current relationships exist?
- Which are missing? Why?

# Division of Community Well-Being

Unit led by a Chief Well-Being Officer to champion well-being across campus. This structure and commitment to wellness in the university strategic plan provides high level support.

Accessibility Services

Counseling Center

Falcon Health Center

Food, Financial, Housing and Basic Needs Assistance

Office of the Dean of Students

Office of Health and Wellness

Office of Recreation

Office of Title IX

Parent and Family Programs

Student Health Insurance

Student Legal Services

## **Initiative 11: Community well-being**

We will support our community by coordinating and enhancing systems and programs that focus on mental and physical health, accessibility and wellness.

# BGSU Community of Care

As a public university for the public good, BGSU prepares students to live a productive life by empowering them to design their own unique well-being experience through education, programs and services, and reporting and response systems.

- Alcohol and Substance Misuse
- Hazing Education and Prevention
- Mental and Physical Well-Being
- Sexual Misconduct/Title IX



**COMMUNITY**  
OF CARE

Website:

<https://www.bgsu.edu/bgsu-cares.html>

# Program Development

## Steps to Developing the Certificate Program

- Health Educator – Mental Health Focus position started Fall 2021.
- Before GLS grant, began offering QPR and MHFA trainings in partnership with NAMI Wood County.
- Identified a need to increase awareness among BGSU faculty, staff, and students about resources on and off campus.
- Worked with other campus partners that offered non-degree certificate programs.

## Funding and Capacity

- MHFA and QPR instructors on campus and in the community at NAMI Wood County.
- Obtained prevention capacity grant from Prevention Action Alliance to train additional QPR instructors at BGSU.
- Garrett Lee Smith Campus Suicide Prevention Grant provided funding to support the development of the certificate program.

# Program Structure

We leveraged our current capacity on and off campus to develop a program that blended evidence-based and home-grown training

- All trainings are open to BGSU faculty, staff, students and community members.
- Through the semester track the completion of the requirements among registrants. There is not a time limit to complete the certificate, as long as MHFA and QPR are still current.

## Certificate Components

- Mental Health First Aid
- Question, Persuade, Refer: Suicide Prevention Gatekeeper Training
- Campus Well-Being Resources Training
- Community Mental Health Resources Training
- Engage in one other program that related to the Community of Care pillars

# Celebration Event

Hosted a reception in the Spring semester to recognize certificate recipients.

Certificate recipients received a printed certificate and email badge.

Students co-planned the event with professional staff.

Also recognized students in other peer-led programs (PAWS, Wellness Ambassadors).

Co-sponsored by Wood County Suicide Prevention Coalition.

MHFA participants also received a cord for graduation.



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# Next Steps

## Success, Opportunities, and Challenges Moving Forward

Fall 2025 end of GLS grant provides opportunity to reflect broadly regarding mental health initiatives across campus.

Exploring new funding opportunities and internal infrastructure.

Positive response from faculty, staff and students, faculty less engaged.

SB1 and other external factors impacting gatekeeper training implementation (i.e. MHFA, data collection).

## Program Outcomes

- 74 people completed the certificate
- MHFA and QPR embedded in academic courses
- QPR embedded in RA training
- Increased availability of training for community members
- Developed pipeline for students leaders passionate about mental health to lead peer-led programming, i.e. NAMI on Campus

# Small Group Discussions

Break into groups and discuss current mental health training initiatives and collaborate with other attendees on ideas to expand or enhance your trainings efforts.

## Discussion Questions:

- What is working well? What challenges are you facing?
- What partners (intern/campus and external/community) could assist in your efforts?
- How can you ensure your efforts are sustainability and/or what fiscal or other resources are needed.
- Who is your key audience? Work as a group to brainstorm strategies to each difference audiences on campus.

## Training Considerations

- Audience (faculty, staff, students)
- Cost and what funding is available
- Length and format of training
- Evidence-based or home grown

# Importance of Campus Partnerships

Why should campus health and wellness professionals develop campus partnerships?

Utilize expertise across campus to ensure programs are comprehensive and inclusive.

- Partnered with NPHC chapters, and the Division of Inclusion and Belonging to host an event focused on men of color and mental health.

Leverage faculty expertise and research opportunities.

- Faculty research on YMHFA provided an opportunity to train more YMHFA instructors on and off campus.

Respond to the needs of the campus community.

- Developed a training on the student of concern process.

Mental health is a campuswide problem with a campuswide solution.

# Characteristics of Effective Partnerships

2-year multi-site case study of 5 colleges' campus-community partnerships

- Campus leader using community organizing emphasizing relationships, stakeholder engagement, and collaboration with higher level administrators
- Higher level administrator champion that networks with stakeholders, advocates for the visibility of the partnership and allocates resources (funding, staffing)
- Community leaders encouraging addressing the health and wellness concern.

## Impeding Factors

- Lack of higher-level administrator support
- Efforts not initiated by community leaders
- Wariness of community partnerships
- Competing priorities

(Zakocs et al., 2008)

# Importance of Community Partnerships

Why should campus health and wellness professionals develop community partnerships?

Strong services and resources in the community benefit faculty, staff, and students.

- The opening of a crisis stabilization unit in Wood County has greatly benefited BGSU students and provides a lower level of care within Bowling Green for mental health crises.

Campus and community partners bring different expertise, resources, and opportunities.

- The Wood County Suicide Prevention Coalition members are currently working to share data.
  - Parents opting out of suicide prevention education.
  - Healthy Minds Study data from BGSU.

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for the public good.

# Partners Matter

Recognize opportunities and build relationships that work in the moment and foster future opportunities.

Prepare for when opportunities end, i.e. end of grant.

Be positioned well to benefit from opportunities when they are available.



# Questions

Ashley Hartman

[ashthom@bgsu.edu](mailto:ashthom@bgsu.edu)

