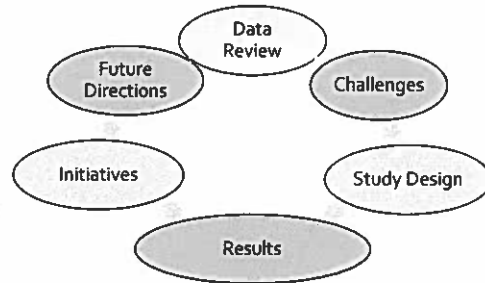


THE FINAL FRONTIER
PARENTS AS GATEKEEPERS

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PENN STATE ALTOONA

Topics



Penn State Altoona



- **Integrated care model**
 - **Health services**
 - **Counseling Services**
 - **Disability Services**
 - **Health Promotion**
- **4,000 undergraduates**
- **SAMHSA grant- 2009-2011**

Student Mental Health

Among College Students...

- 18% of undergraduates reported having seriously considered a suicide attempt at some point;
- 6% reported serious suicidal ideation in the past 12 months (Drum et al., 2009).
- 80% of students who die by suicide never received services at their campus counseling centers (Kisch, Leino, and Silverman, 2005).

Healthy Minds Study (Altoona, n=860), 2010

- **64% (2 out of 3)** of our students would first talk to their parents if they were experiencing emotional distress
- Of those who seek help, only **36%** do so with parental encouragement
- **51% (1 out of 2)** experienced academic difficulty due to MH symptoms in past 4 wks.

PARENT DATA

Literature Review

- Parents' attitudes toward therapy influence help seeking, engagement, retention, and outcome. They are based on perceptions related to benefits/risks. (Morrissey-Kane & Prinz, 1999 & Vogel et al., 2009)
- Parents are more willing to refer a friend's child to professional help than their own. (Raviv et al. 2009)
- 50% of parents believe that a student can "pull themselves together" if they have an MH problem. (Locke & Eichorn, 2008)

Literature Review

- Parents are less comfortable talking about mental health than about other health concerns. (Locke & Eichorn, 2008)
- There is still a high level of stigma around mental health. (Locke & Eichorn, 2008)
- Most parents believe professional help is useful for mental health issues, but most would refer to a general practitioner first. (Jorm et al., 2007)

Literature Review

- Parents' attitudes toward help seeking play a role in their students' intentions to seek psychological help; also the quality of the relationship is significant as to if the student adopts the parental attitudes (Vogel, et al., 2009)



Jed Foundation, American Psychiatric Foundation, Academy for Educational Development (2008)

N=1,007-parents/guardians of 16-20 yr. olds (38% parents of college students, 90% Caucasian)

- One third thought that others would avoid their student if MI was discovered.
- 20% believed MH problems should be handled privately; parents are less comfortable discussing suicidal thoughts than other health topics.

JED continued

- 64.5% (2 out of 3) related that they had not received any information on MH services from their school, 9% didn't know.
- Most parents (53.9%) would refer to a family doctor, 26.1% counselor, 21.3% clergy

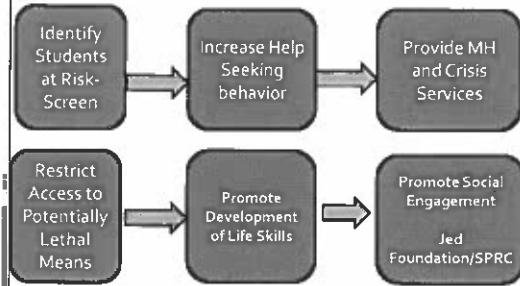
JED continued

- 80% are confident that they could identify a MH problem; although only 3.4% identified suicidal thoughts as a sign of depression, and only 15% were able to name more than one or two signs.
- Almost 2/3 do not think their children are likely to experience a MH problem in college- although they believe any person can develop a problem.

Limitations of Research

- Limited replicated studies on mental health and the parent population in higher education.
- Little is known about how parents want health information from their student's university
- Little data on the correlation between parental knowledge/ attitudes with intention to intervene and refer. Especially with cultural, geographic differences.

Best Practices- Public Health Approach

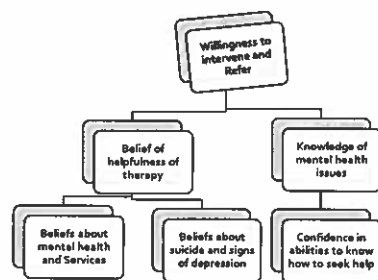
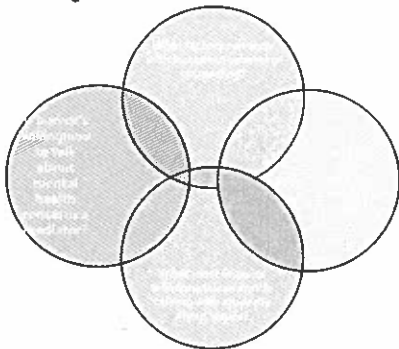


PARENTS AS GATEKEEPERS

Barriers To Help-Seeking Healthy Minds Study (n=860, 2010)

- 50% believe that most people think less of those with MH problems
 - 54% believe that most people see tx. as a sign of weakness
 - 51% believe that stress is normal
 - 45% do not perceive the need
 - 37% believe that problems will resolve themselves
- Hypothesis:
- Some of the same barriers to help-seeking identified with students will relate to parents as well. Parents hold great influence

Research Questions



Study Design

- Conduct a random sampling of parents from two distinctly different schools
- Look at geographic, ethnic and cultural differences-
 - A rural small liberal arts school- 4,000
 - An urban multi-culturally diverse school- 15,000

Study Design

- Sample size 300
- \$10 incentive- gift card, metro card
- Phone surveyors
- Structured training
- Statistical analysis – Descriptive statistics using linear regression, correlation and multivariate analysis

Potential Outcomes

- An understanding of the educational needs of parents
 - Perceived risks and benefits to intervening
 - Knowledge base regarding symptoms and referral options
- ⊙ Development of products which seek to decrease barriers to help-seeking

Demographics

- 75% of respondents were mothers
- 64.7% of respondents were ages 45-54
- 59% of respondents were White; 20% Black/African American; 21% Hispanic
- 27% of respondents live in rural areas; 43% urban, 28% suburban



Demographics

- Income: 25% 100,000 or more, 29% 50,000 to less than 100,000, 15.5% less than 20,000
- Education: 27.7% some college, 10% technical school, 33.7% college
- Diversity: 21% Hispanic, 20% black, 60% white, 1% Asian, 19% other
- Urban- 43%, suburban 28%, rural 27%
- 25% were not born in US

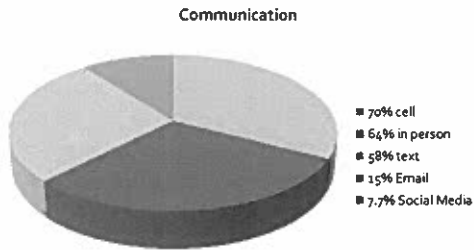
Communication Preferences

(Somewhat to very interested)

- Parent Web-site (75%)
- Parent Newsletter- mailed (79%); emailed 69%
- Web-based training (59%)
- Parent Training during orientation (79%)
- Video or CD accessed on-line or mailed (50%)



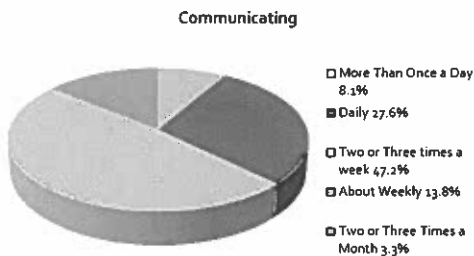
Communicating With Students



Frequency of Communication



Frequency of Communication- on/off campus only



More Frequent Communication

- Is Positively Related to:
 - Referral to Counseling and intervening
 - Comfort in talking about MH problems
 - Talking to their student about drugs, alcohol, eating disorders and suicidal ideation

Understanding Mental Health

- Parents report -Top three signs of depression
 - Withdrawn-18.5%
 - Change in weight-17.9%
 - Sleeping- too much-14%
 - Thoughts of suicide- 3.8%-second to the last (drop in grades-2.9%); non-whites more likely to list this.
- One out of ten are uncomfortable talking to their student about suicide

Understanding of mental health

- Over 50% of parents believe they know the signs of depression, substance abuse, anxiety, suicide. (cutting - urban)
- Less than 50% believe they know the signs related to eating disorders, bipolar disorder, cutting behaviors, schizophrenia
- 25% (1 out of 4) think it's unlikely or somewhat unlikely that their student will voluntarily tell them if they were experiencing MH symptoms.

Understanding

- 35% indicate that they know little about depression
- 49% believe that it is likely that the college would inform them if their student was having an MH problem
- 42% (2 out of 5) are not aware of one crisis hotline (2 out of 5)
- 20% (1 out of 5) do not feel confident that they know where to find info for help
- 32% (1 out of 3) were not aware of one campus resource

18% ARE UNLIKELY OR SOMEWHAT UNLIKELY TO REFER TO THE COUNSELING CENTER

Barriers-Beliefs (somewhat agree/agree)

- One out of ten would think less of a person who has received MHTX-(11%)
- One out of ten believe people with MH problems just need to "pull themselves together" (non-white pop. more likely to agree)

Barriers (Somewhat agree/agree)

- Services may not be confidential- 41%
- Records might impact future plans- 37%
- Providers may not be sensitive to cultural issues- 28%; Religious beliefs- 32%
- Lack of knowledge about services- 30%
- Prefer to handle things within the family- 29%

- 3 out of 5 believe that those who have received MH treatment are seen in a less favorable way- 61.3% (males are more likely to think this)
- 18% (1 out of 5) think that if you talk to someone about suicide they are more likely to do it.
- 19% (1 out of 5) think that those that talk about "it" just want attention.

Beliefs/Barriers continued

- 54% do not think that their attitudes about seeking counseling have an impact on their student
- 48% (2 out of 5) believe that receiving treatment for MH carries social stigma (Negative relationship with referral for counseling; males more likely)
- 23% would not accept a person who received treatment as a friend of my student

- One out of ten did not think it is likely that someone with depression would experience suicidal thoughts
- 32% (1 out of 3) believe that those that talk about "it" don't do it
- 30% do not think that those who use alcohol in a high risk manner are more at risk for suicide

Social Stigma

- 61% believe that people will see a person in a less favorable way if they know they received treatment; (slightly more than 3 out of 5)
- 85% believe that anyone could develop a mental health problem at any time

Students

- Stress is normal in college; (40%)
- Prefer to deal with issues on my own; (42%)
- How serious my needs are; (30%)
- Problem will get better by itself; (18%)
- Lack of insurance coverage

Parents

- Stress is normal in college (42%)
- Services may not be totally confidential (40%)
- There might be a record of services that may impact future plans (37%)
- Providers not sensitive to cultural needs (32%)

What Impacts Likelihood of Referral

- Significant impact:
 - Knowledge of mental health problems
 - Knowledge of symptoms of depression

Referral

- Family Doctor or Health Center- (3.7)- 93% (non-white, urban more likely)
- Counseling (3.3)- 82%; 1 out of 6 did not think counseling is helpful
- Talk to family/friends (3.2)-75%
- Clergy (3.02)- 72%
- Web-site (2.9)- 66%

- Ignore it- 19% (male, non-white, urban more likely)
- Talk them out of it- 75%; (3 out of 4)

Bottom Line

- Parents, guardians, significant others- matter
- Gatekeeper training is just as important with this population
- We need to find ways to:
 - Combat misperceptions and knowledge deficit
 - Communicate that we want them as partners
 - Develop strategies for them to have access to training and information

Parent DVD

- Contracted with a professional educational media company. info@academic-channel.com
- Created the content-themes
- Distributed the DVD to all parents fall 2011
- Completed a web-based evaluation spring 2012



Parent DVD Objectives

- Identify warning signs
- Learn how to approach/talk to your student
- Refer, seek services of a professional
- Themes:
 - Asking about suicide doesn't plant the seed
 - Treatment is effective
 - It is your responsibility to be aware as a parent
 - Psychological issues can happen to anyone

Parent DVD Follow-up Survey

- 78 Parents responded to the survey via an email invitation sent on the parent listserv.
- The survey was open for three weeks and two reminder emails were sent.

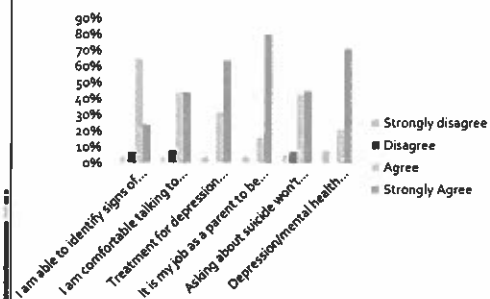


Results

- 86% of parents reported watching the DVD.
- 99% of the parents had freshman students.
- 83% of the parents that responded were female.
- 97% of parents rated the DVD as good, very good, or excellent.



Results: Please rate how much you agree or disagree with the following statements



Results

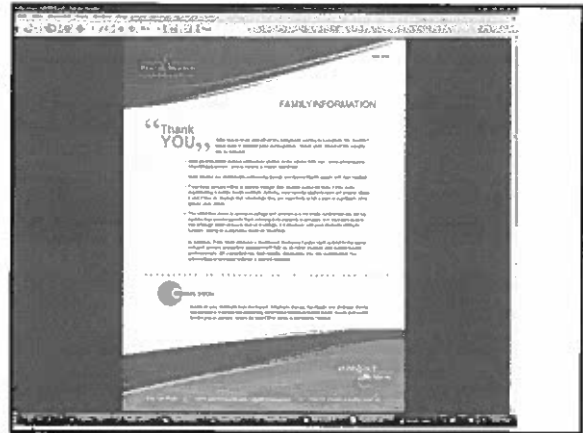
- 89% able to identify signs of suicide/distress
- 88% comfortable talking to my student
- 88% believe tx. for depression is valuable
- 92% believe MH issues can affect anyone
- 88% believe that asking about suicide will not give their student the idea
- 96% believe that it's their job to know what's going on with their student

Additional Parent Strategies

- Parent Web-site
www.altoona.psu.edu/stress
- Parent newsletters each semester- mailed to the home and on-line
- New Student Orientation, parent session
- Parent List-serve messages
- Anti-Stigma campaign



Parent Webpage



Parent Newsletter



Challenges

- Access- tap in to web-sites, processes that are in place (orientation)
- "Just in time" information
- Funding, man-power

Questions

