Abnormal Psychology

College Mental Health
Psychology 3303
Professor June Gruber
Roadmap

Course Logistics

College Mental Health

Guest Speaker

Take-Away Qs
Course Logistics

Outreach Project

- Submit on Canvas ONLY (no need to email)
- 2 things to upload on Canvas:

THING #1: Outreach Project Updated Written Proposal

THING #2: Outreach Project Evidence (e.g., copy of brochure, flyer, letter to newspaper editor, link to video, etc.)
Course Logistics

Office Hours

- Full today with appts. made in advance

- Email if have questions that need to be answered before next week’s class or office hours and I will be available to help :)
Course Logistics

Exam 3

- Review Sheet Posted on Canvas/Emailed by End of Day
- Next Thursday April 25
Learn about stress management, student resiliency at the Health and Wellness Summit

April 16, 2019

Don’t miss CU’s inaugural Health and Wellness Summit on April 25. Faculty, staff and students are invited to learn about a holistic approach to health and wellness, campus resources and support services. The summit will provide tangible skills to improve your own health, and share information and research.

Partners from other CU campuses will also present findings from each of their local campuses during the event.

The lunch keynote speaker will feature Alison Malmon, founder of the nonprofit organization Active Minds. Malmon defines herself as a sister first; when her big brother Brian died by suicide during her freshman year of college, she was devastated—and left with more questions than answers.

Turning tragedy into action, she started a group on her campus at the University of Pennsylvania to give students like herself the platform and tools to change the conversation about mental health.

Malmon shares her story to inspire others to speak out and be heard, to not suffer in silence and to help fight the stigma surrounding mental illness. She continues to inspire audiences with her story and calls to action.

The summit is free, and registration is now open. Attendees are able to choose from several different tracks:

Track I: Mental Health First Aid certification
This course provides instructions on how to identify, understand and respond to signs of mental illness and substance use disorders. At the end of the session, participants will receive a Mental Health First Aid certification. This is a full-day track, and spots are limited. If you are interested in becoming certified in mental health first aid, please register online prior to the event.

Track II: Supporting Student Resiliency certification
CU Boulder offers a Supporting Student Resiliency certification as part of its professional development series. Through these educational sessions, you will develop the following conversation skills and techniques to work with students on a range of topics:

If you go
Who: Open to CU faculty, staff and students
What: Inaugural Health and Wellness Summit
When: Thursday, April 25, 8 a.m. to 5 p.m.
Where: University Memorial Center

Register Now

The Science of Happiness

Learn about the science of happiness including myths and predictors. Review recent applications used on the CU Boulder campus.

Presenters:

- June Gruber, Assistant Professor - Psychology and Neuroscience
Leisha Conners-Bauer
Director of Health Promotion
University of Colorado Boulder

College Student Mental Health and Wellness
Roadmap

Course Logistics

College Mental Health

Guest Speaker

Take-Away Qs
Experience growth in identity and agency  
(Arnett, 2000; 2007)

Maturation in cognition and executive control  
(e.g., Andrews-Hanna et al., 2011; Casey, Jones & Somerville, 2011)

Increases in general well-being on average  
(e.g., Schulenberg & Zarrett, 2006)

Increase in rates of mood, anxiety and substance use  
(Auerbach et al., 2018; Kessler et al., 2007)

High prevalence of clinical disorders associated with impaired academic performance  
(Auerbach et al., 2016)
“When our mothers were our age, they were engaged .... They at least had some idea what they were going to do with their lives .... I, on the other hand, will have a dual degree in majors that are ambiguous at best and impractical at worst (English and political science), no ring on my finger and no idea who I am, much less what I want to do .... Under duress, I will admit that this is a pretty exciting time. Sometimes, when I look out across the wide expanse that is my future, I can see beyond the void. I realize that having nothing ahead to count on means I now have to count on myself; that having no direction means forging one of my own.” (Kristen, age 22)
Of college students have felt depressed

1 in 3
Students reported prolonged periods of depression

1 in 7
Students reported engaging in abnormally reckless behavior

50%
Of students rated their mental health below average or poor

1 in 4
Students reported having suicidal thoughts or feelings

Kadison & DiGeronimo (2004); www.nami.org
Underrepresented Students May Be at Highest Risk

Minority and international students (especially women) at increased risk for poor mental health during college

Perceived racial discrimination among Latinx students associated with increased suicidal ideation, anxiety, and depression

Stigma surrounding mental health disproportionately affects underrepresented students and interferes with treatment seeking
Doubt whether college is worth the time, money, and effort

36% with Depression 17% Without

Confident about finishing degree

80% with Depression 96% Without

Increased likelihood of dropping out

2:1

Healthy Minds Study (2015-2016) (Eisenberg, Golberstein, & Hunt, 2009)
Cascading Impact

Instructors

College Counseling Centers

University Community

Scholarly Community at Large

Kitzrow (2013), Woolston (2017)
September 13, 2018

One in Three College Freshmen Worldwide Reports Mental Health Disorder

Read the Journal Article

WASHINGTON — As if college were not difficult enough, more than one-third of first-year university students in eight industrialized countries around the globe report symptoms consistent with a diagnosable mental health disorder, according to research published by the American Psychological Association.

“The effective case is important, the number of students who need treatment for these disorders far exceeds the resources of most counseling centers, resulting in a substantial unmet need for mental health treatment among college students,” said lead author Randy P. Axenbarch, PhD, of Columbia University. “Considering that students are a key population for determining the economic success of a country, colleges must take a greater urgency in addressing the issue.”

Axenbarch and his co-authors analyzed data from the World Health Organization’s World Mental Health International College Student Initiative, in which enrolled 8,923 students from 18 colleges in eight countries: Australia, Belgium, Germany, Mexico, Northern Ireland, South Africa, Spain and the United States. Respondents to questionnaires evaluated common mental disorders, including major depression, generalized anxiety disorder and panic disorder.

The researchers found that 30 percent of the respondents reported symptoms consistent with at least one mental health disorder. In the United States, the prevalence of mental health disorders was found to be 38 percent among surveyed college students.
Student mental health a critical, growing issue

Regents hear why treatment must reach beyond clinics into every aspect of university life
### Why did students leave CU Boulder?

Among the various reasons students cited for leaving the university, the top three were "social/environmental reasons," "personal reasons," and "financial reasons" (see table below).

<table>
<thead>
<tr>
<th>How important were the following reasons for your leaving CU Boulder?</th>
<th>Not important</th>
<th>Of little importance</th>
<th>Somewhat important</th>
<th>Very important</th>
<th>Somewhat or Very Imp't</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial reasons (lack of financial aid, credit card debt, etc.)</td>
<td>34%</td>
<td>14%</td>
<td>24%</td>
<td>29%</td>
<td>52%</td>
</tr>
<tr>
<td>Inability to get courses desired or needed for my major or intended major</td>
<td>49%</td>
<td>23%</td>
<td>15%</td>
<td>13%</td>
<td>28%</td>
</tr>
<tr>
<td>Academic problems (workload was too heavy, poor grades, etc.)</td>
<td>45%</td>
<td>20%</td>
<td>17%</td>
<td>17%</td>
<td>35%</td>
</tr>
<tr>
<td>Inadequate academic support (not enough contact with faculty, inadequate advising, etc.)</td>
<td>46%</td>
<td>17%</td>
<td>22%</td>
<td>15%</td>
<td>37%</td>
</tr>
<tr>
<td>Employment (job transferred to another location, full-time job offer, etc.)</td>
<td>73%</td>
<td>10%</td>
<td>10%</td>
<td>7%</td>
<td>16%</td>
</tr>
<tr>
<td>Personal reasons (moved to follow spouse or partner, homesickness, family obligations, health issues, etc.)</td>
<td>31%</td>
<td>13%</td>
<td>23%</td>
<td>33%</td>
<td>56%</td>
</tr>
</tbody>
</table>

**Personal reasons for leaving:** Emotional health (53%)
EFFORTS ON CAMPUS TO ADDRESS COLLEGE MENTAL HEALTH

CU Buffs athletics, student group, working to make impact in mental health

Jalen Tompkins, Kennedy Leonard formed the Bolder Buffs Peer Advocacy Program

By Brian Howell
BuffZone.com Writer

#StopTheCrazyTalk aims to change words, attitudes

By Clay Evans | April 25, 2018

CU Boulder students create PSA to illuminate language that stigmatizes mental illness

Consider the following comments you wouldn’t be surprised to overhear in a coffee shop:

“She’s so bipolar! One day she’s happy, and the next she’s completely depressed.”

“Yeah, that guy is completely ahoi, totally unpredictable.”

“Man, I’m so OCD about what shoes to wear.”

Each one makes colloquial use of a word or shorthand phrase related to a mental-health diagnosis—bipolar disorder, schizophrenia, obsessive compulsive disorder. All are not just imprecise and misleading, but also have the potential to stigmatize people with mental illness.
Emotional Diversity
Emotional Diversity
Emotional Diversity

**EMODIVERSITY** = \[ \sum_{i=1}^{s} (p_i \times \ln p_i) \]

**Higher values = more diverse emotional experiences**

s = total number of emotions experienced (richness)
pi = proportion of S made up of the ith emotions

**STEPS TO CALCULATE EMODIVERSITY**

1. Divide number of times an individual experienced emotion #1 by the total number of times they experienced all types of emotions. This generates pi
2. Multiply this proportion by its natural log (pi x ln pi)
3. Repeat for all specific emotions assessed
4. Sum all the (pi x ln pi) products and multiply total by -1

**RICHNESS**

# specific emotions

**EVENNESS**

Extent to which emotions experienced in same proportion
### Greater Emodiversity Predicts Clinical & Physical Health Outcomes

<table>
<thead>
<tr>
<th></th>
<th><strong>CLINICAL HEALTH OUTCOMES</strong></th>
<th><strong>PHYSICAL HEALTH OUTCOMES</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STUDY 1</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(n = 35,844)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depression (MADRS)</td>
<td><strong>-0.27</strong>*</td>
<td>—</td>
</tr>
<tr>
<td># Visits to Family Doctor</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td># Days Spent in Hospital (past year)</td>
<td>—</td>
<td><strong>-0.13</strong>*</td>
</tr>
<tr>
<td><strong>STUDY 2</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(n = 1,310)</td>
<td></td>
<td></td>
</tr>
<tr>
<td># Visits to Family Doctor</td>
<td>—</td>
<td><strong>-0.29</strong>*</td>
</tr>
<tr>
<td># Days Spent in Hospital (past year)</td>
<td>—</td>
<td><strong>-0.13</strong>*</td>
</tr>
</tbody>
</table>

Quoidbach, Mikolajczak, Gruber, et al. (2018); Quoidbach, Gruber et al. (2014)
## Greater Emodiversity Predicts Clinical & Physical Health Outcomes

<table>
<thead>
<tr>
<th></th>
<th>Clinical Health Outcomes (Study 1)</th>
<th>n = 35,844</th>
<th>Physical Health Outcomes (Study 2)</th>
<th>n = 1,310</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mania (MDQ–M)</td>
<td>-0.11*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depression (MADRS)</td>
<td>-0.27*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># Visits to Family Doctor</td>
<td></td>
<td></td>
<td></td>
<td>-0.29**</td>
</tr>
<tr>
<td># Days Spent in Hospital</td>
<td></td>
<td></td>
<td></td>
<td>-0.13*</td>
</tr>
</tbody>
</table>
Alertness
Contentment
Hope
Anger
Fear
Amusement
Joy
Love
Sadness
Disgust
Awe
Gratitude
Pride
Embarrassment
Guilt
Anxiety

Low Emodiversity
High Emodiversity

Quoidbach, Mikołajczak, Gruber, et al. (2018); Quoidbach, Gruber et al. (2014)
Emotion-Related Impulsivity
Emotion-Related Impulsivity

**Impulsivity** involves behavior that is “poorly conceived, prematurely expressed, unduly risky, or inappropriate to the situation and that often result in undesirable consequences” (Daruna & Barnes, 1993)

**Emotion-related impulsivity** tendency to engage in impulsive behavior in the presence of emotion states (Carver et al, 2013; Cyders & Smith, 2008; Cyders et al., 2007; Lynam et al., 2007; 2011)

**Increased drinking problems** and consumption during 1st year college (Cyders et al., 2009)

**Increased risky sexual behavior** and illegal drug use (Zapolsky et al, 2009)

**Mood symptoms**, including mania tendencies (Carver et al., 2013; Giovanelli, Hoerger, Gruber & Johnson, 2003)

**Positive Emotion-related Impulsivity (PEI)**
EMERGE Project
About the Project:

The EMERGE project addresses a critical and growing nation-wide concern regarding the mental health and well-being of college students. Recent research suggests an alarming increase in the rate of mental health challenges, substance use problems, and behavioral difficulties among college-aged adults. The World Health Organization reports that 1 out of 5 college students meet criteria for psychiatric problems and the National Survey from the Association for University and Counseling Center Directors surveys indicate that up to 44% of college students report seeking help for adjustment issues. There is hence a critical need to prioritize research that helps better understand adjustment difficulties during college and translate this information to enhance student well-being and success. The EMERGE project aims to examine multiple aspects of emotional health, decision-making, and academic performance in CU students over the first year of college. In partnership with the Office of Undergraduate Education, the University Exploration and Advising Center, the Center for STEM Learning, and the Office of Data Analytics at CU Boulder we aim to study the incoming Freshmen CU cohort and follow them over the first year of college. We aim to use a diverse approach that incorporates survey measures, laboratory tasks assessing emotional functioning and decision-making, and mobile smartphone-based experience-sampling methods that capture experiences in the daily lives of college students. We will make special efforts to sample and enhance representation of diverse and/or underrepresented students on campus as well. This will help us make much-needed steps to bridge findings with real-world educational performance and functioning outcomes critical to success among college students during the transition to college. We strive to translate these findings back to college students themselves and university administrators; we aim to disseminate workshops and courses geared towards college-student well-being, and engage discussions with the university community to support and expand campus policies that enhance the potential for success and thriving among CU's students.

www.gruberpeplab.com/emerge-project
### TARGET PARTICIPANTS

#### Fall 2017 (N = 6,570)

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender (% female)</strong></td>
<td>46.7%</td>
</tr>
<tr>
<td><strong>Ethnicity (%)</strong></td>
<td></td>
</tr>
<tr>
<td>Caucasian</td>
<td>68%</td>
</tr>
<tr>
<td>Asian-American</td>
<td>8.5%</td>
</tr>
<tr>
<td>African-American</td>
<td>2.7%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>13%</td>
</tr>
<tr>
<td>American Indian</td>
<td>1.7%</td>
</tr>
<tr>
<td>Pacific Islander</td>
<td>0.7%</td>
</tr>
<tr>
<td>Other</td>
<td>5.4%</td>
</tr>
<tr>
<td><strong>In-State Resident</strong></td>
<td>51.5%</td>
</tr>
<tr>
<td><strong>SAT total (M)</strong></td>
<td>1244</td>
</tr>
<tr>
<td><strong>Cumulative High School GPA (M)</strong></td>
<td>3.66</td>
</tr>
<tr>
<td><strong>Retention to 2nd Year (%)</strong></td>
<td>-</td>
</tr>
</tbody>
</table>

See: [www.colorado.edu/census](http://www.colorado.edu/census)
Individual Differences Approach: Mapping Heterogeneity in Trajectories during Transition to College

- Chronic (5-30%)
- Delayed (0-15%)
- Resilient (35-55%)
- Recovery (15-25%)
Faculty

College Counseling Centers

University

Scientific Community
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Director of Health Promotion
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