2019-2020 Survey to Assess Behavioral Health Programs, Services, and Awareness among Washington State Postsecondary Institutions

In 2018, the Washington Legislature passed Senate Bill 6514 (S.B. 6514) resulting in RCW 28B.20.510, 28B.20.515 and 28B.20.520, on behavioral health and suicide among postsecondary students including data collection on the prevalence of suicidal behavior and related metrics in postsecondary institutions in Washington.

The overall goal of this data-gathering effort is to assess rates of suicide and suicide attempts, and the assets and needs regarding behavioral health and suicide prevention services, programs, and awareness at postsecondary institutions in Washington.

Behavioral health encompasses mental health, substance use, and suicide prevention efforts. Suicidal behavior refers to non-fatal suicidal thoughts and actions that include suicide ideation (thoughts about engaging in behavior to end one's life), suicide plan (creation of a specific plan to end one's life), suicide attempt (potentially self-injurious action with the intention of ending one's life), and suicide (deliberately ending one's life).

In the 2018-2019 academic year, 85 institutions responded to the baseline survey.

These data will inform future policy work at the state level. In 2018, the state made $420,000 available for grants to help postsecondary institutions meet their behavioral health needs. Future funding depends on our collective action to demonstrate need and progress through data collection, strategic planning, and comprehensive programming.

This document is intended to introduce you to the 2019-20 survey. Please plan to complete this and future surveys in the next three years, even if your campus did not participate in the first iteration.

How will these data help students at my institution?
These data will help inform state investment and support for student behavioral health and suicide prevention in postsecondary education. In addition, this work will provide institutions feedback about support for students that exists at their institution and at similar institutions around the state. Finally, the data will help inform the development and management of a publicly available resource designed to improve behavioral health among postsecondary students.

How will these data be used and shared?
This project will result in an annual report to the Legislature each year from 2019-2022. All institutional data reported in this survey will remain confidential. Data will be aggregated (e.g., by total responses, by type of postsecondary institution). Although a list of participating institutions will appear in the report, names of individual reporters will not appear, nor will any data be reported in connection with individual institutions. Participating institutions will be provided with their own report and a report of aggregate data. These data will also be used to identify and share promising practices to improve student behavioral health across the state.

We suggest that the Senior Student Affairs Officers, the Director of Student Affairs/Services, or person in the equivalent position complete this survey. However, we expect that this effort will require gathering

data from several institutional departments that may include the Registrar, Health and/or Counseling Services, Veteran and Military Resource Office, Residence Life, Facilities, Security, and others.

For the 2019-2020 academic year, please report on the period between July 1, 2019 and June 30, 2020. (You will receive a link to the digital survey by March 31, 2020.)

Please complete and submit this assessment by July 31, 2020.

Institution Characteristics

[Unless otherwise indicated, the following questions will be asked of all institutions to meet the requirements of RCW 28B.20.515.]

Respondent Name:
Respondent Job Title:
Respondent email:
Respondent phone number:
Name of institution(s) represented:
Address of institution(s) represented:

Student Enrollment (based on headcount, not FTE)

Please answer the following questions regarding student enrollment:

What was your institutional total student enrollment (full-time & part-time head count) for the 2019-2020 academic year?   Enter #_____
What was the total full-time student enrollment in 2019-2020? Enter #____
Does your institution offer graduate programs?
How many UNDERGRADUATE students were enrolled in 2019-2020?
How many GRADUATE students were enrolled in 2019-2020?
If your institution does not differentiate types of students, please respond to the undergraduate question above. Please do this for all ensuing similar questions.

Veterans

To your knowledge, based on headcount, how many students at your institution enrolled in the 2019-2020 school year are currently serving in the U.S. Armed Services? Enter #_____
To your knowledge, how many students at your institution enrolled in the 2019-2020 school year have previously served in the U.S. Armed Services? Enter #_____
Please use this space to provide any comments or explanation you think may be important for understanding the data you have provided in this section. _____

1. **Education, training, and support programs or services:**
    The goal of this section is to assess the availability and nature of institution programs and services that address determinants of behavioral health. These data will help inform the distribution of resources and programs to bolster behavioral health among postsecondary students.

    Note: Questions throughout this survey will reference 'behavioral health.' According to the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA), "*the term 'behavioral health' refers to both mental health and substance use and recognizes how the two are interrelated. Behavioral health problems include the misuse of alcohol or drugs, mental and substance use disorders, and suicide. Mental and substance use disorders include conditions such as schizophrenia, bipolar disorder, depression, anxiety, and addiction to alcohol or prescription drugs*."

    2.3a) Do training programs exist at your institution to educate students, faculty or staff to (Check all that apply.)
    - ☐ Identify, reach out to, or refer students who may be struggling with mental health
    - ☐ Identify, reach out to, or refer students who may be struggling with substance use disorder

☐ Identify, reach out to, or refer students who may be struggling with suicidal behaviors
☐ No training programs exist to train students, faculty, or staff regarding recognition and referral related to mental health, substance use disorder, or suicidal behaviors.

2.3b) If no, skip to 2.5. If yes to any of the above in 2.3a, these programs
☐ Have been implemented
☐ Are planned for future implementation

2.3d) If yes, which groups received training in the 2019-2020 academic year (in 2.3a),?
☐ Faculty
☐ Students
☐ Academic advisors
☐ Senior administrators
☐ Health services and/or counseling staff
☐ Athletic department staff
☐ Residence life staff
☐ Institution safety and security
☐ Other institution staff, please specify_

2.3e) If yes, which groups do you anticipate receiving training in the 2020-2021 academic year (in 2.3a),?
☐ Faculty
☐ Students
☐ Academic advisors
☐ Senior administrators
☐ Health services and/or counseling staff
☐ Athletic department staff
☐ Residence life staff
☐ Institution safety and security
☐ Other institution staff, please specify_

2.4) [for institutions without behavioral health services]: At some institutions, addressing students' behavioral health is the responsibility of faculty members, who may or may not be compensated for or trained in this work. At other institutions, there may be a person with several other responsibilities who also addresses students' behavioral health. Some institutions offer behavioral health care on campus, while others may have a referral process. Please describe how student behavioral health is addressed at your institution. In your response, please describe who typically manages student behavioral health; what type of care if any is offered on campus; and if a referral process to community health providers exists what is the process. If no processes are in place to address student behavioral health, please state as such. _____

2.5) Peer education is a program in which students are provided formal training to offer outreach and prevention work regarding behavioral health or other issues. In most cases, peer educators receive ongoing supervision. At some institutions, peer educators may have other names, such as "peer allies" or "peer counselors" or "peer mentors" or "student health educators." Does your institution have a program that offers this type of experience to students? ☐ Yes ☐ No

2.6) In the past academic year, has this institution undertaken efforts to: Check all that apply.
☐ Inform students about institutional resources for mental health support
☐ Inform students about institutional resources for substance use education and treatment
☐ Inform faculty and staff about institutional resources for mental health support

- ☐ Inform faculty and staff about institutional resources for substance use education and treatment
- ☐ Destigmatize mental illness
- ☐ Encourage help seeking behavior
- ☐ Connect students who may be struggling with mental health, substance abuse, or suicidal behaviors to other students who can offer social support
- ☐ This type of programing is not offered at this institution.

2.9) What available resources, if any, are designed for the needs of student Veterans? _____

2.10) What additional approaches, if any, are used at your institution to build awareness of behavioral health and/or suicide prevention resources available within or outside the institution? _____

2. Behavioral health services and surveillance
The goal of this section is to determine what services exist for students, both at the institution and in the community, and if/how student behavioral health needs are addressed.

3.2) [*only for institutions with behavioral health services*] Does your institution promote information on institutional behavioral health resources to students who self-identify with mental health or substance use histories? ☐ Yes ☐ No

3.3) Does your institution promote information on community behavioral health resources to students who indicate a desire/need for behavioral health services? ☐ Yes ☐ No

3.5c) How many students accessed behavioral health counseling services at your institution between June 30, 2019 and July 1, 2020? Enter # _____

Institution behavioral health services providers

[*only for institutions with behavioral health services*] How many staff or faculty at your institution are employed to address behavioral health among students? For the following questions 3.8a) 3.8b), 3.9), 3.9a) and 3.10) include only staff or faculty with the designations below who are qualified behavioral health professionals (i.e., mental health providers by training and/or license) who provide behavioral health counseling. For example, an academic counselor or personal counselor who does not provide behavioral health services should not be included.

	Total FTE
3.8a) Licensed behavioral health providers (e.g., psychologists, psychiatrists, social workers, licensed mental health counselors)	
3.8b) Unlicensed behavioral health staff (e.g., degreed provider without license)	

3.9) Do any of these staff or faculty refer students to behavioral health services outside the institution? ☐ Yes ☐ No

3.9a) If yes, how many students were referred by the professional staff (note above) to mental health and/or behavioral health resources off-campus between July 1, 2019 and June 30, 2020? Do not include those students referred by others (e.g., residence life staff, academic counselors or personal counselors who do not provide professional behavioral health services). Enter #___

3.10) Among staff and faculty employed to address behavioral health among students, do any have a specific role to focus on any of the following at-risk student groups? (e.g., Veterans services)

- ☐ Veterans
- ☐ LGBTQIA+
- ☐ American Indians/Alaska Natives
- ☐ Student athletes
- ☐ Students of color

- ☐ Survivors of sexual assault
- ☐ Dual Enrolled (Running Start)
- ☐ Youth Re-engagement
- ☐ None of these
- ☐ Other, please specify: _____

Medical leave of absence and student withdrawal

3.12a) Does a medical leave of absence or medical withdrawal policy for students exist at your institution? ☐ Yes ☐ No

3.12b) If yes, to 3.12a, does a protocol exist for communicating with family regarding the student's leave or withdrawal and return? ☐ Yes ☐ No

3.13a) To the best of your knowledge, how many students withdrew from courses (including those who took a medical leave of absence) for a behavioral health (e.g., emotional distress, mental health, substance use disorder) reason between July 1, 2019 and June 30, 2020? Behavioral health/emotional distress need not be the primary reason for leave of absence.
  If you do not collect these data, please estimate the number of students who withdrew from courses or took a medical leave of absence for a behavioral health (or emotional distress) reason between July 1, 2019 and June 30, 2020. Enter #: ___

3.13b) The above number is an estimate. ☐ Yes ☐ No

Suicidal behaviors among students

In response to the following questions, please provide data for the time period between July 1, 2019 and June 30, 2020 to the best of your knowledge.

Active student is defined as a student who was *enrolled at any point in the quarter/semester of death/incident, even if withdrawn prior to death or incident; whose death/incident occurred between quarters/semesters or holidays/summer break, but was enrolled for subsequent quarter/semester.*

Please do not include students who were on a leave of absence; had already graduated; or who died between quarters/semesters and were not enrolled for subsequent quarter/semester. Questions that include "to the best of your knowledge," relies on your knowledge, rather than specifically on medical records which may be unavailable.

3.15) To the best of your knowledge, how many student suicide deaths occurred between July 1, 2019 and June 30, 2020? Enter #: _____

3.16) To the best of your knowledge, how many suicide attempts among active students resulted in hospitalization between July 1, 2019 and June 30, 2020? Enter #: _____

3.20) Do resources outside of behavioral health services (e.g., unique programming, staff trained in working with group disproportionately burdened with suicide, support groups, etc.) exist at your institution to address unique mental health needs, substance abuse prevention, or suicide prevention among the following student groups? Please check all that apply.

- ☐ Veterans
- ☐ LGBTQIA+
- ☐ American Indians/Alaska Natives
- ☐ Students of color

- ☐ Student athletes
- ☐ Survivors of sexual assault
- ☐ None of these

3. Emergency Planning and Management for Behavioral Health
The purpose of this section is to determine what emergency planning exists at institutions to prevent, address, or manage behavioral health crises, including suicide and suicide attempts.

4.2a) Does your institution have a written emergency plan that includes a protocol to address behavioral health crises? ☐ Yes ☐ No

4.2b) If no to 4.2a, skip to 4.3a. If yes to 4.2a, does the plan include a protocol to for student re-entry after a behavioral health crisis? ☐ Yes ☐ No

4.2c) If yes to 4.2a, which offices across the institution are responsible for developing and maintaining the emergency plan? Check all that apply.

- ☐ Health and/or counseling center
- ☐ President's office
- ☐ Academic affairs instruction
- ☐ Student affairs/student services
- ☐ Dean of Students
- ☐ Residence Life
- ☐ Multicultural Affairs
- ☐ International Student

- ☐ Career Counseling
- ☐ Disabilities/accessibility services
- ☐ Legal Affairs
- ☐ Institution Security
- ☐ Registrar
- ☐ Dual Enrolled (Running Start)
- ☐ Youth Re-engagement
- ☐ Other, please specify: _____
- ☐ None of these

4.2d) If yes to 4.2a, what is the job title of the person named to enact the emergency plan?

4.3a) Does your institution have a protocol to address student death including suicide?

☐ Yes ☐ No *If yes, continue to 4.3b and 4.3c. If no, skip to 4.4)*

4.3b) If yes to 4.3a, does the plan address:
- ☐ Notification to parents or families
- ☐ Notification to institutional offices (e.g., president's office, academic affairs, student affairs/services)
- ☐ Information on intervention for secondary trauma
- ☐ Postvention if student suicide death has occurred

4.11) What resources, training, or programming would help your institution better address student mental health, substance use, and suicidal behaviors?

4.12) From your perspective, since April 2019, what major changes have occurred in your institution's approach to behavioral health and suicide prevention? If none, please state this.

Thank you for taking time to complete this survey in accordance with the requirements of RCW 28B.20.515. Your effort will help lead to improved well-being and fewer suicides in Washington State.