Student Affairs and Enrollment Management (SAEM) at The University of Arizona strives to deliver exemplary programs, services, and resources that are measurable, have a positive impact on students, and contribute to the wellbeing of our community. Student Assistance in the Dean of Students Office (DOS) is a strong example of the SAEM mission and is a vital resource that helps students minimize the impact unforeseen challenges have on their success at the UA. Student Assistance helps students manage crises, life traumas, and other barriers that can negatively impact their success. The staff works to address the needs of students who are challenged in such areas as psychological health, physical health, victimization, relationship issues, social adjustment, and academics through a variety of interventions, referrals, and follow up services that encourage their individual wellbeing and build a stronger UA community.

Due to the support and funding awarded by the Student Services Fee in fiscal year 2019, DOS has hired a full time licensed Mental Health/Care Coordinator as an addition to our Student Assistance staff. Housed in the Nugent building, this position allows for direct and timely clinical intervention and support for students facing an imminent mental health concern. This position has been in place for one semester supporting both DOS administrative referrals and serving as a CAPS staff member, remedying the wait time students previously experienced, offering immediate mental health support at no cost to the student. This proposal seeks continued Student Services Fee financial support to fund the DOS partnership with Counseling and Psych Services (CAPS) in providing a clinical Mental Health/Care Coordinator and the personnel cost for 1.5 FTE for two Student Assistance Coordinators and the triage support of an Assistant Dean of Students.

Historically, DOS has continued to grow Student Assistance over the past 8 years; the more we offer, the more referrals we receive. Student Assistance is available for any host of concerns and every year students continue to step into our office with more complex concerns. The demand is present and we continue to stretch and grow to meet the demand. Within the DOS, triage hours are being offered 38 of the 49 hours DOS is open each week. To make this possible, our DOS partners in Student Accountability and Title IX have joined forces so that we have 5 full time, 1 part-time, and 4 graduate assistants working to identify the urgency of referrals and concerns in real time to minimize the impact of critical incidents and offer timely resource connectivity. Additionally, our student front desk staff assist with our walk-in and phone call triage to expedite our ability to connect students with our graduate assistants and professional staff.

During the fall 2018 semester, the Mental Health/Care Coordinator was successfully hired and trained with a steady caseload seeing 107 students on their first visit to the DOS/Nugent building at no cost to the student and within days of the initial concern. In addition to the financial savings, this allowed the Student Assistance team to eliminate the need to serve as the bridge to CAPS services until a scheduled appointment that might be weeks after their initial mental health concern.1

Our clinician is carrying the majority of our Behavioral Intervention caseload which includes mental health, mental health hospitalization and suicide ideation or gestures. As a CAPS staff member, our clinician is able to communicate with CAPS triage and connect the dots if a student already has a provider or is in need of additional resources through CAPS clinical care team; eliminating redundancy and back and forth between DOS and CAPS, and saving students both time and money.

The timing of the addition of this staff member was ideal. While Student Assistance saw an overall 23% increase in caseload during the fall of 2018 (in comparison to fall 2017) there was a 43% increase in concerns related to mental health, mental health hospitalization and suicide ideation/gestures seen by Student Assistance during this same time period. Fortunately, with our own clinician on site, DOS clinical appointments with students were set, on average, 3 days from the date of the incident of concern. This has turned around to appointment time has reduced the average wait time by roughly two weeks in comparison to the 2017-2018 academic year.

From a Behavioral Intervention perspective, this swift intervention is the ideal scenario for how best to engage students with the vital resources they need when the student is most at risk. This has only been possible with the support of the Student Services Fee.

Through the years, Student Assistance has built support systems to meet the needs of our students and we have demonstrated an ability to get students in quickly when it matters most. The addition of the MH Care Coordinator position has minimized students’ hesitation to engage with MH resources in small part due to swift scheduling and ease of access to the Nugent building between classes. While this may seem an oversimplification, students can feel easily overwhelmed when they are in crisis. We are acutely aware of this due to our day to day interactions with students in varying levels of crisis. Our ability to be nimble and swift are critical in getting students the help they need when they need it. Mental health and overall wellbeing are cornerstones to student success.

Through the generous support of the Student Services Fee, Student Assistance has been present on the UA campus since 2010, serving a critical role for our students. In the inception of Student Assistance, the Dean of Students Office envisioned offering support to students beyond the classroom including assistance in navigating university systems, supporting students experiencing difficulty in transitioning to a large campus, being away from home for the first time, or adjusting to the academic rigor.

We have had many opportunities to work with students on these elements of their experience, however, twenty two percent (22%) of our total caseload since 2010 is related to mental health, mental health hospitalization, or suicide ideation or gestures.

Between July 1 and December 11, 2018, Student Assistance supported 740 students; a 23% increase in number from fall of 2017. These students were seen for a variety of concerns with the most common concerns or reason for referral being wellness check (15%),

mental health (14%), suicide ideation/gestures (14%), sexual misconduct (9%), and hospitalization (8%). Each week the Behavioral Intervention Team meets to discuss cases and create intervention plans that address student safety and what is needed to help the student. All students who present with these elevated concerns are referred to our Mental Health/Care Coordinator for assessment of potential harm to self.

In the fall of 2018 alone, there has been a 66% increase in suicide ideation or gestures in comparison to fall 2017. Both individuals and institutions struggle to find and provide adequate resources to address students’ needs. The onsite Mental Health/Care Coordinator has proven effective and critical to providing timely mental health support to UA students.

DOS is committed to being a central support for all student needs. Through Student Assistance, DOS is able to do effective outreach and respond to referrals related to concern for students. Our interventions have proved successful for our students and demonstrate that we have many students experiencing difficulty and in need of resources. The Student Assistance and Mental Health/Care Coordinator positions supported by the Student Services Fee allow DOS to minimize the time between our initial triage of a critical incident and connecting the student to the resources and support needed for their continued success. The Mental Health/Care Coordinator position eliminates the need for DOS to take up large portions of the Counseling and Psych Services (CAPS) scheduling and leaves room for us to continue to meet the increasing demands for support.

Since 2010, Student Assistance has offered support to over 10,663 students. Our caseload has steadily increased throughout the past eight years with roughly twelve hundred cases each academic year. At the current rate, however, 2018-19 will likely have a significant increase in overall cases and, the rise in critical cases, in fall alone, is proving to be most significant. These cases rise to the level of the Behavioral Intervention Team (BIT) and were, on average, involving 4.3 UA staff members supporting the student through the intervention from first interaction to case closure. With a mental health clinician on site, we are now able to have the meeting with the clinician be the first priority for the high risk students and then any necessary follow up with resources or support are deployed through the Student Assistance staff. This allows us the timely outreach we sought with this proposal for our high risk students and has allowed the assistance staff to manage the increase in less critical caseload.

We are grateful for the many years of support from the Student Services Fee and hope that the Student Services Fee Board will continue to offer financial support for the indispensable Student Assistance and Mental Health/Care Coordinator staff in the Dean of Students Office so that we may continue to meet the increasing needs of our students when they face barriers to their success.

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1. "The mental and emotional health of students has been of increasing concern to colleges in recent years, even as many institutions struggle to find the resources to better address those concerns. Access to services remains a serious worry of many counseling center directors, according to a survey released last year by the Association for University and College Counseling Center Directors. Many directors in the survey noted that a shortage of counselors means they must use triage systems and put some students on waiting lists before they can receive treatment. At colleges with enrollments of 1,501 to 2,500 students, directors reported an average of eight weeks per year in which waiting lists were used. At colleges with enrollments of 25,001 to 30,000, waiting lists were used an average of 23 weeks a year. At colleges with enrollments greater than 15,000, the average number of students on waiting lists exceeded 50, and the average was as high as 70 for institutions with enrollments of 30,001 to 35,000 (New, 2017)."