

**Title III 5- Year Proposal**  
Covering October 1, 2017 – September 30, 2022

**Project Director:** *George Thomas*

<b>1. Name of Institution:</b> <i>Albany State University</i>	<b>2. Activity Title:</b> <i>We Are One-ASU</i>  <b>3. Activity Number:</b> <i>To be completed by the Office of Title III</i>
<b>4. Focus Area:</b> <i>Academic quality and Student Outcomes</i>	<b>5. LAA Category:</b> <i>Tutoring, counseling, and student service programs designed to improve academic success</i>

**Budget Request Amount:** **\$ \$108, 637/ year**

**6. Narrative**

**A. INTRODUCTION**

*Enter Narrative (Included intended purpose, serving population, demonstration of need and general expected outcome)*

Mental health needs of students in colleges and universities are a very important topic of interest for researchers, college administrators and policy makers. This is because mental health is highly correlated with retention and other student outcomes such as graduation, substance abuse, suicide and other problem behaviors. Research shows that on US college campuses, mental health problems are highly prevalent, appear to be increasing, and are often untreated (Lipson et al., 2015; Hunt and Eisenberg, 2010). A study by the National Alliance on Mental Illness (NAMI) on mental health on college campuses shows that (a) 1 in 4 students have a diagnosable illness; (b) 40% of students do not seek help; (3) 80% feel overwhelmed by their responsibilities and (d) 50% have been so anxious they struggled in school (NAMI, 2016). Studies have shown that untreated mental illness in the college student population--including depression, anxiety and eating disorders-- is associated with lower GPA and higher probability of dropping out of school (Active Minds, 2016).

The major goal of this proposal is to provide programming to promote mental health outcomes (such as reaction to stress, psychological well-being, and psychological distress, including depressive symptoms and anxiety) of students at Albany State University which will ultimately help course completion, retention and graduation. The programming will include activities: (1) to increase mental health awareness; (2) to identify warning signs of mental distress through various gatekeeper trainings (Kognito and QPR ); (3) to provide life skills training/workshops to cope with various day-to-day stressful situations; (4) to conduct activities to reduce mental health stigma and to increase help-seeking behavior; (5) to develop liaisons with the faith community and (6) to alleviate stress during the school year through social media campaigns. The programs will be organized in partnership with various campus and community partners. The target

population for this intervention will be undergraduate students who are enrolled at Albany State University; a special emphasis will be given to African American students.

### **Demonstration of need**

Mental health problems are widespread on college campuses, for example NAMI reported that 1 in 4 students have a diagnosable mental illness. The most common mental health issues among students are depression and anxiety. Depression is a common disabling condition (Kessler et al., 2005), second only to heart disease in terms of global disease burden (WHO, 2001). Students with mental illness have other serious negative consequences. For example, it is documented that there is a significant relationship between mental health problems and substance abuse. It is found that when college students are faced with challenges and pressures they often turn to licit and illicit substances (Addiction Center, 2016). Another dangerous consequence of depression/mental illness is suicide. In 2014, suicide was the second leading cause of death among young adults, ages 15-24 (CDC, 2016). The results of a recent survey among college students conducted in Spring 2016, found that 10.54% of students reported seriously considering suicide at least once in a 12 month period, a marked increase from several decades ago (ACHA-NCHA, 2016).

A major mental health issue is that most African Americans do not receive treatment for major depressive disorders. It is estimated that less than half of African Americans and less than a quarter of Caribbean Black Americans with severe depressive symptoms received treatment. It is also documented that African Americans who received treatment get poor quality care compared to white Americans (Williams et al., 2007). Access to quality mental health treatment, stigma associated with seeking care, and other cultural myths are some of the barriers in addressing mental health care among African Americans. There is a dearth of research on the mental health issues among African American college students, especially in Historically Black Colleges and Universities (HBCU). Myths, stigma, and cultural factors prevail in the African American community so mental health issues often are not a priority at HBCUs.

In general, mental health problems is a serious issue in southwest Georgia that is why the Phoebe Putney Memorial Hospital (PPMH) identified mental health as their priority number 2 based on their Community Health Needs Assessment in 2013. The report also indicated a County Grade for Mental Health Access to minorities in Dougherty County received a grade of F; ASU is located in Dougherty County.

This project has both short-term and long-term impact on students' life. The emotional well-being plays a vital role in an individual's life span, especially the stress later in their work place. This project will offer various coping strategies to handle stress situations in life. This not only helps the retention and graduation but it also helps students to manage other stressful situations in life. In addition, the gatekeeper training teaches students to assist others by identifying the warning signs of mental distress and leading them to seek help. For example, at least two students told us that because of the gatekeeper training, they were able to save the life of their friends. We will be providing various life-skills training so that they can lead a healthy life as well as to help others in a crisis situation. In other words, the project has a long-term impact on our students' future.

## **Mental Health: Albany State University**

This section provides some key facts about the mental health status of undergraduate students at Albany State University. The present investigator is part of a team, who is studying the mental health needs and implementing various awareness and prevention activities on campus since 2013 as part a Garrett Lee Smith (GLS) Campus Suicide Prevention Grant. This grant ended in May 2017 with a year of no-cost extension. The funding is over but the mental health issues remain to be a very critical need at ASU. As a part of the grant, we have been collecting data on mental health status of ASU students.

Table 1. Prevalence of symptoms of depression among ASU students in 2013 and 2016.

<b><i>In the past month, how many days have you:</i></b>	<b>2013</b>	<b>2016</b>
Felt so down/blue you couldn't participate in your normal activities	57.5	41.9
Felt so hopeless you didn't know if you could go on	38.3	22.2
Felt so tired so you couldn't get out of the bed	77.1	71.7
Felt like you had no real friends	41.9	36.2
Felt like you didn't fit in	37.5	31.2
Felt there was no joy in your life	34.0	22.9
Felt so agitated you couldn't settle down	52.5	38.6

*N=554 for 2013 and N=356 for 2016, undergraduate students representing all majors.*

The above table indicates the prevalence of symptoms of depression among ASU students. The survey also found that a significant percent of ASU students reported the above symptoms of depression for 10 days or more in the last month. The above condition can easily lead into skipping classes which can result in lower grades and eventually in dropping out of college. The survey also found that 37% of students reported that in the past 6 months, they “have used alcohol to feel better.” About 30% of students reported that in the past 6 months, they “have used drugs to feel better.” It was also found that 65.3% of students reported that they “worried that they would fail in school.” About 35% of students reported they “broke up with a boy/girl friend” in the last 6 months. Depression is a predictor of suicide. In 2013, the ASU campus survey shows that 13 of 554 students (2.4%) reported they were planning to commit suicide and 3 students reported that they attempted to commit suicide (0.6%). We cannot imagine the impact of such a mental health crisis on our campus.

During the last three years, we offered a variety of programming to increase mental health awareness, life skills training, social media campaigns and activities to reduce mental health stigma and to increase help seeking behavior among students. All these activities helped to reduce the prevalence of the symptoms of depression between 2013 and 2016. We have made real measurable progress over the past three years, demonstrating that such an intervention will improve the well-being of students, engage students as peer educators and prepare faculty/staff to recognize and meet student needs.

There is a stigma associated with accessing mental health treatment. As noted by researchers, only 5-10% of African American students use on-campus counseling services due to fear of stigma. Moreover, in general, the African American community does not access mental health treatment even when there have mental health problems. Consequently, universities must be

more diligent in reaching out to African American students on campus who may be in need of mental/behavioral health services.

**B. ALIGNMENT WITH INSTITUTIONAL STRATEGIC PLAN** (Demonstrate how the proposed activity will assist the institution in achieving institutional goals)

This proposal is aligned with ASU's Strategic Goal Strategic Goal Five: Elevate Historically Underserved Populations - Albany State University will recognize and address the many challenges that face African Americans and other students of color, adult learners, first generation students, students from low socioeconomic backgrounds, and others from underserved populations, and form strong partnerships with K-12, government agencies, and community outreach organizations to increase access and success rates.

The current 1 year retention rate is 67.4% and 6 year graduate rate is 31% (ASU Fact Book, 2016). The low retention and graduation rate has a serious consequence. The narrative provided in this proposal shows that mental health and other related student behaviors play a significant role in student's retention. A significant percent of ASU student population are first generation, from rural communities and often do not have the right role models and may not have the skills to handle various challenges in their college life. So they are more likely to drop out of the college or it could lead to mental health and other coping issues. This is not only affecting the individual but also the whole academic climate of the institution. Through various intervention activities we can bring them back to the main stream and help them realize their potential.

**C. ALIGNMENT TO TITLE III PURPOSE**

- Demonstrate how the proposed activity will assist the institution improve in the areas of enrollment, retention and graduation.  
*The proposed activities will improve the mental and emotional wellbeing of the students which will help the retention and graduation rate.*
- Identify and demonstrate how this project will improve one or more of the following areas for the institution: (Academic Quality, Student Services and Outcomes, Institutional Management, and Fiscal Stability).  
*If students' mental and emotional wellbeing improve, this will enhance academic quality, and thereby increase retention and graduation rates. This will also decrease discipline problems. If we retain more students there will be an impact on financial stability of the institution.*
- Identify and demonstrate how this project supports one or more Legislative Allowable Activities (LAA's) as defined by the U.S. Department of Education to strengthen the institution. (see attached listing).  
*The project fits very well with LAA-6: Tutoring, counseling, and student service programs designed to improve academic success. As mentioned above the programs under this project will help to improve the Academic Quality and Student Services and Outcomes.*

#### D. OVERVIEW OF OBJECTIVES AND IMPLEMENTATION STRATEGY

- Provide a summary of the objectives for this activity. Objectives must be stated in measurable terms.

*Overall goal of the grant is to provide direct service to at least 5000 students (Over the 5-year period) and to reach the student population through indirect service through social media and informational showcase at various campus events. The aim of this project is to reduce the incidence of symptoms of depression among students. Also to increase the mental health awareness on campus so that it will improve academic quality and student outcomes. As mentioned above the project will have a lasting impact on each individual and also people who are associated with them in life.*

**Objective 1:** To train students/Faculty/Staff (at least 500 students and 50 Faculty/Staff each year) using a Gatekeeper training such as Kognito. **Objective 2:** To organize at least two programs on help seeking behaviors with the intention to reduce the mental health stigma, where 200 students will participate. **Objective 3:** To conduct workshops to teach students life skills including coping skills, yoga/tai-chi, goal-setting, problem solving and study skills in collaboration with campus and community partners, including faith community. **Objective 4:** To develop and implement a campus-wide social marketing campaign, using student-developed prevention messages; **Objective 5:** To organize various mental health awareness events such as World Suicide Prevention Day; Mental Health Awareness Week, Mental Health Awareness showcase, Mental Health Fair and Get A Life Maze.

- Provide a summary of implementation strategy. How will the objectives be achieved? Include partnerships and collaborations.  
We have been coordinating and implementing various prevention activities for the last four years. All these activities were implemented in partnership with various campuses and community partners. On campus, we collaborated with SGA, Office of Student Affairs, CAAM, Athletic Department, Student Health, Title IX and various clubs and organizations. At the community level, we partnered with Phoebe's Network of Trust, Phoebe Behavioral Health, Lily Pad, Alpha Pregnancy Center and Sherwood Baptist Church. These collaborations brought thousands of dollars' worth of additional resources on campus. We will use the same strategy for the implementation of this project.

#### E. KEY PERSONNEL

- Identify activity director  
**George Thomas**, will be the Director. Dr. Thomas was PI of the Garrett Lee Smith Campus Suicide Prevention grant funded by the Substance Abuse and Mental Health Service Administration (SAMHSA) from September 2013-May, 2017. This grant made a significant impact on campus in the area of mental health and emotional well-being of our students on campus.  
**Sandra Handwerk**, will be the Co-Director. Major responsibility of the Co-Director is to coordinate partnerships and coordinate assessment. There are a lot of community resources we can bring in to campus without any additional cost by coordinating various external private and public agencies.

- Provide a summary of personnel needed and a justification  
This project needs a Program Coordinator because there will be a lot of programs during the semester, such as class visits, attend various faculty and staff events, mental health awareness showcase during campus events, coordinate various other events, and contact community partners.

## **F. ASSESSMENT PLAN**

- Identify methods of assessment of the project to determine effectiveness.  
Both qualitative and quantitative methods will be used to evaluate the effectiveness of the project. There will be a sign in sheet for each event. After each key event there will be a survey instrument to evaluate the effectiveness of the program. This way we could modify the program or to make adjustment in the program delivery, when it is necessary. Also we will be interviewing program participants periodically to get their feedback on the programs.
- Identify methods used to determine achievement of programmatic objectives.  
An annual survey will be conducted among the students to assess the impact of the project and needs of the students.

## **G. INSTITUTIONALIZATION PLAN**

- Provide a plan demonstrating how the project will be institutionalized by the end of the five-year grant.
  - Provide a yearly plan of institutionalization which includes Title III personnel reduction.
    - (1) To develop a critical mass of faculty/staff who are aware of warning signs of mental and emotional distress –through various gatekeepers training such as Kognito and Question, Persuade and Refer (QPR). Every year, we will train at least 50 faculty/staff who are proficient in mental and emotional well-being of our students. Therefore, we can continue the work after the funding period.
    - (2) To develop mental health peer educators (group of 15 students), who will be trained on various aspects of mental health, who can coordinate various mental health awareness activities throughout the year. Also explore the possibility of establishing chapters of Active Mind and NAMI support group on campus.
    - (3) To establish a Task Force on mental health in partnerships with various community and campus stake holders.
    - (4) To establish a mental health resource center, where students can watch DVDs and borrow various resource materials on mental health.
    - (5) To link a coalition of external agencies and partners; who are willing to offer free mental health service to our students, with various ASU student service departments.
  - Funding or collaboration for continued services on a yearly basis.  
We will also seek funding from external agencies to support future programming.

**ACTIVITY OBJECTIVES AND ANTICIPATED RESULTS**  
**Grant Period: Covering October 1, 2017 – September 30, 2022**

*(Objectives and performance indicators must be stated in measurable terms)*

<b>1. Name of Institution:</b> <i>Albany State University</i>	<b>2. Activity Title:</b> <i>We Are One-ASU</i>
<b>4. Activity Objective(s)</b>	<b>3. Activity Number: 1 (Title III, Part B)</b> <b>5. Anticipated Results to Measure Success (Performance Indicators):</b>
<b>Objective 1:</b> <i>To develop a critical mass of Students, Faculty and Staff who can promote the mental and emotional well-being on campus through gatekeeper training such as Kognito and QPR.</i>	<b>Performance Indicator 1:</b> <i>At least 500 students and 50 Faculty/Staff each year will be trained using a Gatekeeper training. They can identify the warning signs of mental health problems.</i>
<b>Objective 2:</b> <i>To organize mental health campaigns to reduce stigma and increase help-seeking behaviors among students.</i>	<b>Performance Indicator 2:</b> <i>At least 250 students, faculty/staff will participate in stigma reduction campaigns, including at least two 'Walk Away from Stigma' walk. They will symbolically walk away from stigma and learn help-seeking behaviors.</i>
<b>Objective 3:</b> <i>To conduct workshops/training to reduces various stressors.</i>	<b>Performance Indicator 3:</b> <i>At least 50 students will participate in each training thereby learning to manage stress and cope with their challenges.</i>
<b>Objective 4:</b> <i>To reduce stress during the critical time points in each semester.</i>	<b>Performance Indicator 4:</b> <i>At least one student-developed message will be sent at critical time points in the semester (4 messages per semester) using a campus-wide social marketing campaign. Widespread impact on the entire ASU community.</i>
<b>Objective 5:</b> <i>To increase mental health awareness among students, faculty and staff.</i>	<b>Performance Indicator 5:</b> <i>Reach at least 300 students, faculty/staff each year using mental health awareness events such as World Suicide Prevention Day; Mental Health Awareness Week, Mental Health Awareness showcase, Mental Health Fair and Get A Life Maze</i>

GRANT ACTIVITY FOR THE TITLE III PART B OR PART F PROGRAMS				
IMPLEMENTATION STRATEGY AND TIMETABLE FORM				
1. NAME OF ACTIVITY DIRECTOR AND OFFICE: George Thomas,			2. Activity Title: <i>We Are One-ASU</i>	
3. SPECIFIC TASKS TO BE COMPLETED	4. PRIMARY PARTICIPANTS	5. METHODS INVOLVED	6. TANGIBLE RESULTS	7. TIMEFRAME FROM/TO
1.1. <i>To provide gatekeeper training for students/faculty and Staff</i>	<i>Open to all ASU students, faculty &amp; staff</i>	<i>This is an online training. Project staff will visit class and attend faculty and staff events to promote this training.</i>	<i>Will increase mental health wellbeing which will increase course completion, retention and graduation</i>	<i>10/1/ 2017 – 9/30/ 2022</i>
2.1 <i>To organize mental health stigma campaigns.</i>	<i>Open to all ASU students, faculty &amp; staff</i>	<i>Project staff will create a mental health promotion task force. In consultation with the task force organize activities</i>	<i>To increase help-seeking behaviors among students which will increase course completion, retention and graduation rates.</i>	<i>10/1/ 2017 – 9/30/ 2022</i>
3.1 <i>To conduct workshops to reduces various stressors.</i>	<i>Open to all ASU students, faculty &amp; staff</i>	<i>With the help of faculty staff and community partners. Will also use the social media.</i>	<i>Will learn life skills to cope with stress which will increase course completion, retention and graduation rates.</i>	<i>10/1/ 2017 – 9/30/ 2022</i>
4.1 <i>To increase mental health awareness among students, faculty and staff</i>	<i>Open to all ASU students, faculty &amp; staff</i>	<i>With the help of faculty staff and community partners</i>	<i>Improve mental health well-being which will increase course completion, retention and graduation rates.</i>	<i>10/1/ 2017 – 9/30/ 2022</i>