

## CHILL: Stony Brook's Peer-Based Outreach and Early Intervention for Depression

### **Executive Summary**

CHILL is a two semester, 6 credit hour course/internship that is offered through the Center for Prevention and Outreach (CPO), and fulfills one of the requirements of the Health and Wellness minor. It is co-taught by a health educator and a licensed clinical psychologist, both CPO staff members, and is overseen by the Director of the Living Learning Center and the Associate Dean and Director for Prevention and Outreach. The objectives of CHILL are to 1) Promote student leadership development through peer education training; 2) Develop PEs who are able to heighten peer awareness of issues related to mental health, wellness and treatment; and 3) Expand research-based depression/suicide early intervention and prevention efforts on campus through screenings and experiential workshops.

With research demonstrating that a large majority of students who successfully suicide were not in counseling (Gallagher, 2005) and that untreated or under-treated mental illness is a key factor in suicide (Quinnett, 2008), CHILL peer educators meet a critical need of reaching students where they are and providing information about resources on campus and education on symptoms of depression. CHILL peer educators also are given the opportunity to apply skills to the immediate community of which they are a part and develop their leadership skills and commitment to the campus. Our peer education programs offer an opportunity for students to be mentored by professional staff, and as PEs develop their own skills, they go on to become peer mentors to the younger peer educators. Students report feeling a greater sense of connection to the campus community and meaning in their work as they fulfill a requirement to complete 45 hours of campus outreach per semester through evaluated direct service projects.

CHILL runs depression screening events throughout the semester beginning with National Depression Screening Day targeting specific populations on multiple days in varying locations across campus (e.g. commuter students, resident students, and so forth). All depression screening events are staffed by a team of peer educators and professional counseling staff. This depression screening program is done in partnership with the licensed counselors of the Center of Prevention and Outreach and the University Counseling Center as well as other offices and student groups such as the Commuter Student Association and Commuter Student Services.

For depression screenings, PEs administer the 10-item Harvard Department of Psychiatry/NDS scale (HANDS) to students. The peer educator scores the HANDS and offers the student an opportunity to speak with a counselor. Students are also given information on related topics such as sleep hygiene or nutrition based on their HANDS results as well as a campus resource list. In addition to the HANDS 10 items, students are asked to voluntarily indicate their gender, commuter/resident status, and year allowing for data collection to help target future outreach and education efforts. In 2007-2008, CHILL screened nearly 1600 students, and in this 2008-2009 academic year, CHILL PEs have screened nearly 500 students.

### **Award Description**

The CHILL peer education program is built on two core goals of the Center for Prevention and Outreach

– increasing prevention and early intervention and increasing student engagement with the campus community through leadership and service opportunities within the immediate campus community. Meeting the mental health needs of our students must involve prevention and early intervention as these factors are shown to yield better outcomes for our students struggling with undetected or untreated mental illness (National Mental Health Association/Jed Foundation, 2002). Secondly, students increase their sense of belonging through opportunities that enable them to make an immediate difference in critical areas within the campus community. This lays the foundation for a peer education program and a prevention and outreach initiative that reflect the criteria outlined for the NASPA Excellence Award.

### Positive impact on student learning, transitions, and success

CHILL is an internship that fulfills a requirement for the Health and Wellness Minor, and provides students with opportunities to translate theory and knowledge to concrete practice that can be assessed within real world parameters. Furthermore, the work of PEs is seen as an integral part of the work of the Center for Prevention and Outreach (CPO), and PEs come to see themselves as members of the CPO team and by extension, part of the Student Affairs team. Their outreach work involves close collaboration with professional staff from across the Division of Student Affairs. Students are given many opportunities to build mentoring relationships with senior staff, and PEs learn that their work is a critical contribution to Student Affairs practice. One CHILL program requirement is the submission of reflection papers, and in these reflections, PEs remark repeatedly on their surprise at their ability to make a difference for members of their own campus community in such an immediate way through their screening and outreach work.

Another critical component of the CHILL program is classroom training time. The group meets twice weekly to have seminars covering essential materials on topics such as depression, suicide prevention gatekeeper training, diversity, presentation basics, substance use, and behavior change theories. This is also their time to debrief on recent outreach events, review assessments, and plan events. Because seminar content and outreach focus deals so closely with mental health concerns, many peer educators find a greater sense of wellness through helping others whether it is through confronting the internalized stigma they felt about seeking help for themselves or by learning more about the hope there is for those struggling with depression and other mental illnesses and their own ability to make a difference. Furthermore, as peer educators, they are offered an opportunity to participate in a “Help the Helpers” support group offered by the Counseling Center so that PEs have a confidential place to seek help for themselves in a venue separate from their learning experience. Our peer educators often report at the end of the program in reflection papers and course evaluations the ways that their participation in CHILL helped them overcome their own struggles and/or develop a greater sense of purpose about their own lives.

Much of the work that CHILL PEs engage in enable PEs to explore various helping and educational professions as they prepare to make decisions about career paths and professional development. Several PEs have pursued graduate work in social work, psychology, and the health professions. Furthermore, all PEs gain important transferable soft skills that can be utilized in their future endeavors regardless of their career path – skills such as team work, team building, oral and written communication, mediation, active listening, self-assessment, multicultural competence, and organization.

### Relevance to institutional mission

One aspect of the mission of Stony Brook University is to “provide comprehensive undergraduate, graduate, and professional education of the highest quality,” and we believe that prevention and early intervention services play a key role in this effort. In consonance with the Mission of the Division of Student Affairs to be “committed to the success of each student” and to “advocate for and provide leadership to cultivate the educational success and personal development of our students by offering services, activities, and learning opportunities,” CPO works to create a safe environment for learning for all students through prevention, early intervention, and advocacy services. CHILL helps promote student engagement, academic success, personal growth, and wellness -- all factors that contribute to the quality of the educational experience for our students and their success.

### Demonstration of success in addressing student needs and/or critical campus issues

Suicide is the second leading cause of death among college students, and undiagnosed/untreated mental illness is a leading cause of suicide (Jed Foundation, 2008). As a result, outreach to students about available resources and early screenings are key best practices for campus mental health initiatives. Furthermore, a primary obstacle to help-seeking behavior is the stigma associated with both mental illness and mental health related services. As a result, work with students to reduce the stigma of mental illness and of help-seeking behavior is critical. Stony Brook’s 2005 ACHA survey results (N=700) indicate that in the previous school year, 52% felt so depressed it was difficult to function, and 15.4% seriously considered attempting suicide. Despite the high report of symptoms often related to depression, only 13.3% reported having been diagnosed with depression. Of those reporting a diagnosis of depression, only 41.8% were in therapy for depression at the time of the survey further demonstrating the need for work that meets students where they are to help reach those who are less inclined to self-refer for help.

In 2007-2008, CHILL peer educators conducted a total of 75 workshops and outreach events which included 22 depression screenings across campus. Through these screenings, peer educators with the support of professional counseling staff screened nearly 1600 students, primarily undergraduates, representing roughly 11% of the SBU undergraduate population and 14.5% of total number screened nationally by college counseling centers in 2007 (2007 National Survey of Counseling Center Directors). CHILL also partnered with key campus groups such as Stony Brook's chapter of Active Minds, a national student group whose mission is to reduce the stigma of mental illness and raise awareness about the importance of mental health concerns.

### Collaboration with academic affairs and other departments

CHILL PEs collaborate routinely with staff from the University Counseling Center, CPO, and other offices such as Office of Commuter Student Services. Staff from other University offices such as Student Health Services, the Health Insurance Office, and the Health Science Center as well as key off-campus partners such as RESPONSE Hotline, the area’s 24-7 suicide hotline, serve as key resources for students during the program's twice-weekly seminars.

A key ingredient in CHILL’s success is its credit-bearing status as well as the Health and Wellness internship requirement it fulfills. This has been possible through close collaboration with the Health and Wellness Living Learning Center which sponsors the Health and Wellness minor. It currently carries a

Satisfactory/Unsatisfactory grading scale. However, work continues with the Curriculum Committee of the College of Arts and Sciences to make CHILL a grade bearing, credit-bearing internship experience.

### Originality and Creativity

The CHILL program uses innovative means to reach the campus community beginning with the expansion of depression screenings beyond National Depression Screening Day to an ongoing campus event that changes location depending on the student population PEs are trying to reach. For example, PEs held depression screening events geared for commuter students that occurred in the central commuter student lounge in partnership with the Commuter Student Association and the Office of Commuter Student Affairs. The morning of commuter screening events, CHILL PEs distributed information packets in the commuter student parking lots to students about depression and the available depression screening later that day. To reach a broader range of students with education on the impact of depression and other mental health concerns, PEs collaborated with Active Minds to create programs such as a Guitar Hero Tournament called “Battle the Music – Battle the Stigma” where clips from MTVu’s “Half of Us” program were shown between tournament rounds to student-competitors.

The CHILL program also has the capacity to pilot ways to assess the impact of situational stressors that might affect student well-being such as the recent economic climate. In a recent screening, students were asked if the recent economic climate added to their stress. Students who answered yes were given information about career decision fairs and financial literacy workshops offered through the Career Center and the Financial Aid Office. We were also able to collect initial baseline data to help us assess the impact of the current financial climate on our students. For example, of the 52 students screened in an hour and a half, 29 students answered yes.

### Effective use of technology and other resources

Technology use is not a central feature of CHILL as the emphasis is on face-to-face engagement of students. However, CHILL routinely makes maximum use of space, financial, and professional resources through continual partnership building and collaboration. CHILL also promotes online resources such as RESPONSE hotline’s online site called “hear2help” (see [www.responsehotline.org/hear2help.html](http://www.responsehotline.org/hear2help.html)) where individuals can chat with a counselor online.

### Innovative practical use of research and/or assessment and linking to learning outcomes

There are two primary learning outcomes for CHILL PEs. The first is the ability to effectively engage peers on topics related to mental health and mental health services as demonstrated in the numbers of students they are able to reach. A second closely intertwined learning outcome is increased understanding of the impact and prevalence of mental illnesses such as depression within the community. This is achieved multiple ways – through classroom seminars and through actual conversation with peers. While seminars provide and reinforce knowledge and understanding that can be demonstrated through papers and quizzes, the work of talking with students, many of whom report symptoms of depression, helps peer educators achieve this learning outcome in a transformative way that is demonstrated in PEs’ increased ability and confidence to engage peers, some of whom may be struggling with depression and are in need of a referral or others who are in need of further education. Depression screening results help PEs see the prevalence of these issues on college campuses and the

importance of community outreach and service.

### Evidence of sustainability

The CHILL peer education program is an integral aspect of the work of the Center for Prevention and Outreach (CPO) that allows CPO to extend its prevention and outreach work far beyond the capacity of the professional staff alone. Because CHILL is a credit bearing internship experience and an experiential capstone for the Health and Wellness minor, student interest in the program is very sustainable and demand for enrollment has increased. CHILL began in 2004, and between 2004 and 2006, 20 students were enrolled in the program. In 2006, there were 14 students enrolled. In 2007, the program expanded to allow students completing the two semester internship to return as PE Mentors. In 2007, 20 students enrolled and 2 past CHILL PEs served as mentors. In the 2008-2009 academic year, CHILL expanded to add a second section. In this Fall semester, 17 students enrolled and 3 past CHILL PEs are working as mentors. An additional 15 students will be enrolling in a second spring section with 3 former CHILL PEs returning as mentors.

This is the second year of CHILL's expanded emphasis on year-long depression screening efforts, and already to date, this year's peer educators have screened nearly 500 students. They are well on their way to meeting if not exceeding last year's number of students screened.

### **Assessment Data**

Data from screenings are collected routinely and entered into SPSS by a student assistant. In the 2007-2008 academic year, the CHILL program successfully screened 1585 students. Of those screened, 49% of those screened were male and 51% female; 30% were commuter students and 70% were resident students. The HANDS depression screening data helps us collect further information on the prevalence of symptoms often related to depression within the campus community. A score of 9 out of 30 on the HANDS is a positive score indicating that a student is at increased risk for depression. The average HANDS score in 2007-2008 Stony Brook screenings was 6.68 (SD 5.1). 29.3% of students screened scored 9 or higher. In addition, 32.1% of all screened students reported that they had a close blood relative with depression. Of those who scored less than 9 on the HANDS, 29% reported that they had a close blood relative with depression, and of those who scored positively with 9 or more, 40% reported having a close blood relative with depression. The data also show that resident students report significantly higher rates of hopelessness about the future than do commuter students. It is through such data that we are both able to see the ways existing research on depression and suicide applies to our current student population and better target our future outreach efforts.

Another important assessment tool for CHILL are student reaction papers which are collected over the course of the semester. The following is an excerpt from one which conveys themes that come up routinely in the reaction papers:

"I've learned many educational facts about mental health that I can apply first hand to my own experiences and the experiences of my peers. I participated in a number of events this semester that really made me feel empowered and proud to be a peer health educator because I was able reach out to my peers with my fellow peer health educators.

Participating in each event helped me realize how important it is to reach out to students and raise awareness about the prevalence of mental as well as physical health issues on campus and in the U.S. Every student should be educated on these issues and I believe Chill's outreach utilizing workshops, events, tabling, depression screenings, and word of mouth does become a teaching moment for me. Educating students will help them to take more responsible measures and encourage them to seek the help they need. [...]

I've done four depression screenings this semester. My first depression screening was on October 24th at the Union. I didn't really know what to expect...I wasn't used to going up to people to get them to do the screening. It felt awkward at first. A lot of people were in a hurry or chose not to do the screening. However, as time went on, I got used to it and gained more confidence in myself.

My second depression screening on November 14th was better than my first. I felt more comfortable the second time. I was able to get more students to do the screenings and was able to learn how to approach students with information better."

Since its inception in 2004, nearly 90 students have completed the CHILL Program with an 85% increase in enrollment in CHILL between the 2007-2008 academic year and 2008-2009 academic year. 3 CHILL students have gone on to serve as Student Ambassadors, 8 as mentors, and 6 as paid peer educators. Upon graduation from Stony Brook, CHILL-affiliated alumni have gone on to successes ranging from medical school, graduate work in social work, and completion of nursing school to helping to open an orphanage in Pakistan.

While demand for services at the Counseling Center has remained relatively constant, the demand for clinical services at CPO has increased since the inception of CHILL's expanded depression screening program. Between 2006-2007 and 2007-2008, demand for clinical services rose 41%, and while 8% of referrals came from screenings, we found that the top referral source was peer educators/RAs/friends at 34%.