

Campus Mental Health Services Stretched but Available

Originally aired 5/7/2007

The shootings at Virginia Tech have highlighted access and treatment gaps on college campuses for students with mental health problems. In Minnesota, students often encounter waiting lists for mental health services. But beyond scarce resources, colleges also face potential legal liability. As a result, serious mental health cases are referred for off-campus treatment.

Minneapolis, Minn. — When Marley Prunty-Lara transferred to the University of Minnesota two years ago from South Dakota, she didn't bother lining up treatment for her on-going mental health issue on campus. The 22-year-old communications major is already a veteran of the mental health treatment system after being diagnosed with bipolar disorder when she was 15.

"I would fall above and beyond the limitations the university sets on the number of appointments you can have at the health clinic. I recognized I needed to utilize my private health insurance and go outside the system," she says.

Students need only come up with a \$10 co-pay to get help on campus for issues ranging from anxiety to mild depression. But they're allowed only about one visit per month. Anyone with more serious problems--an eating disorder, severe depression or psychotic episodes--is referred off campus.

"We don't have the resources to deal with all the mental health issues on campus," says Ed Ehlinger, director of the U of M's Boynton Health Service, which provides clinical care for about one in five Twin Cities campus students each year.



Ed Ehlinger

The university operates under what Ehlinger calls the "brief therapy" model--addressing only problems that require between two visits to 12 visits.

"More chronic mental health problems that need on going services for years, those are very resource-intensive and will probably last beyond their college years and so we will try to get them into community resources so that can be an ongoing relationship that will last a long period of time," he says.

Once off campus, though, students are required to use private insurance or cash out-of-pocket for treatment. The wait to get an appointment can take months.

The shooting at Virginia Tech exposed the fine line college campuses walk with their students' mental health problems. But the issue really hit home for colleges years before. MIT student Elizabeth Shin

died after setting herself on fire in her dorm room in 2000. MIT settled a nearly \$28 million wrongful death lawsuit out of court.

Typically, unless a student makes specific mention of harming himself or others, mental health staff cannot contact college administrators, professors or even the student's parents.

"What we end up dealing with is liability. We have our hands tied because of laws, because of ethics. We can't breach confidentiality because someone is creepy or weird or is writing dark stories or is telling us dark story about themselves or their thoughts," according to Terri Bly, a staff counselor at Hamline University Mental Health Center.

Bly says students occasionally refuse to sign consent forms that allow her to break confidentiality.

"Sometimes they say no. And then it really is just out of our hands and we just never find out what happens next," she says.



Terri Bly

That scenario is not too different than what happens off campus.

"We exist in a mental health system where there aren't a lot of good options," says Greg Eells, Director of Counseling and Psychological Services at Cornell University and active with a national foundation that works on college campus suicide prevention.

Eells says, in general, college students get the help they need. But gaps in service make it more difficult than it should be. "Other than fee-for-service, individual therapy, there are great community mental health services but frequently they're underfunded, their wait lists are longer. Students want support more immediately so they can succeed academically," he says.

Students with mental health problems can succeed academically. U of M junior Marley Prunty-Lara's says she's an example. But it takes treatment and support.

"I don't believe that as a society we should simply say that we don't want people with mental illness in our backyard or our universities or in our dorms because, where are they to go? Where are people like me to go when we are most ill?"

Prunty-Lara says after she graduates she intends to go on to help break barriers for others whose mental illness hinders their potential.