

The Scaffolded Mental Health Support Model (SMHS): a guide for faculty and staff to provide proactive mental health support to students

Disclaimer: this is a handout to supplement the SMHS Model training available to all CU faculty and staff. Request this training here:

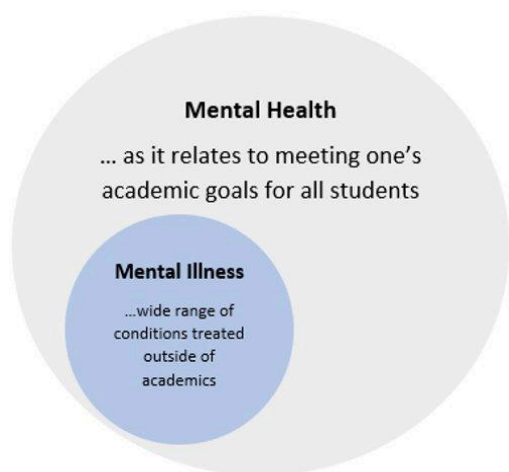
<https://www.colorado.edu/health/health-wellness-presentations-and-outreach>

Why should faculty and staff learn how to support student mental health?

1. Research confirms *unequivocally* that mental health is linked to academic success.
2. Faculty and staff are often the first point of contact for students.
3. Confidence and preparation will reduce burnout and stress.

This model will help you:

1. build your confidence when students' mental health shows up in an academic context.
2. strengthen your skills in supporting students to reach their academic goals.
3. increase awareness of the resources CU has to offer students.



Mental health includes our emotional, psychological, and social well-being.

It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, make choices, and reach our academic goals.

Mental health is correlated with GPA.

Psychosocial issues are a primary cause of drop-out after financial ones.

How do non-clinical faculty and staff support students' mental health, while staying within their scope of work?

1. Self-Assessment
2. SMHS Model
3. Practice
4. Ongoing Community Support

Self-Assessment

“If knowledge is power, knowing what we don’t know is wisdom.” Adam Grant

Self-Assessment:

As the goal of the SMHS model is to help us develop our confidence in supporting student mental health, we want to start with giving space for you to each reflect independently on where you stand on each of these variables. Write down your confidence level.

(1= **not confident** 4=**very confident**)

1. I am clear with my personal boundaries related to navigating mental health in an academic context.
2. I feel confident in responding to students who make alarming remarks, suggesting they may not be safe.
3. I feel confident in responding to remarks about a student’s mental health that do not indicate risk of safety.
4. I know how to soothe my own emotions when stressful mental health related conversations occur.
5. I am confident in my ability to identify degrees of mental health as it shows up in an academic context (not to diagnose, but to recognize how it informs my approach in supporting the student).

Scaffolded Mental Health Support Model

“Wellness is a prerequisite for all else. Students cannot be intellectually proficient if they are physically or psychologically unwell”. Ernest Boyer

The Scaffolded Mental Health Support Model (SMHS)

- The SMHS Model outlines levels of mental wellness and includes psychosocial stressors, student insight, student ability for effective self-regulation, and impact on the academic process.
- These levels are designed to be guidelines to identify current mental health levels and its impact on students’ capacity for academic engagement.
- It is important to note that these criteria are not aligned with DSM-5 diagnostic criteria. The goal of the criteria in this model is to better facilitate the academic process, not to provide a diagnosis.
- Moreover, this model is not intended to provide a static understanding of students. Rather it is to be used to capture a momentary understanding of a student’s mental health, specific to an academic context.

Scaffolded Mental Health Support Model

Low	<p>The student is able to effectively work toward academic goals. <u>Stress comes up</u>, but they demonstrate <u>effective self-regulation</u> including asking for help and communicating stress and then refocusing on the goal.</p> <p>RESPONSE: Express compassion regarding stress and encourage student to challenge themselves in their goals.</p>
Low-Mid	<p>The student typically demonstrates <u>effective self-regulation skills</u>, but is currently experiencing a <u>situationally specific short-term stressor</u> that is distracting from academics more than usual.</p> <p>RESPONSE: Express compassion for stress and difficult situation/s. Explore what support the student is seeking for their circumstances. Carefully attends to the student's ability to focus on academics during this time.</p>
Mid	<p>The student is able to articulate their mental health concerns and has a stable source of managing their mental health concerns. They demonstrate a <u>high level of self-awareness</u> related to their mental health. Their mental health is something they <u>consistently need to manage</u> but they have the tools to do so.</p> <p>RESPONSE: Express appreciation to the student for sharing their mental health history. Ask the student to articulate what they need to balance their mental health needs and academic goals. Encourage the student to share if they are experiencing times of elevated mental health concerns and how the student would like you to respond during those times.</p>
Mid-High	<p>The student is able to appear to be engaged in the academic process; however, it is clear that their <u>mental state is a significant barrier</u> as they take action toward their academic goals. They have <u>not yet developed</u> the self-awareness and self-regulation skills to manage their mental health.</p> <p>RESPONSE: Focus on developing a strong rapport with this student. Express compassion. Reflect the blocked pattern/s. Explore student's readiness for seeking mental health support.</p>
High	<p>The <u>academic process is consistently blocked</u> by the mental health concerns experienced by the student. The student is <u>easily overwhelmed</u> within the academic process, as it is triggering their unaddressed mental health concerns.</p> <p>RESPONSE: Focus on building rapport and showing compassion to the student. Explain your role as well as your limitations. Express a desire for finding what is most helpful for the student, and express options for change at this time (consider reduced course load, etc). Explore the student's readiness for seeking mental health support. Submit a referral to Student Support and Case Management.</p>
Very High	<p>The student articulates <u>statements of harm</u> to self/others and/or suicidality. These statements may be explicit or discreet.</p> <p>RESPONSE: Address statement/s directly. Ask the student if they are having thoughts of harm to self/others or suicidality. Put the academic agenda aside to support the student in finding more immediate support that can prioritize safety of the student. 24/7 Support 303-492-2277. If needed, Call CU PD for immediate support. (911)</p>

Practice

“For the things we have to learn before we can do them, we learn by doing them.” Aristotle

Scenario 1: Mara is meeting with you in your office hours for the first time. She disclosed that she has been diagnosed with major depressive disorder and has been living with it for years. She is connected with a psychiatrist and counselor and is getting the necessary support to manage her mental health. She tells you she is working on how to best stay motivated and hold herself accountable with her schoolwork. You asked Mara about her safety, and she confirmed that she is not having thoughts of harm toward herself or others.

Evaluation: This student is in the mid-level. The student is able to articulate their mental health concerns and has a stable source for managing their mental health concerns. She demonstrates a high-level of self-awareness related to her mental health. Her mental health is something she consistently needs to manage and she has the tools to do so.

Your Role: Express appreciation to the student for sharing their mental health history (eg., “Thank you for sharing this with me”). Ask the student to articulate what they need to balance their mental health needs and academic goals (eg., “How are you navigating these challenges currently?”) Encourage Mara to share if she is experiencing times of elevated mental health concerns and how the student would like you to respond during those times (e.g., “What do you need during our meeting?”)

Scenario 2: Laura has met with you once to discuss her academic progress, and you are preparing for your second meeting. In the first meeting, you struggled to know how to move forward in the conversation. When you asked Laura pertinent questions, she got overwhelmed and was not able to clearly consider her responses. When you tried to help Laura create an action plan for the following week, Laura was also very overwhelmed and got emotional thinking about how to move forward. Laura left the meeting feeling disheartened.

Evaluation: This student is in the high level of this model. The academic process is consistently blocked by the mental health concerns experienced by the student. The student is easily overwhelmed within the academic process, as it is triggering the student’s unaddressed mental health concerns.

Your Role: Focus on building rapport and showing compassion to Laura (eg., “This sounds like a very difficult situation”). Explain your role and your limitations (e.g., “These are the pieces we can work on together in our meetings”) Express desire for finding what is most helpful for the student, and express concern that academic support with you may not be helpful at this time. Explore student’s readiness for seeking mental health support (e.g., “This does not seem to be the best time for advising/office hours/coaching/goal-setting etc. Would you be open to some referrals on or off campus to focus on your mental health challenges and then return to our work?”). **Submit a referral to Student Support and Case Management.**

Scenario 3: Raj has been working with you over the last two months. He has been very engaged with his academics and has implemented many new strategies to support his academic goals. His exam scores have significantly increased since last semester. In your most recent meeting with Raj, he was much quieter than usual. When probed about how he is doing; he shared that he just found out that his grandmother is in critical condition, and his mom requested that he fly home to visit her.

Evaluation: This student is in the low-mid level. The student demonstrates effective self-regulation skills, but is currently experiencing a situationally specific, short-term stressor that is distracting him from academics more than usual.

Your Role: Express compassion for the stress and difficult situation Raj is experiencing (e.g., “This makes sense that you are feeling this way.”) Explore what support the student is seeking for their circumstances (e.g., “What types of support are you interested in at this time?”) Carefully attend to the student’s ability to explore academic goals during the time of stress.

Ongoing Community Support & Supplemental Skills

"Coming together is a beginning; keeping together is progress; working together is success." Henry Ford

A. *Motivational Interviewing (MI)*

Motivational Interviewing is an evidence-based style of communication that utilizes curiosity and openness to help identify where a person is related to readiness for change. MI focuses on questions that are open-ended and affirming. MI is a skill used by both psychotherapists and non-clinical professionals.

- <https://motivationalinterviewing.org/motivational-interviewing-training>
- Miller, W. R., & Rollnick, S. (2012). *Motivational interviewing: Helping people change*. Guilford press.
- Health Promotion trainings: [Trainings | Health & Wellness Services | University of Colorado Boulder](#)
- Page, K., & Tchernitskaia, I. (2012). Use of Motivational Interviewing by Non-Clinicians in Non-Clinical Settings. *Institute for Safety Compensation and Recovery Research (ISCRR), Melbourne*.

B. *Compassion training*

Compassion training is also a style of communication, but one that focuses on the benefits of compassion, empathy, and kindness for oneself and others.

- [Current Research - The Center for Compassion and Altruism Research and Education \(stanford.edu\)](#)
- Hamilton, D. M., Wilson, G. M., & Loh, K. M. (2020). *Compassionate conversations: How to speak and listen from the heart*. Shambhala Publications.
- <https://www.colorado.edu/crowninstitute/compassion-and-dignity-educators>
- <https://www.colorado.edu/center/contemplativeresource/>
- Kohler-Evans, P., & Barnes, C. D. (2015). Compassion: How Do You Teach It?. *Journal of Education and Practice*, 6(11), 33-36.

C. *Emotional Skills in the Workplace*

- [Utilizing Emotional Intelligence in the Workplace \(verywellmind.com\)](#)