

# FACULTY AND THEIR ROLE IN STUDENT MENTAL HEALTH

April 2021

As higher education and the role of educators has evolved over time, more and more faculty have found themselves in positions where they have needed to navigate student mental health concerns. The needs and concerns of students can vary from disclosing a diagnosis for accommodations or needing time to access mental health appointments to experiencing mental health distress or crisis. Faculty and advisors are often individuals that students may first reach out to or engage with. While for many faculty this may be an unfamiliar conversation to have with students, there are resources to help them be compassionate, inclusive, and still establish boundaries with students that reinforces their primary role as educators.

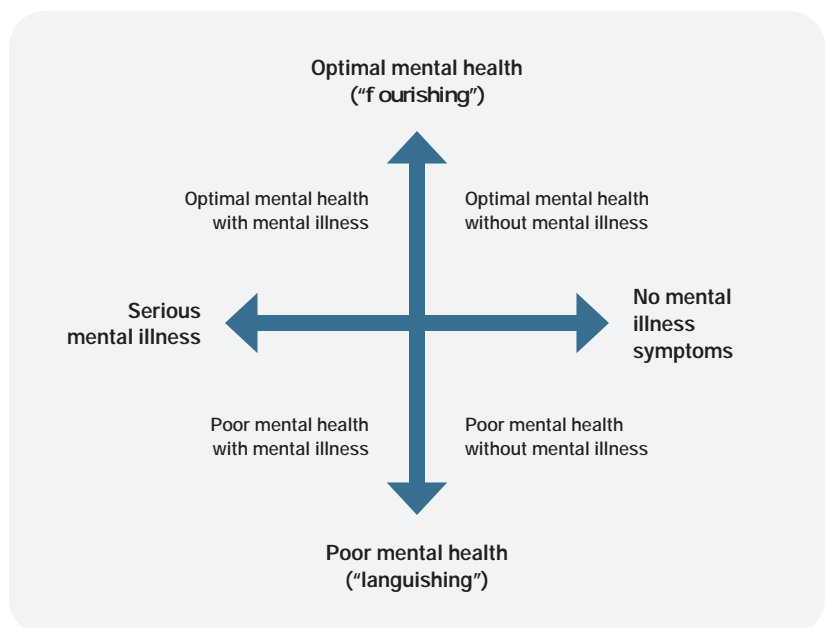
## MENTAL HEALTH VS MENTAL ILLNESS

Mental health and mental illness are not mutually exclusive. With the proper care and support, a student experiencing a diagnosed mental illness may have very positive mental health. Likewise, a student without any diagnosable mental illness may be experiencing poor mental health. Poor mental health may be the result of many factors, such as an inability to cope with demands or adversity, the absence of a support network and meaningful relationships, poor self-esteem, and/or a tendency towards all-or-nothing thinking. Mental concerns can be environmentally and/or chemically driven. Institutions and faculty should strive to have learning environments where students with or without mental illness can experience more optimal mental health.

Not all student mental health concerns would require professional care and intervention. Though supporting mental illness may require tailored interventions, mental health – like physical health – is something that we can all work to manage and support within ourselves and also support in others. Students may be experiencing stressors that they usually manage well with personal efforts and social supports, but it

may require them to be more thoughtful and intentional about integrating those efforts into their lives during particularly stressful times. Spaces that support self-care and provide social supports are great areas for faculty to encourage students to engage in to help them build a habit of intentional wellbeing throughout their lives.

Of course, students should seek immediate guidance from college administrators if they are experiencing mental health issues that are impacting their learning, but institutions also need to do their part to treat mental health as a public health issue that requires systematic approaches. Institutions should promote wellbeing and actively work to reduce unnecessary stress and anxiety, substance abuse, and suicidal ideation. If students begin to experience impairment of their functioning due to mental health issues, it is not uncommon that a student may approach a faculty member or advisor about their concerns.



## HOW MENTAL HEALTH CONCERNS CAN IMPACT LEARNING

Although each mental illness diagnosis is unique, mental illness and mental health conditions can share the common symptoms of impaired learning ability.

Problems frequently experienced include:

- Decreased concentration
- Shortened attention span
- Difficulty in making new memories

Medications commonly used to manage psychiatric symptoms

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of counselor or mental health expert based on personal experiences, but to instead view it as an opportunity to be an advocate and role model for mental health and wellbeing in the profession. Faculty normalizing seeking mental health supports and advocating for evidence-based wellbeing practices within the spaces they occupy has a considerable impact on decreasing stigma and amplifying help-seeking behaviors – not just for students, but for interns, residents, technicians, staff, and their peers.

Our member institutions have empathetic and compassionate faculty who may at times have difficulties setting boundaries with the multitude of students who seek their support. It is positive that faculty members have students who trust them and seek them out to discuss a variety of topics. And faculty directing students to the professionals who have the necessary training and can provide the best, most appropriate mental health supports possible for them is a true act of selfless caring. Being the bridge to resources, rather than the destination, can help faculty manage the emotional toll that lengthy conversations with students can have and also set clearer boundaries with students. If faculty find it difficult to refer students to resources due to a lack of confidence or responsiveness in the resources, then institutions can support faculty by engaging in a resource assessment and soliciting feedback from the community about their satisfaction with the current resources. Continual assessment and improvement of wellbeing-related resources is an integral part of a comprehensive, preventative health approach.

There are also faculty who may feel uncomfortable or shy away from being seen as a support for student mental health for a variety of reasons. An individual may self-reflect on why a discussion about mental health is causing them discomfort – is it a lack of knowledge about how to have the conversation or what to do if it's serious? Discomfort with strong feelings and emotions? Stiffness of mind? (om being indi (ou(essaculty)0.5whoexp)0.5en about )0.5.5is)-5.TQ 5at7f (o6 25v /GS1 gsqTjTA00.500cmf Tm  
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