Real Varsity Blues: Forming Community Collaborations to Address the Mental Health Crisis
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Learning Objectives

1. Understand challenges in the current student referral models
2. Learn how partnerships with student specific mental health providers can provide more effective care
3. Learn how counseling centers can harness community partnerships to serve a more diverse range of students
Audience Poll
Who is in the Room?

President A
Dean of Students B
Clinician C
Other Student Affairs D
Other E
Which Institution Are You Representing?
What's your favorite place to vacation?
<table>
<thead>
<tr>
<th>Challenge</th>
<th>Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>Availability</td>
<td>A</td>
</tr>
<tr>
<td>Cost</td>
<td>B</td>
</tr>
<tr>
<td>Distance</td>
<td>C</td>
</tr>
<tr>
<td>Diversity of Provider</td>
<td>D</td>
</tr>
<tr>
<td>Specialty of Provider</td>
<td>E</td>
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</tbody>
</table>
How is your institution dealing with the increased student mental health demands?
The Problem
Barriers & Solutions
Accessibility & Convenience

Transportation
Scheduling
Support

Information
Technology
Communication
How to Help...

University
Referral Network Coordinator
Education of Providers
Campus & Provider Events
Technology Solutions

Community Providers
Build relationships & collaborate
Location, Location, Location
Know population and culture
Utilize technologies
Affordability

Poverty
Mental Health Costs
Transportation Costs
Insurance
How to Help...

University
- Health insurance requirement
- Facilitate enrollment
- Student Health Insurance Plan
- Low deductibles and copays
- Robust network of providers
- Funds to help low income students

Community Providers
- Panel with major insurance plans
- Educate clients
- Sliding scale
- Grants & Fundraising
Suggestions

1. Collect insurance data from students.
2. Refer students with adequate health insurance and ability to pay copays to accessible, student-oriented mental health clinics.
3. Provide on-campus mental health opportunities for students who have limited resources and have trouble affording mental health insurance treatment.
4. If possible, provide students with a comprehensive student health insurance plan with low deductibles and copays.
5. Require students to carry health insurance.
6. Partner with referral groups that take as many insurance carriers as possible and are willing to educate students on their insurance benefits. It is particularly important to partner with groups that offer the university-sponsored student health insurance (if one is offered) or those who take Medicaid.
7. Partner with referral groups that offer sliding scale services.
8. Partner with referral groups that offer mental health grants.
9. Fund Specific Mental Health Treatment Grants.
Provider Diversity

Underserved Groups

Comprehensive Care

Therapeutic Approaches
Student & Institution Expertise

Student schedules

Student stressors

Developmental Age

Campus Support
How to Help...

Provide Campus Resources
Build Campus Relationships
Student MH Training
Flexible Scheduling
Environment & Stigma

Clinical Feeling

Stuffy Atmosphere

Lack of Passion

“Other” Place
How to Help...

Personalized referrals
Clear, simple referral process
Inviting spaces
The Acacia Model
Who is Acacia?

College Student Focused

Accessible, Affordable & Convenient

Committed to Diversity

Fun & Welcoming
The Acacia Model

1. Student Focus
2. Affordable Care
3. Accessible Care
4. Long-term Treatment
5. Flexible Scheduling
6. Responsive & Timely
7. Multiculturally Competent
8. Campus Expertise
9. Student Friendly Environment
10. Technological Adjuncts
OFF CAMPUS

Brick & mortar clinics
Walking Distance to Students
15+ Clinicians

ACACIA REACH

Video therapy utilizing our wide network of therapists.

ON-CAMPUS INTEGRATIONS

Contractual Agreement
Safe, conveniently and private space for students to engage in telehealth
WHO WE SERVE

Students, Faculty & Staff

UCSB
UCDAVIS
AGGIES
UC San Diego
UC Santa Cruz
UCLA
Bruins
Benefits

Good Vibes Only
1. Decrease time to access care
2. Increased number of treated students
3. Increased quality of care
4. Longer-term treatment
5. Reduced institutional demand
6. Cost containment
7. Broader range of therapies, modalities, & provider identities


