

Helping College Students Successfully Navigate the First Episode of Psychosis

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NEOMED

COORDINATING CENTERS
of **EXCELLENCE**



**CRIMINAL JUSTICE
COORDINATING CENTER
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OHIO PROGRAM *for*
**CAMPUS SAFETY
& MENTAL HEALTH**

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**BEST PRACTICES
IN SCHIZOPHRENIA
TREATMENT CENTER**

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BeST Center at NEOMED

BeST CENTER'S MISSION:

- Promote recovery and improve the lives of as many individuals with schizophrenia as quickly as possible
- Accelerate the use and dissemination of evidence-based and promising practices for schizophrenia treatment and recovery
- Build capacity of organizations and systems to provide and sustain a continuum of treatment and recovery options for people affected by schizophrenia and their families

BeST CENTER OFFERS:

- Expert Training, Consultation and Program Evaluation
- Advocacy and Public Education

BeST CENTER ESTABLISHED:

- Department of Psychiatry, Northeast Ohio Medical University in 2009
- Supported by Peg's Foundation and other funders

Best Practices in Schizophrenia Treatment (BeST) Center at NEOMED

The practices:

1. FIRST Coordinated Specialty Care for First Episode Psychosis
2. Cognitive Behavioral Therapy for Psychosis
3. Family-based Services
4. Integrated Primary and Mental Health Care
5. Cognitive Enhancement Therapy
6. Pharmacotherapy for Schizophrenia

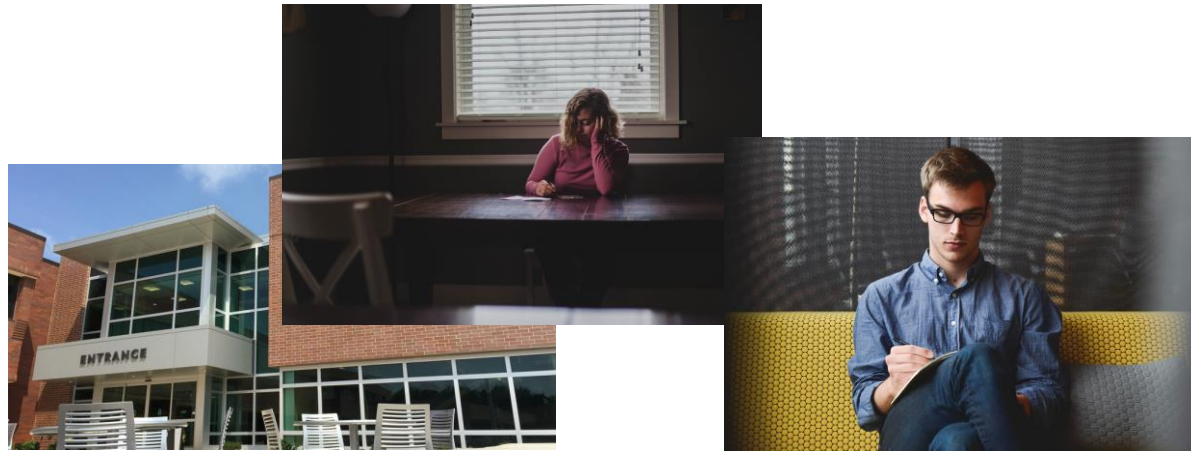
OBJECTIVES

- Participants will be able to identify the early warning signs of First Episode Psychosis.
- Participants will be able to recognize the benefits of a shorter duration of untreated psychosis and the impact on long-term outcomes, such as graduation and employment.
- Participants will be able to identify the various components and eligibility criteria for best practices in Coordinated Specialty Care for First Episode Psychosis programs.
- Participants will be able to identify Coordinated Specialty Care for First Episode Psychosis programs in Ohio.

EDUCATION & MENTAL ILLNESS

EDUCATION & MENTAL ILLNESS

- Most young adults desire to pursue educational goals
- Attending school is developmentally appropriate for this age group
- A first episode of psychosis often disrupts academic work, contributing to poor performance and high drop out rates



Hartrey et al., 2017

EDUCATION & MENTAL ILLNESS

- According to SAMHSA, in 2018, approximately 2.6 million emerging adults exhibited signs of severe and persistent mental illness in the previous year
- Suicidality and major depressive episodes have increased over the last decade
- 40 percent of college students are students of color



Ojeda, et al., 2019; The Steve Fund & JED, 2017

BARRIERS TO PURSUING EDUCATION

- ***Psychiatric symptoms*** can be a significant barrier to completing educational program
- Students experiencing these problems ***underutilize*** campus counseling services
- Students with psychiatric disabilities often feel ***stigmatized*** by faculty and students
- Sometimes must face their own stigma



EDUCATION & MENTAL ILLNESS

Universities and Colleges

- Campus services are sometimes **challenged** with how to support students with severe psychiatric challenges
- ...due to the effects these conditions can have on motivation, concentration, and social interactions
- ...as a result, many students have little contact with school personnel to coordinate supports to assist the students in meeting educational objectives



Salzer, Wick & Rogers, 2008

BUILDING A BRIDGE...

When do the first signs of mental illness begin to manifest?



FIRST EPISODE PSYCHOSIS

FIRST EPISODE PSYCHOSIS BASICS

- Often begins when a person is in their late teens to mid-twenties – ***College-aged***
- Three out of 100 people will experience psychosis at some time in their lives
- About 100,000 adolescents and young adults in the United States experience a first episode of psychosis each year



FIRST EPISODE PSYCHOSIS

- Refers to the first time someone experiences psychotic symptoms or a psychotic episode
- Commonly referred to as FEP
- The word **psychosis** is used to describe conditions that affect the mind, where there has been some change in perception of reality



FIRST EPISODE PSYCHOSIS BASICS

- People experiencing a first episode of psychosis often do not understand what is happening
- Symptoms can be disturbing and unfamiliar, leaving the person confused and distressed
- Psychosis affects people from all walks of life



RECOGNIZING EARLY PSYCHOSIS

- Social withdrawal or self-isolation
- Sudden decline in grades or school performance
- Expressions of extreme fear, including sudden reluctance to attend specific events or leave a dorm-room or apartment
- Uncharacteristic and unfamiliar actions or statements, including sudden aggressiveness or secrecy that cannot otherwise be accounted for

RECOGNIZING EARLY PSYCHOSIS

- Sudden and pronounced obsession or preoccupation with narrow themes or topics, reflected in student's academic work;
- Clear changes in sleep patterns, personal hygiene, or eating habits;



- Over-dressing (i.e. wearing cold-weather clothes or multiple layers, in warm or hot weather);
- Difficulty getting to or staying in class, doing homework, completing assignments.



DURATION OF UNTREATED PSYCHOSIS (DUP)

How Duration of Untreated Psychosis is measured varies:

- Time between the onset of first-episode psychosis and first adequate treatment
 - Antipsychotic medication,
 - Psychosocial treatment,
 - Contact with treatment services,
 - First hospital admission after the onset of psychosis

DURATION OF UNTREATED PSYCHOSIS (DUP)

- Longer DUP:
 - Poor general symptomatic outcomes
 - More severe positive and negative symptoms
 - Lesser likelihood of remission
 - Poor social functioning
 - Increased treatment resistance

DURATION OF UNTREATED PSYCHOSIS (DUP)

- Shorter DUP:
 - More favorable course of illness
 - Reduced rates of hospitalization
 - Better overall functioning
 - Lower economic costs on patient, family, society

BEST PRACTICE INTERVENTIONS

- Coordinated Specialty Care for First Episode Psychosis (CSC)
- Family education and support
- Pharmacotherapy
- Cognitive Behavioral Therapy for psychosis
- Supported Employment and Education



FOR WHOM IS FIRST APPROPRIATE?

Eligibility Criteria

FIRST is most appropriate for individuals who are:

- between 15-40 years of age;
- diagnosed with schizophrenia, schizoaffective disorder, schizophreniform disorder, or other specified/unspecified schizophrenia spectrum and other psychotic disorder
- experiencing no more than 18 months of psychosis (treated or untreated); and
- Willing to consent to participate in at least two treatment modalities



**ACCOMMODATIONS
IN SECONDARY
EDUCATION**

ACCOMODATIONS IN HIGHER EDUCATION

- Americans With Disabilities Act
- Rehabilitation Act

Intended to protect people with disabilities from discrimination in higher education and ensure essential supports and accommodations are offered



ADA CONSIDERATIONS

- Disclosure leads to accommodation – disclosure leads to discrimination
- Social distancing and stigmatization
- Many students must battle societal red-shirting



Timmerman and Mulvihill, 2015

Accommodations - ADVISING



Permission for a friend, family member or other ally to accompany the student to meetings in which such an individual would not typically be allowed



Why?



Having an ally in the room might help diminish social anxiety, feelings of paranoia or other symptoms

Accommodations



Early registration for or preferential placement in internship or practicum of choice



Why?



Helps ensure that student has access to the internship site most likely to be conducive to their success

Accommodations



Building specific accommodations into an action plan



Why?



Specific accommodations may prevent a particular behavior from happening; for instance, addressing or reducing triggers that make it harder for the student to control their reactions or behaviors when stressed or dealing with disruptive voices or paranoia

Accommodations



Ability to freely come and go, stand up, sit in an optimal place (preferential seating) or engage in other activities to stay alert



Why?



Staying active and/or taking breaks may help with concentration, attention and/or fatigue

Accommodations - GROUP PROJECTS



Substituting an individual project for a group project



Why?



Voices, feelings of paranoia and other symptoms can also render participation in a group project very difficult; some students may find it far easier to manage an individual project and such alterations are unlikely to alter the essential requirements of the course

CULTURAL HUMILITY

Psychiatry must learn from anthropology that culture does considerably more than shape illness as an experience, it shapes the very way we conceive of illness.

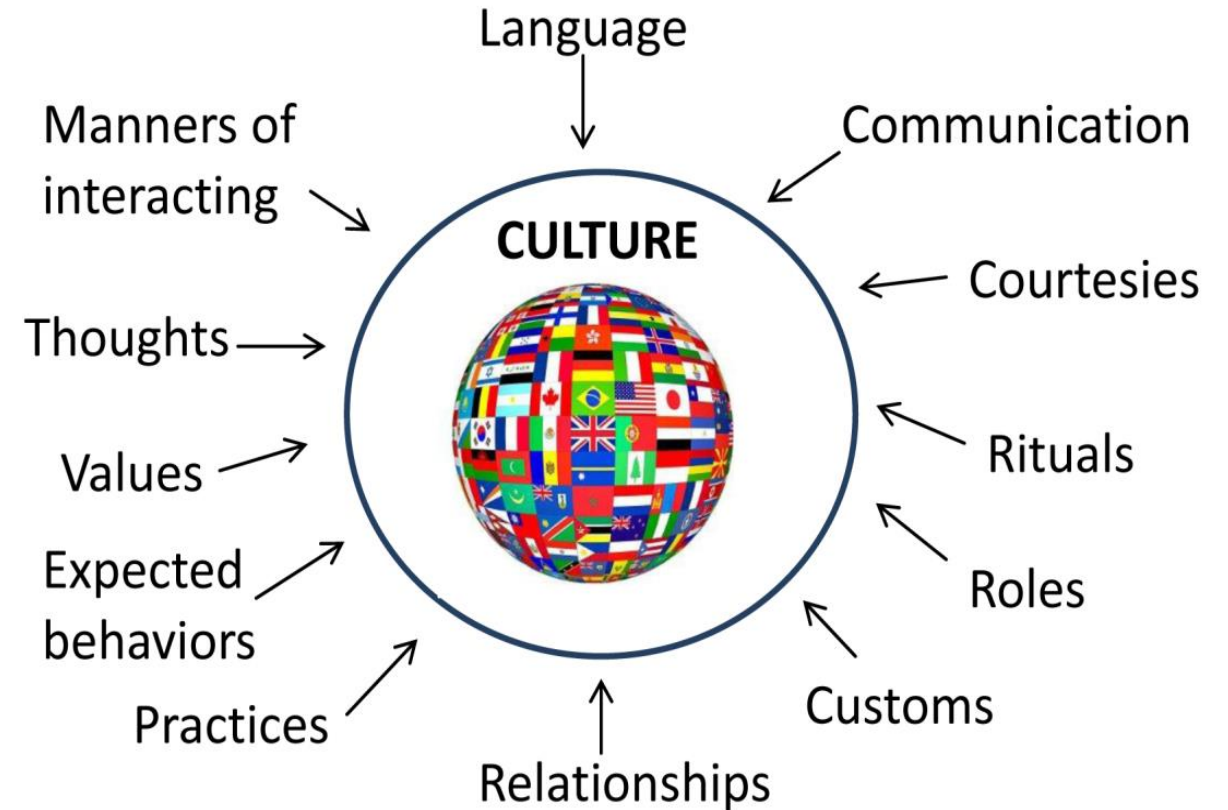
Arthur Kleinman, psychiatrist and anthropologist

(by way of Justin A. Chen, MD, MPH)



CULTURAL HUMILITY

The ability to maintain an interpersonal stance that is other-oriented (or open to the other) in relation to aspects of cultural identity that are most important to the person.



CULTURAL HUMILITY

Three factors:

Lifelong commitment to self-evaluation and critique

Fix power imbalances

Develop partnerships with advocacy individuals and groups

DEVELOP PARTNERSHIPS

- **Cultural humility is larger than the individual self**
- Community and groups can have a profound impact on systems
- Advocacy within the larger organizations that you work in



Advocacy & Humility

BUILDING A BRIDGE...

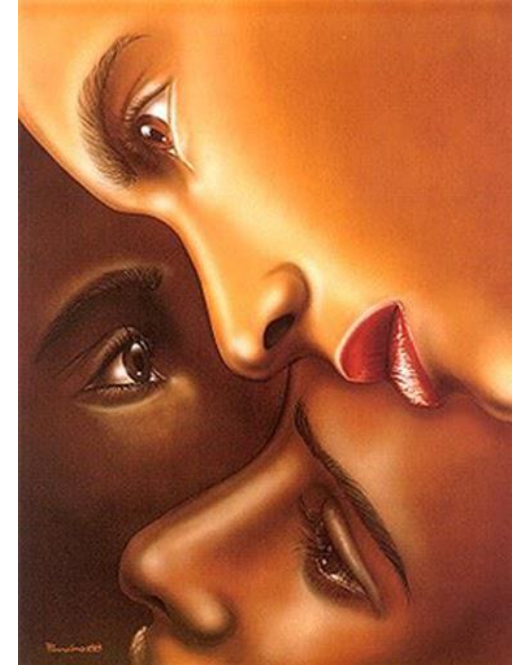


HikingArtist.com

RESPECTFUL AND CURIOUS ENGAGEMENT



- Open-ended questions and follow-up
- Willingness to learn from the individual
 - Learn their stories
 - Recognize how their understanding of psychosis fits into their experiences and expectations



**Ask what their experience is living in this current culture – but do your homework first.
Don't make your student be the teacher for all things in their culture**

HEALING SPACES



“A client of ours is of Pacific Island descent. The client believes in reincarnation. Her narrative involves a story of conflict with Japanese ancestors.”

What can we do?

HEALING SPACES

Validate the student's experience

Approach with cultural humility and openness

Create healing spaces within the context of their belief system

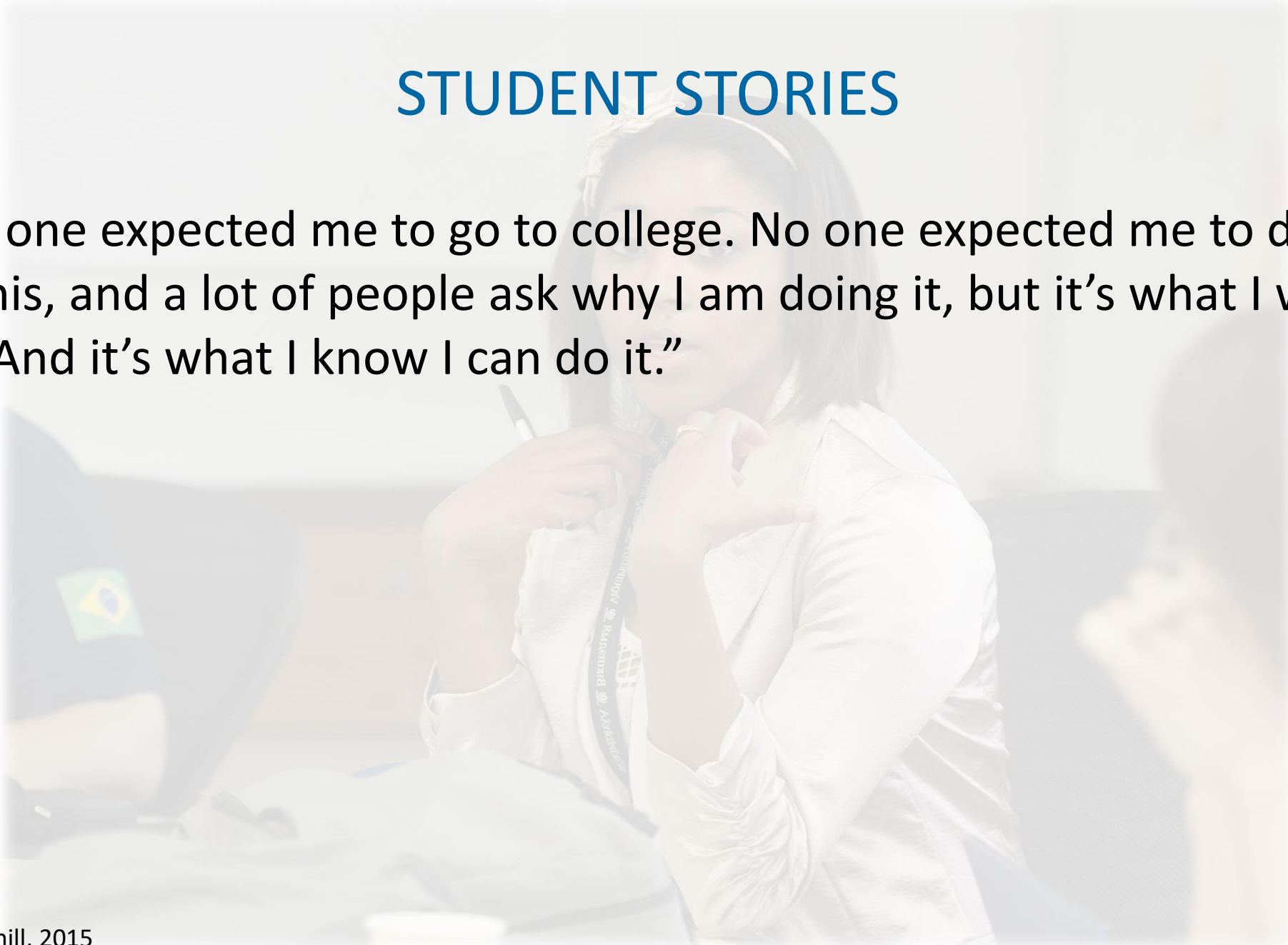
STUDENT STORIES

“I don’t anymore, I used to fight it (prior apprehension to apply for accommodations) , like I said, when I was younger, I would fight everything, and now it’s like no – if you’re going to give me something, to make it better, do it, because I want to be as successful as everyone else. There’s no reason I can’t be.”

Timmerman and Mulvihill, 2015

STUDENT STORIES

“No one expected me to go to college. No one expected me to do any of this, and a lot of people ask why I am doing it, but it’s what I want to do. And it’s what I know I can do it.”



Timmerman and Mulvihill, 2015

FIRST EPISODE PSYCHOSIS PROGRAMS



To make a First Episode
Psychosis program
referral:

<https://mha.ohio.gov/Health-Professionals/About-Mental-Health-and-Addiction-Treatment/Early-Serious-Mental-Illness/Early-Serious-Mental-Illness-Project-Contacts>

EARLY PSYCHOSIS MENTAL ILLNESS TREATMENT LOCATOR

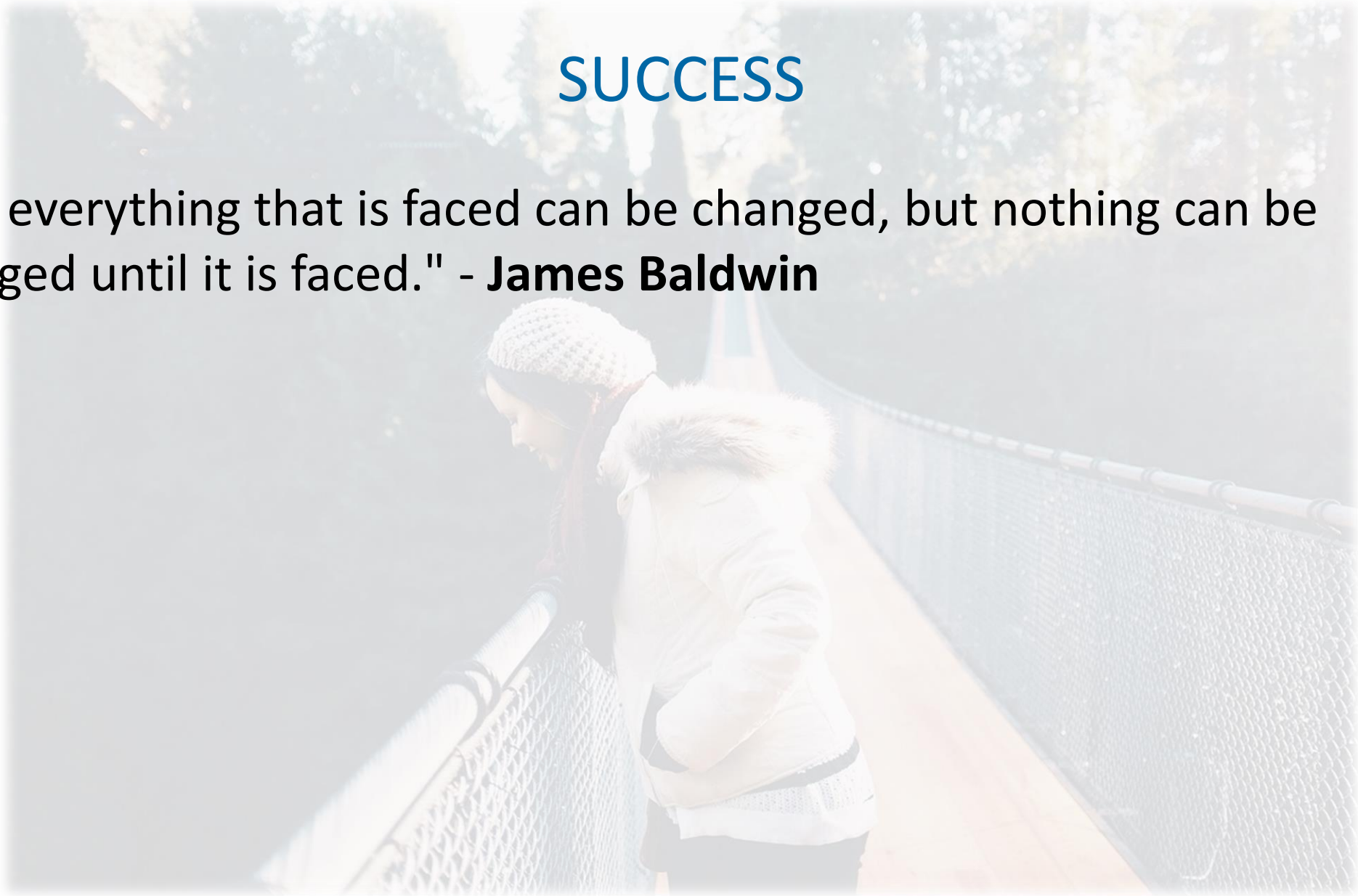
Substance Abuse and Mental Health
Administration (SAMHSA)

<https://www.samhsa.gov/esmi-treatment-locator>



SUCCESS

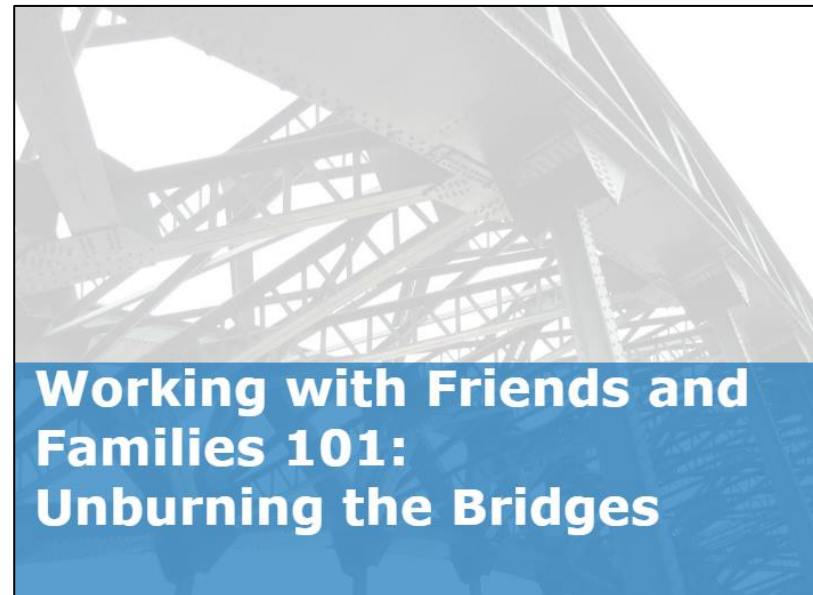
"Not everything that is faced can be changed, but nothing can be changed until it is faced." - **James Baldwin**



First Episode Psychosis: Working With Friends and Families 101: Unburning the Bridges

An online training resource

- Self-paced convenience
- Practical information and skills
- Stories of hope and inspiration
- Information-sharing guidelines



- Free continuing education
- Interactive learning opportunities
- Real-life case examples
- Downloadable resources



Register for this two-part course:
<http://www.ebasedacademy.org/lms/>



Promoting Innovation. Restoring Lives.
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MORE INFORMATION

For further information about FIRST and other best practices for schizophrenia treatment contact:

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Resources

- Strong365: <https://strong365.org/>
- Hearing voices network: <https://www.hearing-voices.org/>
- ACT for psychosis: <https://contextualscience.org/>
- Open Minded Online:
<https://openmindedonline.com/portfolio/engaging-with-voices-videos/>
- Equity in Mental Health Framework Toolkit: <https://equityinmentalhealth.org/toolkit/>

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