

College Students and Mental Illness

Case Study

After a meeting of your student group, Karen, a socially awkward student you don't know very well, comes up to you and says "my mom needs to talk to you...here's her number. Can you give her a call?" You are caught off-guard by the interaction and are running late to your next meeting so say "Uh, yeah...sure." You call a little later and Karen's mom says "I'm worried about my daughter fitting in with the other kids at school. Please don't tell anyone, but she was diagnosed with learning disabilities and Asperger's disorder. She is fine, but needs some help getting along with others. She really loves your organization. Please let me know if she has any problems and call me [she gives you her cell phone number]." You weren't quite sure what to say, so you agreed and thought you'd talk to your group's advisor.

As the semester unfolds, you notice Karen is having trouble adjusting. She has quickly become the person in your group that all the other girls pick on. They tease her about not getting any dates and have had several boys talk to her just so they could laugh at her. You have tried to keep things down with the teasing, but Karen doesn't make it easy. She butts into conversations that don't involve her, dresses out of fashion and most recently has not been showering or washing her clothes, resulting in the other group members beginning to tease her about the smell.

You also know that she has been having difficulty in her classes and that she asks strange questions in class that are immature, off-subject and are also a source of teasing for other students.

Who should you involve? Should you call her mother?

What are some of the qualities of Asperger's disorder that are contributing to the situation?

What are some of the ways you can work with this student?

Processing Questions

- 1) Most college students who use counseling come in for issues related to adjustment, depression or anxiety. The vast majority of students who are seen in counseling tend to feel better and stay an average of 5 sessions. Our biggest challenge in college counseling is getting people who are having problems to make that first appointment.

List some ways that you could encourage students in your organization that would benefit from counseling to feel more comfortable making that first appointment.

- 2) Students who experience learning disabilities often have had Individualized Education Plans (or IEP's) when in high school. Some make the decision to try college with a "blank slate" and see if they can handle the classes without special accommodations.

How would you go about helping a student in your club or organization access special accommodations in the classroom?

- 3) Some students have trouble adjusting to college and what once was homesickness may quickly turn to depression or anxiety. You may notice students keeping to themselves, avoiding contact with others or suddenly changing the way they use to interact as part of your organization.

Discuss some ways to begin a conversation with a student in your organization about these issues. How might you point them towards help?

- 4) The main purpose and goals of any club, group or student organization are often stated in their mission statements. When a student in your club, group or organization begins to experience difficulty as a result of their mental illness, it may be difficult to stay on topic or run your meeting effectively. For example, a student with borderline personality disorder may frequently argue with other group members, have dating relationships with several member at once leading to fights and arguments and generally seem invested in keeping your meetings from running smoothly.

What are some ways you can address the problem with the student while staying on task for your meetings goals and showing care and respect for their difficulties?

- 5) Mental Illness isn't well portrayed in the media. We see schizophrenic serial killers on *CSI* and *Law and Order*. We see split personalities on *Fight Club* and *Me, Myself and Irene*. In the same way high school isn't *The Hills* or *The OC* (sorry to disappoint), mental illness isn't always what we see on TV and the media. In reality, one way to view mental illness is to think of the quirks and traits we all have had at some point in our lives – from the paranoia of driving back to our house to make sure the iron/oven was off to triple checking if you really locked your car, from the deep sadness you feel after a relationship ends to the anxiety you feel if you haven't prepared well for a test.

For most, Mental Illness is the same as these feelings, but the **volume and frequency** of these emotions, thoughts and feelings are much, much higher. Where you might experience depression for a few days, a depressed person experiences it for months. Where you might worry about not knowing anyone at a party, a socially phobic person won't leave their room for days.

What are some of the things that you previously thought about mental illness that you have since learned are not true?

- 6) Sometimes when you do all the right things – set boundaries, explain things clearly and calmly to others, encourage positive group interactions – things still remain difficult in your club or organization.

What are some of the resources available on your campus that you can turn to if you are not having any success in working with a difficult student situation in your group?

- 7) Adjustment problems are different from major mental illnesses in that they often have a clear environmental cause (breakup, moving away from home, death of a loved one, difficulty with a class). While some of the symptoms need to be taken seriously and are potentially severe (depression and suicidal feelings, anxiety and panic attacks) adjustment disorders are usually easily treated.

Discuss some ways you may work with a student who is experiencing an adjustment disorder (feeling homesick, having trouble keeping up with academic work).

- 8) You've noticed a student in your group who always seems to leave to go to the bathroom right after eating. This happens every time your group has pizza, goes out to a restaurant or has been on a retreat. After one meeting, another member in the group comes to you during the end of year pizza party and says, "You know Shelly? I just heard her throwing up in the bathroom. What should we do?"

What are some of the things you would want to do to try to help Shelly? If Shelly does have an eating disorder, what would be the best way to talk to her about this?

- 9) A student in your group has really high energy times where they volunteer for lots of activities, want everyone to work together and has trouble following through with all the things they promise to do. Other times, this group member seems very sad and depressed, looks poorly bathed and is barely able to function.

What might be the mental health problem this group member is struggling with? What are some ways to work with them as they try to cope with their illness?

- 10) A member in your group makes the statement "I know all about mental illness from my psychology class – and I think it's just a bunch of crap. People just need to get over it and work hard like the rest of us feel better. If they can't, maybe they shouldn't be in college."

How would you want to approach this statement to the group (knowing that there are likely several members of any group or organization that either suffer from mental illness themselves or know someone in their family who does)?