

Inclusive Public Safety Advisory Committee Meeting

November 11, 2022

11AM-12:30 PM (Zoom and in person)

Agenda:

- Welcome and Aims for Our Time
- Student Well Being Survey Data Overview
- Best Practices Supporting Students of Concern and Their Well-Being (Joseph Greenwell)
- Public Safety Approaches, Training to Support Students Experiencing Mental Health Distress (Gerald Lewis, Patrick Oakley, Matthew Patashnick)
- Discussion

Welcome

Josef opened the meeting by welcoming attendees and introducing new member Maureen Lamas. He announced the resignation of Coco Tairuku.

Aims for Our Time

From the previous meeting, we will focus today on thinking through student mental health challenges and solutions. We are thinking about this in the context of Public Safety, namely:

- Review of procedures
- De-escalation strategies
- Enhance University's approach (wellness checks)
- Preventive approaches

Student Well Being Survey Data Overview (Ixchel Rosal)

- In 2018, University Life started this survey in order to assess where students are thriving, where they face challenges.
- It identifies trends, highlights areas of concerns
- The Student Well-Being Survey is composed of three parts, each of which tie to University Life's core values of community citizenship for our students:
 - Campus community (Inclusion and Belonging)
 - Mental health and well-being (psychosocial well-being and mental health symptoms (Well-Being)
 - Gender-based misconduct experiences (Sexual Respect)
- For the purposes of the Committee's work, the discussion will focus on overall health and well-being pieces of survey
- The Survey was designed specifically for Columbia's student community – conducted in 2018 and 2020.
- University Life will administer it again in 2024 (in partnership with Columbia Health and CUIMC Student Health on Haven)

- In the 2020 survey, approximately 9,000 students responded. The response rates ranged from 26%-52% at different schools (Mailman had the highest rate).
- The 2020 survey told us that students generally feel supported and connected. It's important to note that, since then we have gone through a pandemic (which amplified students' needs for connection and belonging) and student needs have increased.
- Students screened positive for mental health challenges at comparatively lower rates than national trends
- Need for additional research and support post-pandemic – national trends of increased needs

Joseph Greenwell: Best Practices Supporting Students of Concern and Their Well-Being

- Well-being is a core value of the institution.
- Efforts underway on many fronts to ensure students know about resources, communication re: how to engage with resources.
- Monthly well-being messages are sent to students.
- University Life reaches out proactively to communities that are impacted by crises (natural disasters, etc.)
- University Life partners with others to organize events and activities that are centered around well-being, help around resilience – and to encourage students to take a break from academics/stress
- Convene Student Mental Health Working Group regularly to share information across University (expertise around student well-being, “think tank”)
- The office formerly known as Student Conduct and Community Standards has been reorganized and named Center for Student Success and Intervention (“CSSI”), in recognition of underlying matters that lead to or influence student behavior (eg., often mental health challenges, basic needs can get in a way of a student's ability to make sound decisions).
- CSSI aims to connect students to resources to overcome barriers to their success and thereby provide holistic support. CSSI is starting with one Case Manager – with a goal of growing and expanding over time.
- Implementing **The Blue Folder** – best practice from other institutions, which will provide information for faculty and staff who are concerned about a student. The resource provides indicators of a student in distress, ways to respond, where to go/where to refer.
- The Blue Folder will be shared in December (at that time we will share a link with the group)
- Wellness checks for students – imperative that Public Safety play a role, given their expertise in threat assessment and to manage these situations. They are also trained extensively on de-escalation strategies. Models vary on different campuses, different best practices. Fortunate to have PS rather than a police department, which changes the dynamic in a wellness check.
- There are other best practices in which a social worker accompanies Public Safety/campus police. Columbia had a similar model previously in which a Public Safety officer was accompanied by a Student Affairs professional from the student's school. It is similar concept, to help with de-escalation and provide a “face of student affairs” - partnership
- Acknowledgment that student wellness checks are some of Public Safety's most difficult work – how do we also support everyone doing this work (provide training, etc.). It's an important question.

Public Safety Approaches, Training to Support Students Experiencing Mental Health Distress (Patrick Oakley, Gerald Lewis, Matthew Patashnick)

Review of mental health policy/practices and de-escalation strategies

- In 2018 Public Safety and residential life implemented a response protocol for CC and SEAS residents. The process and protocol for these schools were discussed in detail, including how Public Safety works with RHD to better understand a student's circumstances, and what action steps to take, up to and including possibly calling 911 or transporting a student to a hospital if there is an imminent health or safety risk.
- There was an additional discussion about some of the differences between policies and protocols for CC/SEAS with General Studies and Graduate students, and the important roles that Deans may play in those instances, given that residential component is distinct.
- Thoughts about how Public Safety shared a robust set of ideas about the possible ways in which policies over time might be updated for all students, including but not limited to: process for their response, specific language updates within policy documents, possible partnerships in response with Student Affairs professionals as well as staff and RHD training opportunities.
- University Life shared that, from a Student Affairs perspective, work has been done to bring together all of the people doing this work to share best practices and protocols – working group convened, recommendations were made, will roll out those recommendations, which will create a more consistent experience across schools.

Wellness Checks – non-emergency (CC/SEAS)

- Relationship with undergraduate students and residents: more access to these students, opportunity to intervene early.
- Nuances and work with Public Safety – resources to help intervene before Public Safety is needed, to avoid emergency situations.
- What elicits a decision to respond to a request for a Wellness Check: Concerns from parents, professors, advisors; concerning social media post, student missing work or class, etc.; natural disasters, death in family or similar circumstances).
- Understand needs, assess who is the best person to do the Wellness Check (eg. might it be their Residential Advisor, a professional staff member, a Zoom check-in, etc.) to make contact and engage with the person and assess their well-being.
- Students usually appreciate wellness checks and the opportunity to talk with someone from the school (eg. to discuss how their academic success might be affected, etc.).
- Public Safety is not involved in all Wellness Checks.
- Number of Wellness Checks has increased since 2013-14, peaked during 2018-19.
- Is there a rubric/screening for Wellness Checks? – No, we just look at student history and deploy/make contact in order to assess the next step.
- Wellness Checks for varying levels of concerns – not always an emergency situation.
- Goal is to sensitively ask as many questions as possible – look for history and academic performance – dispatch the right person based on level of concern and any prior knowledge
- Goal is to accommodate student's private space, not be overly intrusive – but this might look different in an emergency situation.
- Make sure students feel connected during life stressors as well as mental health episodes.

Data

- Committee members reviewed data on Wellness Checks, and discussed the desire to see a breakdown of trends during specific time of day/time of year in order to understand the times when more resources should be available (pull up more high-level reports). When should we have more people on call/more resources available? Analyze patterns.
- Data is only reflective of undergraduates – CC/SEAS students
- Data suggests a steady increase – does this reflect more staff? More stressors?
 1. Gatekeeper training – empowering staff (Core instructors) to intervene/address students of concern
 2. Orientation changes
 3. Students with positive wellness check interaction are likely to reach out.
 4. Creating a culture where people can ask for help.
- How to use numbers to expand beyond undergraduates?
- Data on how students respond to incidents that happen in the community - shootings, crime in NYCHA houses, etc. Do these cause a spike in calls?
- Decentralized, but important to create a centralized data bank to analyze responses across University

Possible approaches

- Emotional support dogs:
 - Great support and tool to unite community to Public Safety
 - Similar programs on other campuses have been well-received by students
 - Can assist people experiencing mental health episodes
 - Can we do a Beta test at Columbia?
 - Using a medium, like an emotional support dog, allows more openness to mental health/Wellness Checks
 - Would this also work at the medical center?
- Creating new protocols can increase workload at schools – concern about burden, especially at under-resourced schools – can we increase centralized support – financial and/or workload support? Increase capacity at schools so that all can benefit
 - CSSI is aiming to alleviate some of the strain on the schools
- Burden of cost can be a deterrent to getting help
 - Allocated central funds to start some of these programs
 - Hospital costs should be covered by insurance
 - Make possible costs more transparent
- Can there be people trained on campus to be dispatched – equitable solution across campus – for students who do not live in the residence halls, as well as others on campus
 - NYC has “B Heard” program in certain zones/precincts – not all campuses are covered, they are dispatched on some mental health calls but not all, not resolved as quickly
 - Public Safety would welcome a designated advocate/person to respond to some of these populations (General Studies, Graduate students), especially after-hours
 - Practical early career opportunities for Social Work students – students in training could be helpful in this space, create a surplus of trained and educated folks that can participate in responding to these incidents
 - Community health is an important tool/initiative- clinicians are busy and do not always follow up – important to have continued interactions/a familiar face

- Concern that some of these cases can be life impactful on the person that responds – there can be surprising outcomes/can be a trauma inducing space for students in the field