

## **Review of the Yale College Council Report on Mental Health April 2, 2015**

### **Introduction**

On Thursday, April 2, YCC President Michael Herbert, Vice President Maia Eliscovich Sigal, Chief of Staff Joseph English, and University Services Director Madeline Bauer met with Yale College Dean Jonathan Holloway and Director of Yale Health Paul Genecin, MD, to discuss the status of the YCC's recommendations from the 2013 Report on Mental Health. This meeting came in response to the Mental Health Open Forum hosted on February 25. Of the 15 recommendations in the report, the six relevant to Yale Health were reviewed and their status is reported here. They are organized as they are in the report. In particular, during the meeting we focused on communication on scheduling and the specifics behind hiring additional staff.

### **Peer Resources**

*Recommendation: Improve representation and discussion*

In the report, the YCC called for the creation of a visible body to advocate, publicize, and work to improve mental health and well-being on campus. With the creation of the Coalition for Mental Health and Well-Being last year, this recommendation has been **accepted** and **implemented**.

*Recommendation: Centralize Information*

To help students navigate mental health resources, the YCC called for a public and easily accessible compilation of them. In addition to the resource sheet available on the homepage of the YCC website, Secretary Goff-Crews's office is working on a comprehensive resource network and wellbeing website; details will follow. The recommendation has been **accepted** and **is being implemented**.

### **Institutional Resources**

*Recommendation: Communication on Scheduling*

In response to pervasive complaints about telephone scheduling, the YCC recommended allowing email appointments. This recommendation has been **accepted** and **will be available to students starting in Fall 2015**. Phone appointments will remain an option as well.

*Recommendation: Communication with Patients*

To improve the experience of students at Mental Health and Counseling, the YCC recommended various changes regarding intake appointments as well as an easy, accessible, well-publicized way for students to provide feedback. The recommendations regarding intake appointments were **accepted** and **implemented** with success. This reality is seen in the fact that since implementation, fewer students have changed counselors.

The recommendation regarding feedback solicitation is important, and could help bridge the divide between students' experiences and MH&C practices. For example, direct, easy feedback could have exposed the pervasiveness of misinformation regarding the twelve appointment cap,

and it could have been corrected faster. Although all parties agreed that feedback should be improved, specifics are not determined; in the interim, students can contact Dr. Siggins directly with comments or questions at [lorraine.siggins@yale.edu](mailto:lorraine.siggins@yale.edu), which she encouraged us to do at the Mental Health Open Forum.

*Recommendation: Communicating with the Student Body*

The YCC recommendation on improving communications with students in general was somewhat vague, but broad agreement exists that the Mental Health Fellows can be publicized better. No concrete steps were agreed upon at the meeting; suggestions for improvement are appreciated and can be directed to [ycc@yale.edu](mailto:ycc@yale.edu).

*Recommendation: Hire Additional Staff*

On February 19, Dr. Genecin sent a campus-wide email announcing that Yale would be “hiring more psychologists, psychiatrists, and clinical social workers in order to meet the increased demand for MHC support.” Today we pressed for a specific timetable regarding those additions.

Already, two new clinicians have been added and Dr. Genecin said that MH&C was going to “grow significantly.” However, in order for this step to be taken, it must be approved by the Yale Corporation during its meeting in June. No students will be present at that meeting, nor any other meeting of the Corporation for that matter. Instead, on April 17, YCC leadership will have brunch with either two or three Fellows of the Corporation. During that meeting, we pledge to advocate for additional personnel as strongly as we can.

Specifics regarding personnel additions should be available shortly after the Corporation meeting in June. For now, however, the proposal has been **accepted**, but the full extent of its implementation is not yet known.

*Recommendation: Coordinate with Therapists Outside MH&C*

To help mitigate delays, the YCC proposed either encouraging some students to seek therapy outside of MH&C or, more dramatically, to allow Yale Health Insurance to cover students seeing therapists outside Yale Health. Although this proposal was not outright rejected, concerns exist over its feasibility and efficacy.

Because only about twenty percent of students are on the Yale Health Plan, the proposal’s impact would be limited. Its cost, however, would be extremely high, and the proposal is further complicated by the small number of mental health providers in the New Haven community. Additionally, many of these providers do not accept health insurance.

We are hopeful that, with added resources coming to MH&C, this proposal will become unnecessary. However, the YCC, Coalition for Mental Health and Well-Being, and Yale Health will continue to evaluate the efficacy of the measure. No plans for its implementation exist at this time.

## **Conclusion**

We are grateful to Dr. Genecin and Dean Holloway for their willingness to sit down and engage directly and substantively with us regarding the YCC report. We hope this document will help clarify for students the steps that have been and are being taken, as well as the obstacles to certain proposals.

Improving mental health cannot be completed exclusively by policies from our administrators; we must also remember to look out for each other and promote a culture of wellness and free of stigma, a considerable focus of the YCC report.

Lastly, the meeting did not cover leave of absence and withdrawal policies; these are outside the purview of Yale Health, but an announcement regarding recommended changes to those policies will be available by the end of the year.