Completion Report Form
for
Perkins Title I, Program Improvement, and Leadership
Strategies and Projects

One report should be completed for each strategy or project.

A. Campus  Honolulu Community College
B. Strategy Title: Mental Health Graduate Assistants
   Proposal No.: HON2012/13(1)-T1-03
C. Proposer Name: Kimberley Gallant   E-mail: gallantk@hawaii.edu

D. Project Description (from approved proposal, abbreviated)
   The requested Perkins funds were used to provide stipends for two UHM students in the
   Master of Social Work program. MSW students are required to complete internships that
   involve significant time commitments. Other organizations are able to attract good students
   to their internships because of the possibility that they will lead to full-time positions after
   graduation. HonCC is not in a position to offer such a potential benefit to attract interns.
   Offering a paid internship enables HonCC to attract a larger pool of potential interns and to
   retain them.

   The interns working with this grant were responsible for the following:

   i. Developing a data gathering process for CTE student and program need for
      mental health counseling services.
   ii. Gathering data from various sources (including interviews with faculty).
   iii. Developing a sustainable mental health program for selected CTE programs
        (based on need and faculty involvement).
   iv. Monitoring the outcomes of the programs, and revising them as necessary based
       on those outcomes.

E. Activities Planned/Completed (Add/Delete lines as necessary)

<table>
<thead>
<tr>
<th>Activities Planned (from proposal)</th>
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</tr>
<tr>
<td>Screened and selected two interns</td>
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</tr>
<tr>
<td>Program planning and data gathering</td>
<td>Completed</td>
</tr>
<tr>
<td>Pilot test program with four CTE programs</td>
<td>Completed</td>
</tr>
<tr>
<td>Evaluate and revise program</td>
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F. Performance Indicators Addressed, Effectiveness Measures, and Expected Outcomes
<table>
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<tr>
<th>Performance Indicators, Effectiveness Measures, Expected Outcomes (from proposal)</th>
<th>Results</th>
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<tr>
<td><strong>1. Number of crisis counseling incidents</strong> (baseline will be all incidents, with data gathered during the project year to develop a CTE-only baseline)</td>
<td>A total of 234 CTE related contacts/incidents were identified 2012-2013 academic year. Of this number, 75 were identified from the CTE programs working with this grant. Note: One student could have multiple contacts/incidents with the MHWO.</td>
</tr>
<tr>
<td><strong>2. Number of faculty/staff counseling requests related to student issues</strong> (CTE-only baseline to be established in project year)</td>
<td>6 CTE faculty working with the grant referred students to the MHWO. Three of the six faculty referred between 1-3 students and the remaining three made between 4-6 referrals to the MHWO during the 2012-2013 academic year.</td>
</tr>
</tbody>
</table>
| **3. Retention of CTE students in pilot year programs** (semester-to-semester retention will be possible to measure beginning in Fall 2013) | ABRP- Spr. 2013- 75% retention rates Fall 2012-. 41%  
CARP- Spr.2013- 65%  
Fall2012- 31%  
COSM-Spr.2013- 64%  
Fall2012- 35%  
RAC-Spr.2013 - 76%  
Fall 2012- 43%  
WELD-Spr.2013- 68%  
Fall 2012- 46% |
| **4. Survey-based measures of faculty assessment of project effectiveness** (Likert-based scales), to be supplemented with qualitative assessments of project operation. | The survey suggest that the faculty strongly agree that the class presentations and enrichment groups (MHWO interventions) were a useful way to help support the students in their program. The faculty also strongly agreed to support continued classroom presentations and enrichment groups in their program in an effort to support their students. Lastly, the faculty also identified that they would like to receive more training on mental health and wellness issues. |
5. Number of nontraditional students retained (if applicable to pilot programs). Data not available at this time.

G. Impact (qualitative and quantitative)

The quantitative data collected from this project found the following:

An decrease in the number of faculty referral from 33 in 2011-2012 to 21 in 2012-2013 (six referrals were from identified CTE programs working with this grant.)

An increase in the number of student contacts/incidents with the MHWO from 100 in 2011-2012 to 294 across the college campus during the 2012-2013 academic year. Of this number, 234 were identified to be from the CTE programs and 75 from the Perkins CTE programs.

A more comprehensive report of both qualitative and quantitative data can be found in the narrative report attached to this document.

*Project Effectiveness Measures/Outcomes:*

This pilot project enabled the wellness team to collect extremely rich data. The CTE students and faculty who participated in this project provided great insight into "the life and experiences" as a Hon CC college student. All of the students were open, honest, and thoughtful when sharing about their personal experiences related to their academic journey, academic success and mental health and well-being. In addition to disclosing personal information, the students also identified solution-focused ideas to continue to support their academic progress and personal growth and development and emotional well-being while a student at this institution.

The knowledge and awareness of services on campus helped students to take steps to improve their overall health and well-being. The personal counseling which was provided by a licensed clinical social worker also helped students to gain a better understanding of mental health related conditions and recognize situations pertaining to their life experiences that may impact their academic success and emotional well-being. Lastly, faculty members in the CTE programs referred more students to the MHWO.

A more directed and proactive approach to CTE programs resulted in improved interpersonal, intrapersonal, and classroom experience for the students involved, contributing to their success. These results substantiate our advocacy for a more proactive approach in addressing mental health problems. This is beneficial especially for those students in CTE program who have required mandatory attendance for the entire instructional day, and those who may be reluctant to avail themselves of services due to fear of stigma (Quinn et al., 2009). A more proactive effort by the team offered assistance in learning how to deal with pressure, and therefore increase their chances for completion. Please review findings in Appendix H.

H. Expenditure Report  *(Suggestion: use original budget spreadsheet and add a column*
to show actual expenses and total). **Be sure to highlight or notate changes from original budget plan.**

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<td><strong>TOTAL</strong></td>
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We over spent the budget by 255.26 in personnel according to the CG financial transaction report- budget summary. The remaining balance was funded by Honolulu CC.
Table of Contents

Project description .......................................................... 1
Activities completed .......................................................... 1
   Phase I .................................................................. 1
   Phase II ................................................................. 2
   Phase III ................................................................. 3
Program Data Findings......................................................... 4
Clinical Findings ............................................................... 7
Recommendations .............................................................. 8
Appendixes ................................................................ 10
   Appendix A Counselor detailed clinical activity ............ 10
   Appendix B Consent form ............................................. 12
   Appendix C Mental health survey ............................... 13
   Appendix D Focus group questions ......................... 18
   Appendix E Pre-post presentation evaluations ............. 19
   Appendix F Enrichment group evaluation ................. 21
   Appendix G Timeline table ......................................... 22
   Appendix H Perkins activity table............................ 23
   Appendix I Perkins CTE survey 2013 ....................... 24
   Appendix J Perkins CTE effectiveness survey .......... 30
   Appendix K Positive Vibe Newsletter .................... 33
   Appendix L Photos of Events/Activities .................. 34

Project description

The Perkins fund provided stipends for two University of Hawai'i Mānoa graduate
students, enrolled in the Master of Social Work program, to assist the counselor during
the academic year 2012-2013 in developing a more strategic and solution focused mental
health and wellness program service. The counselor and the student interns worked as a
team to develop the instruments to gather data and collect them from various sources to
gauge the need for mental health counseling services for CTE students and CTE
programs (Phase I: November-December); a sustainable mental health program for five
CTE programs based on the collected data (Phase II: January-March); and the
administration of the program (Phase III & IV: March-April) and monitoring of the
outcomes of the program to revise where needed (Phase V: March-June).

Activities completed

Phase I

Hiring of two graduate students

Two graduates students from the University of Hawai'i School of Social Work were
hired.
Outreach and identification of CTE Programs

Honolulu Community College offers twenty-five CTE programs some on campus and others at satellite campuses. The counselor and the two graduate interns (wellness team) chose to work with five CTE programs to pilot their efforts. These selected CTE programs were: Cosmetology (COSM), Carpentry (CARP), Auto and Body Repair (ABR), Refrigeration and Air Conditioning (RAC), and Welding (WELD).

Development of data collecting instruments

During this phase, the wellness team developed two instruments (a mental health survey and questions for a focus group), while outreaching to several CTE faculties to select the CTE programs in the pilot mental health program.

Outreach activity/Survey
The mental health survey was administered in the classroom as part of an outreach activity/presentation, aimed at assessing what the students knew about mental health issues, the type of challenges they face, the type of support they receive, and how HCC could offer services that would help them improving their overall learning experience. The team offered 11 outreach activities and reached 174 students. The mental health survey is in Appendix D.

Focus group
The facilitator of the focus groups asked five main questions to the students. These questions in part mirrored the ones asked in the surveys and were intended to give the students the opportunity to elaborate further. The five questions aimed at knowing what the students in the focus group thought about what motivates college students; the challenges that college students face, the support they receive from instructors and other students, how their personal obligations impact their college experience, and what they thought would help students stay in college and graduate. The groups lasted an average of one hour and the participants were given a small gift to thank them for their time. The team offered 12 focus groups. The questions for the focus group are in Appendix E.

Phase II

Data gathering with CTE Programs

The wellness team scheduled 11 classroom visits. Once in the classroom, the team made a presentation about the purpose of the Perkins Grant study, distributed the survey, talked about the MWHO office mission and services. Following completion of the presentation, interested students volunteered to participate in the focus group. The students who volunteered to participate to the focus group were asked to complete consent forms and asked permission to record the group’s conversation. The administration of the survey lasted an average of 15 minutes, and the focus group lasted an average of 1 hour. The team collected 148 surveys, and 116 students participated in the 12 focus groups.

The student interns transcribed the surveys and the recordings of focus groups during December. Through the process of transcription, the student interns identified mental
health and service delivery themes and areas for interventions, and shared their findings with the counselor. Based on these findings, the team worked together to develop a student centered, student focused sustainable mental health program.

Phase III

*Program development*

Based on the data collected, the team developed a program that included in class presentations and enrichment groups, the distribution of a newsletter, and alcohol and drug, and eating disorder displays and tabling events across campus.

*Class presentations*

The team conducted 7 class presentations on mental health and wellness related topics. The presentations, brief psychosocial education introductions on a specific issue, were followed by conversations facilitated by the student interns. The format allowed the team to provide the students with suggestions on how to address and deal with the students’ concerns as well as help them identify campus and community resources. At each presentation, the students were administered pre and post evaluation surveys.

*Enrichment groups*

The enrichment groups were thought as occasions to bring the students together. In a less formal environment, we offered the opportunity to converse about identified mental health and wellness issues raised during the gathering of data or events that affected the campus at the time of the group (i.e. student death). During the groups, we also gathered suggestions on how to improve their college experience, academic journey, and student life in general. Topics discussed included HIV, alcohol and drug use, and stress management. At the end of each enrichment group, we administered surveys for evaluative purposes, available in Appendix G.

*Newsletter*

We created, printed and distributed *Malama your Mind*, a newsletter whose purpose has been to inform students about educational activities and events, and provide information on campus and community resources. We wanted to make it a monthly publication, but due to lack of resources, we could create one and distribute only 100 copies.

*Faculty assessment survey*

Two faculty surveys were emailed to 11 faculty members that participated in the Perkins grant project. The first survey entitled *HonCC Perkins Grant Career Technical Survey 2013* was completed by 5 faculty members although, 10 viewed the survey on-line. The second survey entitled *HonCC Perkins Grant Career Technical Effectiveness Survey 2013* was completed by 3 faculty members.

The survey results suggest that the faculty strongly agree that the class presentations and enrichment groups (MHWO interventions) were a useful way to help support the students in their program. The faculty also strongly agreed to support continued classroom presentations and enrichment groups in their program in an effort to support their students. Lastly, the faculty also identified that they would like to receive more training on mental health and wellness issues.
### CTE Program Data Findings

**HonCC Fall 2011 Cohort CTE Majors Count**  
Initial Semester, 1 and 2 Subsequent Semesters Remaining in Major  
As of Census

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**HonCC Fall 2011 Cohort CTE Majors**  
Initial Semester Students with Degrees and Certificates in Original Major  
End of Semester

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**HonCC CTE Majors**  
Fall 2011 and Spring 2012  
End of Semester

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## HonCC Fall 2011 & Spring 2012
### CTE Academic Status - Probation, Dismissal, Suspension
### End of Semester

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## HonCC Fall 2011 & Spring 2012
### CTE Complete Withdrawals
### End of Semester

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## HonCC Fall 2011 Cohort CTE Nontraditional Majors Count
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### As of Census*

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## HonCC Fall 2012 Cohort CTE Majors Count
### Initial Semester, 1 and 2 Subsequent Semesters Remaining in Major
### As of Census*

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*Fall 2013 uses PRECEN2 freeze*
HonCC Fall 2012 Cohort CTE Majors
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HonCC CTE Majors
Fall 2012 and Spring 2013
End of Semester

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HonCC Fall 2012 & Spring 2013
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End of Semester

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HonCC Fall 2012 & Spring 2013
CTE Complete Withdrawals
End of Semester

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<td>Fall 2012</td>
<td>Spring 2013</td>
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<tr>
<td>CARP</td>
<td>1</td>
<td></td>
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<tr>
<td>COSM</td>
<td>2</td>
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<tr>
<td>RAC</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>WELD</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>

HonCC Fall 2012 Cohort CTE Nontraditional Majors Count
Initial Semester, 1 and 2 Subsequent Semesters Remaining in Major
As of Census*

Clinical Findings

During the 2012-2013 academic year, there were 234 CTE (all programs) related student contacts with the MHWO. Of this number, 75 were from the identified CTE programs working on this grant. The student related contacts were all of a clinical nature and do not include educational outreach and presentations. Across the identified CTE programs, the reason for referral or contact fell into the following categories: death/loss of a loved one, stress/tension, social relationships/interpersonal issues, intimate partner violence, poor symptom management of a diagnosed or undiagnosed mental health condition, health related issues and adjustment to college life. 6 of the referrals were from faculty in a CTE program. Over half of the referral and student contacts fell into the category of a mental health crisis.

A mental health crisis is defined as a non-life threatening situation in which an individual is exhibiting extreme emotional disturbance or behavioral distress, considering harm to self or others, acting disoriented or out of touch with reality, has a compromised ability to function, or is otherwise agitated and unable to be calmed.

Examples of a Mental Health Crisis include:

- Talking about suicide threats
- Talking about threatening behavior
- Self-injury, but not needing immediate medical attention
- Self-disclosure of alcohol or substance abuse
- Highly erratic or unusual behavior
- Self-disclosure of eating disorders
- Self-disclosure of sexual Assault
- Self-disclosure of relationship Violence
- Not taking their prescribed psychiatric medications
- Emotionally distraught, very depressed, angry or anxious
Recommendations

This pilot project enabled the wellness team to collect extremely rich data. The CTE students and faculty who participated in this project provided great insight into “the life and experiences” of a Hon CC college student. All of the students were open, honest, and thoughtful when sharing about their personal experiences related to their academic journey, academic success and mental health and well-being. In addition to disclosing personal information, the students also identified solution-focused ideas to continue to support their academic progress and personal growth and development and emotional well-being while a student at this institution. The students identified the following as type of support and services that would help them while in college

- Academic counselor
- Accessible, responsive, dependable instructors and institutions
- Information on academics before getting into college
- Prep to class
- Security cameras
- Job advisor
- Financial advisor
- Life/ aptitude couch
- Peer group
- Gatherings / Networking
- A safe space
- Hotline
- Mentoring
- More dissemination on what’s going on

- Better food options
- Volunteering opportunities
- Gym
- Have a potluck
- Create incentives with the cafeteria, have free drinks
- Have a wellness competition among different departments
- Dance competition
- Walk for a cause
- Arts and Crafts activity
- HIV testing
- Create a wellness card that could be used for people to attend events and then receive a free meal from the cafeteria or other incentive.

The MWHO would like to continue to offer mental health related programming that will support and increase our students knowledge of wellness related behaviors, positive symptom management, personal safety and well-being.

This programming would include:

1. Classroom Presentations (based on the data collected)

   - Academic pressure
   - Acceptable behaviors
   - Anger management
   - Anxiety
   - Autism
• Body image/weight issues in Hawaii
• Bullying
• Choosing a major
• Coping skills
• Depression
• Drugs
• Fitting in
• Free-stress test
• Harassment
• How to stay healthy

• How to stay motivated
• Obesity
• Parenting
• Peer Pressure
• Recycling
• Relationships
• Sex addiction
• Stress management
• Test anxiety
• Time management

2. Annual Health and Wellness Fair
3. Mental Health Screenings for depression, anxiety, substance use, etc...
4. Campus “Walk for Wellness – which occurs in conjunction with the annual fair
5. Enrichment groups – Art for the Heart
6. Annual Exhibits displayed across campus - (clothes line project, Ohana images, denim day etc…) informational sheets and pictures in appendix

These activities in addition to personal counseling which is provided by the licensed clinical social worker will help students to be able to gain a better understanding on mental health related conditions and recognize and situations that may impact their academic success and emotional well-being. Take steps to improve their overall health and well-being.

Researchers in college mental health (Eisenberg et al.2009) have found that depression, anxiety, and eating disorders are all associated with diminished academic outcomes and recommend that MENTAL HEALTH be a key part of any strategy to improve academic success and completion of college students. Other studies (Koivisto et al. 2010) have also shown that college MENTAL HEALTH services improve vocational students transition from school to work as evidence by less depressive symptoms reported by students.

As you can see from the research, the mental health and well-being of our students greatly impacts their ability to be academically successful in college. It is essential that our campus and the UHCC at large continue to invest in providing mental health services (counseling, outreach and prevention education) to our students to support their academic journey, assist in personal growth and development and progressive steps toward employment. This office directly affects student academic success, college retention and completion and workforce development.
<table>
<thead>
<tr>
<th>Professional Roles</th>
<th>Responsibilities</th>
<th>Tools/Activity</th>
</tr>
</thead>
</table>
| 1. Clinical Consultant | To talk with and or meet with an administrator, faculty or staff members to discuss concerns of students on campus or in their course. These concerns may include academic, social, emotional issues and or mental health conditions that impact student behavior, academic performance and success in the learning environment. | Clinical Consultation Form  
Information Gathering  
Interviewing appropriate parties  
Student Observation  
Student Outreach/Contact  
Follow-up                                                                                                                                                                                                 |
| 2. Crisis Counselor | To provide immediate support and intervention to administrators, faculty and staff who are servicing students who are experiencing a crisis situation. Crisis situations may include: emotional distress, unexpected death of someone, traumatic event which may include physical assault, sexual assault, sexual harassment, stalking, an unexpected medical condition, and or a change in a mental health condition. | Crisis Evaluation Form  
Psycho-Social Assessment  
Consultation and linkage to Community Resource  
(Suicide Access Line, current providers.)  
Referrals  
Follow-up                                                                                                                                                                                                 |
| 3. Individual Counselor | I meet with students individually to identify and discuss personal, academic, social emotional issues that may be impacting their academic success and personal lives. I work with each student to develop an individualized and personalized support plan. A student can participate in up to 8 counseling sessions and if additional support is needed, each case will be assessed on an individual basis and I will continue to work with the student until proper community supports have been established. | Intake Form  
Consent/Release of Information Forms  
Psycho-Social Assessment  
Treatment Planning: goal setting and evaluation  
Community Referrals  
Psycho-Education  
Wellness plan  
Progress/process notes  
Follow-up                                                                                                                                                                                                 |
| 4. Group counselor | I will meet with 3 or more students for a set period of time to discuss a specific issue related to mental health and well-being. | Intake Form  
Psycho-Social Assessment  
Treatment Planning: goal |
<table>
<thead>
<tr>
<th></th>
<th>setting and evaluation</th>
<th>Community Referrals</th>
<th>Psycho-Education</th>
<th>Progress/process notes</th>
<th>Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. Community Referral Specialist</td>
<td>I identify and link students to campus and community resources that will assist them in addressing their specific needs. Examples of such referrals include: academic support services, disability services, crisis intervention svcs, shelters and housing, medical svcs, intimate partner violence, svcs, support groups, mental health svcs.</td>
<td>Community Based Referral Form</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix B Consent form

Aloha HonCC Students!
Thanks for agreeing to be part of this important focus group at HCC. We really appreciate your willingness to participate!

Moderators: Jeannice, Laura, Kimberley part of the HCC Mental Health and Wellness Services

Purpose of this focus group:
We are meeting with many of the programs on campus to determine what are the mental health issues for students at the Honolulu Community College Campus. We would like your input and ideas and hope you will share your honest thoughts and opinions with us!

Rules for the Group:
• We want you to do the talking and hope everyone will feel comfortable talking
• There are no right or wrong answers
  o Everyone’s opinions are important
  o Speak up whether you agree or disagree
  o Please respect others
• Everything is confidential: Your information will be kept private
• We will be tape recording this conversation but will not identify you in any way.

Consent to participate:
It is important that you know you can choose whether or not to participate in this focus group and can stop at any time. Although the focus group will be tape recorded, your responses will remain anonymous and no names will be mentioned in the report.
I understand this information and agree to participate fully under the conditions stated above:

Signed: ____________________________
Date: ____________________________
Appendix C Mental Health Survey

The Mental Health and Wellness Service would like to invite you to complete the survey below. The survey is in response to funding from a HonCC Perkins Grant to identify the mental health and wellness needs of students on our campus. Your responses are confidential and will help to create a better service to support our students on campus. Thank you for taking the time to complete this survey. If you have any questions or concerns about the survey please contact Kimberley Gallant- 845-9180.

Age: Working: Full or Part Time
Gender: # of Children and Ages:
Ethnicity: Relationship Status:
Academic Program: Year in Program:

1. Describe current living situation:

2. Have you ever been on academic probation/suspension? If yes, please explain:

3. How do you rate your overall health? Excellent Good Fair Poor

4. Why did you choose your academic program? Prioritize from 1-5 (1 = the highest priority and 5 the lowest priority)
   ___ To get a job
   ___ Financial reasons
   ___ Outside encouragement (family/friends)
   ___ Personal interest
   ___ No option
   ___ Other: Explain
5. What do you think are the major mental health issues faced by college students today?

- Choosing a major
- Making Friends
- Peer Pressure
- Academic Pressure
- Test Anxiety
- Talking to Instructors
- Learning Disability
- Alcohol/Drugs
- Physical/Sexual Violence
- Suicide
- Stress
- Anxiety
- Financial
- Depression
- Eating problems
- Anger
- Stalking
- Legal
- Physical Health
- Parenting
- Grief/Loss
- Gender Identity
- Sex
- Other:

6. Rate the level of support you have received from the following people on a scale from 1-5: (1 being the highest level of support and 5 the lowest.)

- Faculty
- Counselors
- Family/Spouse
- Classmates
- Employer
- Others Explain:

7. What barriers would prevent you from completing college? Rate the following items (1 being the highest and 5 the lowest.)

- Lack of childcare
- Illness
- Finances
- Relationship issues
- Mental Health Condition
- Personal beliefs/attitude
- Problem with instructor/college
- Other: Explain:

8. What kinds of personal issues or stressors have affected your schooling/relationships? Please explain....
9. What types of support services do you think will help students deal with their issues?
   _____ Academic counseling
   _____ Academic tutoring
   _____ Personal/Mental Health Counseling
   _____ Student Support Groups
   _____ Presentations, Informational Workshops and Trainings
   _____ Other Explain:

10. Have you used any of the following resources on campus? Please answer yes or no:
    _____ Academic Counselor
    _____ Student Life
    _____ Health Office
    _____ Mental Health Counselor
    _____ TRIO Project
    _____ Native Hawaiian Center
    _____ Student ACCESS
    _____ Career Employment
    _____ Tutoring Center
    _____ Campus Security

11. Do you feel like you have the time to do the work of your program?
    1. Never
    2. Rarely
    3. Sometimes
    4. Most of the time
    5. Always

12. In the 12 months have you felt depressed?
    1. Never
    2. Rarely
    3. Sometimes
    4. Most of the time
    5. Always

13. In the past 12 months have you felt so nervous or anxious has made it difficult to get through the day?
14. In the past 12 months have you struggled with loss of appetite or over-eating?
   1- Never
   2. Rarely
   3- Sometimes
   4- Most of the time
   5- Always

15. In the past 12 months have you felt hopeless?
   1- Never
   2. Rarely
   3- Sometimes
   4- Most of the time
   5- Always

16. In the past 12 months how often have you felt so much stress you could not function
    as well as you wanted?
   1- Never
   2. Rarely
   3- Sometimes
   4- Most of the times
   5- Always

17. In the past 12 months have you used drugs or alcohol to manage your stress?
   1- Never
   2. Rarely
   3- Sometimes
   4- Most of the time
   5- Always

18. What do you do to reduce stress or cope with stress?

19. How often do you use one of the coping skills you listed above when stressed?
   1-Never
   2- Rarely
3-Sometimes
4-Most of the times
5-Always

20. In the past 12 months how often have you felt physically healthy?
   1-Never
   2- Rarely
   3-Sometimes
   4-Most of the times
   5-Always

21. What are your future goals?

22. What are your personal strengths?

23. What advice would you give a new student at HCC?
Appendix D Focus group questions

HonCC CTE Focus Group # Students Date:

Retention Questions
1. What motivates you as a college student?
2. Describe the challenges you face as a college student
3. Describe the support you receive from your teachers and other students in your program
4. Describe how personal obligations (job, finances, family etc...) impact your college experience.
5. What kinds of things do you think will help students stay in college/graduate?

Mental Health Questions
1. What are the mental health issues faced by college students today? What are the mental health issues faced by HonCC students?
2. What kinds of support services/activities do you think will help students to deal with personal issues/mental health condition while on campus?
3. What kinds of services/activities do you think would help instructors, administrators, security to support students who may be dealing with personal issues/mental health condition while on campus?

Additional Questions:
1. Describe what a regular day is like for you as a college student
2. What issues do you think college students face today?
3. What are the barriers that prevent you from completing your classes?
4. What do you wish you would have known before you started as a new student at HonCC?

6. What advice would you give a new student at HonCC?
Appendix E Pre-post presentation evaluations

Presentation Pretest questions

1. Where is the Mental Health Wellness Services located and how do you get in contact with them?

2. What services does the Mental Health and Wellness Services offer?

3. What are the top four mental illnesses that are the most common on college campuses?

4. What is a coping skill? Name 3 coping skills you would use when stressed, depressed or anxious.

Presentation Post-test questions

1. I felt that the presentation information was helpful.
   a. Strongly agree
   b. Agree
   c. Undecided
   d. Disagree
   e. Strongly disagree

2. Did you learn anything new in the presentation?
   a. Strongly agree
   b. Agree
   c. Undecided
   d. Disagree
   e. Strongly disagree

2. The presenter was knowledgeable and presented well on the topic.
a. Strongly agree  
b. Agree  
c. Undecided  
d. Disagree  
e. Strongly disagree

3. What did you like best about the presentation?

4. What did you like least about the presentation?

5. What other topics would you like to see presented in the future?
Appendix F Enrichment group evaluation

Enrichment Group

Program: ______________
Date: ______________

1. Did you feel as though the enrichment group was helpful?
   a. Strongly agree
   b. Agree
   c. Undecided
   d. Disagree
   e. Strongly disagree

2. Did you learn anything new?
   a. Strongly agree
   b. Agree
   c. Undecided
   d. Disagree
   e. Strongly disagree

3. Would you attend a group in the future?
   a. Strongly agree
   b. Agree
   c. Undecided
   d. Disagree
   e. Strongly disagree

4. What would you like to talk about in a future group?
## Appendix G Timeline

<table>
<thead>
<tr>
<th>Month</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>September</strong></td>
<td>Program preparation and planning with student employees</td>
</tr>
</tbody>
</table>
| **October** | Development of mental health survey  
Development of focus groups questions  
Development of presentation evaluation survey  
Contact with Program faculty about grant. Programs identified: Auto Body, Carpentry, Cosmetology, Refrigeration & Air Conditioning, and Welding Programs |
| **November** | Outreach (class presentations) and focus groups  
11/19: Focus Group (COSM) x 2; Outreach to a group (COSM)  
11/20: Focus Group (CARP) x 2; Outreach to a group (CARP)  
11/21: Focus Group (COSM); Outreach to a group (COSM)  
11/26: Focus Group (ABRP); Outreach to a group (ABRP); Focus Group (RAC); Outreach to a group (RAC) x 2  
11/27: Focus Group (WELD) x 2; Outreach to a group (WELD) x 2  
11/28: Focus Group (ABRP); Outreach to a group (ABRP); Focus Group (CARP); Focus group (COSM); Outreach to a group (COSMO); Focus Group (RAC); Outreach to a group (RAC)  
11/29: Outreach to a group (CARP) |
| **December** | Surveys and focus groups’ collection and data entering and transcription |
| **January** | Review of Perkins data gathered via survey and focus groups; Identify interventions |
| **February** | Prepare classroom presentations, pre-posttest, evaluations |
| **March** | Classroom presentations; Draft of newsletter: 1, 2, and 3  
3/20: MHWS presentation (COSM) |
| **April** | Classroom presentations  
Enrichment Groups  
Collect and enter data collected from pre-posttest evaluations  
4/1: MHWS presentation (COSM); MHWS presentation (WELD)  
4/3: MHWS presentation (CARP); Outreach to a group (CARP); Enrichment group (RAC); Outreach to a group (RAC) x 2; Outreach to a group (WELD)  
4/7: Enrichment group (WELD) x 2  
4/10: Enrichment group (CARP); Enrichment group (RAC)  
4/15: Mentor in Violence group (WELD)  
4/17: Mentor in Violence group (CARP); Mentor in Violence group (RAC)  
4/24: Enrichment group (RAC); Enrichment group (WELD) |
| **May** | Distribution of Newsletter; Faculty Survey |
| **June** | Report writing |