STOMP
SUCCESSFUL TRANSITION AND ONLINE MENTORING PROGRAM

A collaboration of NOARC and RARC
Funded by the Mental Health Innovation Fund
YOU LOOK KIND OF DEPRESSED, CHARLIE BROWN

I WORRY ABOUT SCHOOL A LOT...

I ALSO WORRY ABOUT MY WORRYING SO MUCH ABOUT SCHOOL.

MY ANXITIES HAVE ANXITIES
Background

• From 2005-14, the prevalence of depression increased significantly among 12- to 17- year olds in the US. Also an increase in 18-20 year olds. (as reported in the Globe and Mail Feb 22/2017)

• This academic year, University of Guelph – highest number of student suicides ever in a single academic year (as reported in Toronto Star Feb 12/2017)

• Number of student with mental illness registered at DSOs in Ontario increased by 67% between 2006-2011 (Condra et al, 2015)
ACHA/NCHA (2016) survey of Canadian Consortium

- Students reporting being diagnosed or treated by a professional in the past year for:
  - Anxiety (31.8%)
  - Mood (16.1%)
  - Substance abuse/addiction (2%)
  - Sleep disorder (8.7%)
  - Eating disorder (2.6%)

- Students reporting academic impact in the past year as a result of:
  - Anxiety: 32.5%
  - Depression: 20.9% … [common cold or flu (20.6%)]
  - Eating disorder/problem: 2.0%
  - Stress: 42.2%
  - Sleep difficulties: 28.4%
I stress about stress before there's even stress to stress about. Then I stress about stressing over stress that doesn't need to be stressed about. It's stressful.
Background

- An increasing number of students with mental health conditions are transitioning to postsecondary education (PSE).

- Many have limited awareness of the extent to which their problems will interfere with their participation, due in part to stigma & lack of open discussion around mental health problems.

- Many of these students are also unaware of how frequently these mental health conditions occur, existing treatment options and prognoses.
Objectives of this presentation

• Review results from a two year pilot project, called STOMP (Successful Transition and Online Mentoring Program).

• Participants will learn about:
  • the main mental health conditions affecting students in transition,
  • the content of this transition program,
  • its effectiveness in decreasing the anticipatory stress and anxiety in students with mental health conditions and improved optimism about making a successful transition to postsecondary education
MH and its impact upon participation and learning in transition-age students

Literature review says …

- **Social support** can act as a buffer against the stress associated with the transition to PSE (Compas, Wagner, Slavin & Vannatta, 1986; Azmitia, Syed & Radmacher, 2013; and Fielder and Hustad, 2014)

- **Loneliness** a trigger for depressive episodes and poor adjustment to PSE (Fiori & Consedine, 2013; and Quan, Zhen, Yao & Zhou, 2014)

- **Self-compassion** can help protect against homesickness, depression and dissatisfaction in the transition to college (Terry, Leary & Mehta, 2013)
MH and its impact upon participation and learning in transition-age students

- Sleep quality and quantity are affected by the transition to PSE, especially during the first semester of transition (Doane, Gress-Smith & Breitenstein, 2015; and Lund, Reider, Whiting & Prichard, 2009).

- Higher anxiety, depression and stress associated with increased ADHD-type s/o (Harrison, Alexander & Armstrong, 2014)

- Relationship stressors most commonly reported stress in PSE; includes stress associated with family, romantic, peer and faculty relationships (Hurst, Baranick & Francis, 2013).

- Substance use increases among young adults transitioning to PSE. Common predictors of substance use: previous substance use, peer influence, psychological factors and mental health issues (Kirst, Mecredy, Borland & Chaiton, 2014)
Our Survey

On-line survey of students with mental health issues from across Canada – Demographics

• N= 210
• 72% female
• ages 16- 24+
• 92% from Ontario
• 94% in PSE
  • Remainder: in high school and planning to enroll in PSE (2%)
  • in post-grad (1%)
  • finished PSE (1%) or taking some time off from school (2%)
Our Survey

Top diagnoses*:

- Anxiety (62%),
- Depression (53%),
- ADHD (24%),
- Panic Disorder (18%),
- PTSD (14%)

* more than one diagnosis could be reported

*** 7.5% were unsure of their diagnoses
### Our Survey

#### Age when first diagnosed (percentage)

<table>
<thead>
<tr>
<th>Age in Years at time of 1(^{st}) Dx</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 8</td>
<td>4.9</td>
</tr>
<tr>
<td>8-10</td>
<td>3.8</td>
</tr>
<tr>
<td>11-13</td>
<td>10.4</td>
</tr>
<tr>
<td>14-16</td>
<td>19.7</td>
</tr>
<tr>
<td>17-19</td>
<td>26.8</td>
</tr>
<tr>
<td>20-22</td>
<td>17.5</td>
</tr>
<tr>
<td>23+</td>
<td>14.8</td>
</tr>
<tr>
<td>Not Diagnosed</td>
<td>2.2</td>
</tr>
</tbody>
</table>
## Our Survey

Self-rated understanding of MH issues (symptoms, treatment options, prognosis and effect on scholastics)

<table>
<thead>
<tr>
<th>Percentage understanding</th>
<th>Not very well</th>
<th>Little bit</th>
<th>Average</th>
<th>Better than Average</th>
<th>Extremely Well</th>
</tr>
</thead>
<tbody>
<tr>
<td>Symptoms</td>
<td>0</td>
<td>8.0</td>
<td>21.3</td>
<td>35.6</td>
<td>35.1</td>
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<tr>
<td>Treatments</td>
<td>5.4</td>
<td>14.4</td>
<td>32.6</td>
<td>23.5</td>
<td>24.1</td>
</tr>
<tr>
<td>Prognosis</td>
<td>8.6</td>
<td>13.9</td>
<td>31.6</td>
<td>26.2</td>
<td>19.8</td>
</tr>
<tr>
<td>Effect on Academics</td>
<td>2.7</td>
<td>10.2</td>
<td>27.4</td>
<td>32.3</td>
<td>27.4</td>
</tr>
</tbody>
</table>
## Our Survey

### Comfort level for discussing disability with different groups

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Not Very</th>
<th>Little Bit</th>
<th>Average</th>
<th>Better than Average</th>
<th>Extremely</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teachers / Professors</td>
<td>28.7</td>
<td>27.1</td>
<td>19.2</td>
<td>15.4</td>
<td>9.6</td>
</tr>
<tr>
<td>Family</td>
<td>18.6</td>
<td>22.9</td>
<td>15.4</td>
<td>19.7</td>
<td>23.4</td>
</tr>
<tr>
<td>Friends</td>
<td>15.4</td>
<td>19.2</td>
<td>18.6</td>
<td>28.7</td>
<td>18.1</td>
</tr>
<tr>
<td>New People</td>
<td>51.1</td>
<td>19.9</td>
<td>17.7</td>
<td>7.0</td>
<td>4.3</td>
</tr>
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</table>
# Our Survey: Strategy Use in High School

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Not at all</th>
<th>A bit</th>
<th>Average</th>
<th>Fair Bit</th>
<th>A lot</th>
<th>Did not Try</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Counselling</td>
<td>9.2</td>
<td>16.3</td>
<td>8.2</td>
<td>16.9</td>
<td>9.8</td>
<td>39.7</td>
</tr>
<tr>
<td>Group Counselling</td>
<td>10.2</td>
<td>6.3</td>
<td>4.0</td>
<td>0.6</td>
<td>2.3</td>
<td>76.7</td>
</tr>
<tr>
<td>Mtg w/Resource/Guidance</td>
<td>15.1</td>
<td>15.1</td>
<td>14.6</td>
<td>17.3</td>
<td>9.2</td>
<td>28.7</td>
</tr>
<tr>
<td>Academic Accom’s</td>
<td>3.9</td>
<td>3.9</td>
<td>5.0</td>
<td>11.5</td>
<td>29.1</td>
<td>46.7</td>
</tr>
<tr>
<td>Reduced Course Load</td>
<td>6.1</td>
<td>2.2</td>
<td>2.8</td>
<td>7.8</td>
<td>19.4</td>
<td>61.7</td>
</tr>
<tr>
<td>Academic Tutoring</td>
<td>6.1</td>
<td>6.6</td>
<td>5.5</td>
<td>7.7</td>
<td>10.5</td>
<td>63.5</td>
</tr>
<tr>
<td>Peer Mentoring</td>
<td>8.5</td>
<td>1.7</td>
<td>4.5</td>
<td>7.3</td>
<td>2.8</td>
<td>75.1</td>
</tr>
<tr>
<td>Relaxation</td>
<td>8.2</td>
<td>14.2</td>
<td>8.7</td>
<td>13.1</td>
<td>13.7</td>
<td>42.1</td>
</tr>
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</table>
Our Survey: Barriers to Accessing Supports in High School

- 79 gave no response
- 30 said no supports available
- 28 said no barriers to access
- 14 said teachers did not understand/cooperate
- 10 said stigma stopped them
- 9 were not diagnosed in high school
- 8 did not know support was available
- 8 said it was not applicable
- 7 simply said yes
## Our Survey: Using/Planning to use in PSE

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Not at all</th>
<th>A bit</th>
<th>Average</th>
<th>Fair Bit</th>
<th>A lot</th>
<th>Did not Try</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Counselling</td>
<td>4.5</td>
<td>14.6</td>
<td>11.2</td>
<td>27.5</td>
<td>22.5</td>
<td>19.7</td>
</tr>
<tr>
<td>Group Counselling</td>
<td>7.7</td>
<td>5.3</td>
<td>3.0</td>
<td>4.1</td>
<td>3.6</td>
<td>76.3</td>
</tr>
<tr>
<td>Mtg w/ Resource/Guidance</td>
<td>7.3</td>
<td>13.0</td>
<td>19.8</td>
<td>21.5</td>
<td>11.3</td>
<td>27.1</td>
</tr>
<tr>
<td>Academic Accom’s</td>
<td>5.0</td>
<td>3.9</td>
<td>8.8</td>
<td>21.4</td>
<td>57.1</td>
<td>3.9</td>
</tr>
<tr>
<td>Reduced Load</td>
<td>3.4</td>
<td>4.5</td>
<td>7.9</td>
<td>20.3</td>
<td>28.8</td>
<td>35.0</td>
</tr>
<tr>
<td>Academic Tutoring</td>
<td>5.8</td>
<td>4.6</td>
<td>3.5</td>
<td>9.8</td>
<td>11.0</td>
<td>65.3</td>
</tr>
<tr>
<td>Peer Mentoring</td>
<td>7.6</td>
<td>4.7</td>
<td>4.1</td>
<td>3.5</td>
<td>4.7</td>
<td>75.6</td>
</tr>
<tr>
<td>Relaxation</td>
<td>5.1</td>
<td>14.1</td>
<td>14.1</td>
<td>18.6</td>
<td>24.3</td>
<td>23.7</td>
</tr>
</tbody>
</table>
Our Survey: Barriers to Accessing Supports in PSE

- 75 gave no response
- 42 said no barriers
- 20 said it was a slow, complicated process
- 16 said there was limited/insufficient counselling
- 16 said they could not get accommodated
- 8 cited financial stress
- 8 said MH issues created barriers for self-advocacy
- 6 did not know aid was available
- 5 felt stigmatized or could not accept having a diagnosis
- 2 list other barriers
Our Survey: Transition - Stressful?

Majority (64.6%) found the transition to be moderately to extremely stressful

- The remainder indicated:
  - experiencing a bit of stress (8%)
  - feeling relaxed (9%)
  - not at all stressed (4.2%)

- 14.2% did not answer this question
Our Survey: Change in MH needs after transition?

Majority (75.4%) indicated a change in their MH needs once within the PSE setting

- 10.9% indicated no change
- 13.7% did not answer the question
Our Survey: Changes in MH needs?

- Changes endorsed by respondents in descending order:
  - Unspecified changes (31)
  - Workload (26)
  - Self-perception (22)
  - Social isolation (22)
  - Higher stakes, more stress (18)
  - Self advocacy good or weak (13)
  - Mental health worsened (12)
  - Medications, money issues, family, mental health improved, accommodations working, physical health, symptoms changed (all 5 or less)
Our Survey: rate the effect transition had on...

<table>
<thead>
<tr>
<th>Effect of</th>
<th>No</th>
<th>Little</th>
<th>Normal</th>
<th>Fair Bit</th>
<th>Severe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moving from home</td>
<td>24.6</td>
<td>6.6</td>
<td>14.2</td>
<td>14.7</td>
<td>13.3</td>
</tr>
<tr>
<td>More responsibility</td>
<td>11.4</td>
<td>14.2</td>
<td>19.4</td>
<td>19.9</td>
<td>14.2</td>
</tr>
<tr>
<td><strong>Academic struggle</strong></td>
<td>3.8</td>
<td>9.0</td>
<td>10.9</td>
<td><strong>25.4</strong></td>
<td><strong>31.8</strong></td>
</tr>
<tr>
<td>Failing exam/course</td>
<td>19.9</td>
<td>8.1</td>
<td>6.6</td>
<td>13.7</td>
<td>29.4</td>
</tr>
<tr>
<td><strong>Loneliness</strong></td>
<td>8.1</td>
<td>10.4</td>
<td>10.0</td>
<td><strong>16.6</strong></td>
<td><strong>35.1</strong></td>
</tr>
<tr>
<td>Family relationships</td>
<td>16.6</td>
<td>10.9</td>
<td>20.4</td>
<td>17.1</td>
<td>16.6</td>
</tr>
<tr>
<td>Friend relationships</td>
<td>10.0</td>
<td>13.7</td>
<td>19.9</td>
<td>18.0</td>
<td>18.0</td>
</tr>
<tr>
<td>Romantic relationships</td>
<td>28.0</td>
<td>5.2</td>
<td>9.5</td>
<td>13.7</td>
<td>21.3</td>
</tr>
<tr>
<td>Work demands</td>
<td>17.1</td>
<td>8.5</td>
<td>19.4</td>
<td>18.5</td>
<td>15.6</td>
</tr>
<tr>
<td>Extracurricular activities</td>
<td>31.8</td>
<td>10.9</td>
<td>17.1</td>
<td>9.5</td>
<td>8.5</td>
</tr>
<tr>
<td><strong>New mental health issues</strong></td>
<td>10.4</td>
<td>8.1</td>
<td>9.5</td>
<td><strong>14.7</strong></td>
<td><strong>35.5</strong></td>
</tr>
</tbody>
</table>
Our Survey: How did students prepare for transition?

<table>
<thead>
<tr>
<th>Action</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Followed plan from IEP</td>
<td>26</td>
<td>12.3</td>
</tr>
<tr>
<td>Took transition course</td>
<td>18</td>
<td>8.5</td>
</tr>
<tr>
<td>Went to orientation at college/university</td>
<td>81</td>
<td>38.2</td>
</tr>
<tr>
<td>Met with guidance counsellor</td>
<td>84</td>
<td>39.6</td>
</tr>
<tr>
<td>Met with personal counsellor</td>
<td>34</td>
<td>16.0</td>
</tr>
<tr>
<td>Not diagnosed (1), did nothing (9), didn’t finish high school (3), took time off before PSE (2)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Our Survey: In hindsight, what’s your advice to other students?

- 62 gave no response
- 39 said get help/use the available supports
- 17 said take more time to finish / reduce course load
- 11 said get accommodations
- 11 said take a year off / transition year
- 10 said accept yourself
- 9 or less said: meet people, get a diagnosis asap, be organized, keep your vision, work hard/smarter, balance your life, don’t know, don’t stress, have the right medication, ...
Our Survey: Identified gaps in service & how we addressed

<table>
<thead>
<tr>
<th>Gap in Service / Service Need</th>
<th>STOMP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understanding of treatment and prognosis of common diagnoses</td>
<td>Module Content</td>
</tr>
<tr>
<td>Where and how to access range of supports in PSE</td>
<td>Module Content, Peer Mentors/Connection, Guest Speakers</td>
</tr>
<tr>
<td>Support in building and maintaining relationships</td>
<td>Peer Mentors/Connection, Moderator Talks, Module Content</td>
</tr>
<tr>
<td>How and where to advocate for accommodations at PSE</td>
<td>Peer Mentors/Connection, Moderator Talks, Module Content, Updated Assessment</td>
</tr>
<tr>
<td>Self-help strategies for managing stress</td>
<td>Moderator Talks, Module Content</td>
</tr>
<tr>
<td>Early preparation for transition</td>
<td>STOMP</td>
</tr>
</tbody>
</table>
What does STOMP looks like?

Composed of:

• On-line modules
• 3 group learning days
• Faculty of Education moderators from Queen’s U and Laurentian U
• A connection to peer mentoring programs at their respective schools
• An updated psych-ed assessment
WELCOME
WE'RE GLAD YOU'RE HERE!

Read through the following pages to get information about the course, the moderators, deadlines and how to get Google Read & Write for your computer to use with the coursework.
Module 1: Introduction

Welcome to STOMP, a program designed for students like you who are interested in getting a head start on the transition to college or university. You are participating in this program because you have a disability or disorder that has an impact on your mental health and you are hoping to gain some skills and strategies that will help you as you transition to post-secondary school. It's great to see you taking the initiative to start your preparation early! We're really looking forward to working and learning with you throughout the course.

In this Module, you will complete the following learning and activities:

- Damien's Story
- A Growth Mindset
- The Power of Belief
- Dropbox Assignment: Goals during STOMP
- Discussion Assignment: Introduce Yourself

To get started, click on Damien's Story below.
In this module, you will complete the following learning and activities:

- Damien's Story
- A Growth Mindset
- The Power of Belief
- Dropbox Assignment: Goals during STOMP
- Discussion Assignment: Introduce Yourself

To get started, click on Damien's Story below.

**Damien's Story**

Completion time: 10 minutes

Think about what you hope to accomplish during this course. Do you want to learn more about yourself? Do you want to gain more confidence? Do you want to learn strategies to tackle the workload at college and university? And how can we help you accomplish those goals? Open the STOMP goals worksheet, and underline all of the items that apply to you. If you have any questions for your moderator, write them on the page as well. When you’re done, save it and submit it to the Dropbox.

**Discussion: Introduce Yourself**

Completion time: 10 minutes

What makes you, you? What are your hobbies or interests? What is something interesting about yourself? On the Discussion Board, and write a post telling others:

- One interesting fact about yourself
- Your hobbies or interests
- Your university/college program choice

You can use the spell check function in D2L to check your work before you post it. Read through the other posts, and reply to at least one post.
Effectiveness of STOMP:  
Student Perspective (closing day focus group)

Impact, if any, of STOMP:
  • Relieved stress
  • Reduced stigma
  • Generated a sense of connection
  • Instilled optimism regarding PSE
  • Learned different perspectives

Fit between your learning style and in-person days and on-line course:
  • Generally don’t participate in groups but in-person days were open and accepting
  • Module content and approach good
Effectiveness of STOMP: Student Perspective cont’d

Most memorable part of STOMP:
- The speaker who talked about their experience with MI and being in PSE.
- Staff
- Deep conversations those who share some of the some problems
- Social interactions and friendships
- Not feeling judged

Advertising to future students:
- Difficult to approach because of the stigma
- Every student should do this, should almost be mandatory
- Its almost an unfair advantage for those with MI to get this help, everyone going through transition should get this help
- Better info on what is involved → its not hard, you’ll have time
Effectiveness of STOMP: Student Perspective cont’d

Other

• Was very nervous to come
• Didn’t think I’d have time
• I need to plan ahead – this helped
• Getting to know your school module very good for learning about resources
• Certain videos very well received (how to make anxiety your friend)
Effectiveness of STOMP: Moderator Perspective

- Overall training was deemed helpful and useful learning:
  - learning how to give constructive yet positive feedback
  - connecting education to MH
  - a better understanding of stigma attached to MI
  - learning about the different MH disorders
  - learning about learning strategies and accommodations
  - guest speakers with first hand experiences

- Suggestions for improvement were technical:
  - Better time management of sessions so don’t run out of time
  - No need to review homework if there were not issues
  - More practise with giving feedback
  - Make sessions more interactive
Effectiveness of STOMP: Graduates

- 2016 run of STOMP
  - Only 5 of 11 completed last year in Sudbury; 9 went on to PSE
  - 4 completed last year in Kingston; 2 went on to PSE

- 2017 run of STOMP
  - Of 18 registrants in Sudbury, 15 confirmed by opening day, only 5 are actively participating
  - 15 registrants in Kingston this year – program just started

- 2016 graduates
  - Two participating in the student-panel session at this conference
  - One graduate of STOMP was willing to speak at this year’s opening day in Sudbury
Mentors
ADVICE FOR TRANSITION GROUPS

'cos it's not all a bed of roses
Issues that Interfered with Participation in STOMP (and which we project would interfere in PSE as well)

- Distance -> need for transportation
- Late therefore skipped opening/closing days (embarrassed)
- Parents saying “No, its not MH, its LD/ADHD”
- Stigma at high schools (students did not want to sign up for fear of others seeing them)
- MH issues interfered with in-person participation (stress, anxiety, depressive episodes, medication changes)
- Timing with school year (high school exam period)
How to Disseminate Across Ontario?

- Who could run it?
- What is the optimal length of the program?
- Timing – best time of year to run it?
- School board - general learning credit?
- CYW placement?
- Faculties of Education?
- Integrate into current transition/orientation programs running at PSEs across ON?
How to Disseminate Across ON?

Consider this:

→ the over-lap between content of transition programs for students with LD and STOMP content
• What are learning disabilities, ADHD and ASD
• How to tackle a bigger course load
• Academic support services

OLTS

• Understanding yourself
• Supports available at post-secondary
• Where do you go for help
• Self-advocacy
• Building independence
• Stigma

STOMP

• What are mental health disabilities
• Stress management
• Self-care
• Promoting positive mental health
How to Disseminate Across Ontario?

Consider this:

→ the co-morbidity that occurs between MH and LD/ADHD diagnoses

• Conclusion??:
  • Should STOMP / MH components be integrated into all PSE transition programs?
  • Should transition programs be offered to Grade 12 students as a learning credit?
HUG A WARM PUPPY 1¢

THE PUPPY IS IN

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