

February
2023

NC STATE

Student Mental Health
Task Force Report
Executive Summary

Introduction

As a nation and states in general, and universities specifically, we are grappling with how to address the ongoing mental health crisis. Before the pandemic, there was a drastic increase in demand for mental health resources. This preexisting demand, coupled with the isolation and disconnectedness caused by the COVID-19 pandemic and coping with the day-to-day stressors of our rapidly changing world, have exacerbated our students' ongoing mental health challenges.

Studies, such as the National College Health Assessment conducted by American College Health Association (ACHA) in 2022, showed that 51.7% of all university students regularly experienced moderate psychological distress during the 2021-22 academic year, and 27.8% presented a high suicide screening score.

Additionally, the Center for Collegiate Mental Health's 2022 Annual Report showed that of the students seeking mental health services, 72.4% said the pandemic affected their mental health, and 66.7% said it affected feelings of loneliness and isolation.

NC State University is also confronting these challenges, having experienced multiple student deaths in the fall 2022 semester. Over the past five years (2018-2022), NC State has averaged eight student deaths annually, ranging from 5 to 12, including deaths by natural causes, accidents, and suicide. Of these, there was an average of three student deaths by suicide per year with a range of 1 to 7. For additional context, from 2016-2020 there were 878 deaths by suicide in North Carolina of people ages 15-24, of which 10 were NC State students (United States Census Bureau, n.d.)¹. Death by suicide is an ongoing challenge that is worsening post-pandemic and impacting North Carolina and NC State.

Over the past decade, NC State has dedicated tremendous resources to address student mental health. However, to address the current urgent need to support student mental health on our campus, the university moved forward with intention by charging a Student Mental Health Task Force in November 2022.

The Task Force recognizes there are several short-term actions that can help improve mental health support on campus. However, a number of recommended initiatives will take sustained, ongoing commitment over time to help achieve the mental health outcomes we strive for at NC State.

This report summarizes the findings and recommendations of the task force and presents the next steps in building an implementation plan for the recommendations.

¹ (n.d.). United States Census Bureau. https://data.census.gov/table?t=Age+and+Sex:Populations+and+People&q=0400000US37_0500000US37183&y=2020&tid=ACSST5Y2020.S0101

Task Force Charges

In the fall of 2022, the [NC State Student Mental Health Task Force](#) (the “Task Force”) was convened by the Division of Academic and Student Affairs (DASA) Vice Chancellor and Dean Doneka R. Scott to evaluate and address the mental health needs of our students. For context, the well-being of our students has been, and is, a priority under our institution’s previous and current strategic plans.

In the previous NC State strategic plan, [The Pathway to the Future \(2011-2020\)](#), as described under “Goal 1: Enhance the success of our students through educational innovation,” expanding student mental health and well-being resources was a top priority. The university made significant progress in this area, as the Counseling Center grew from 18 clinical positions in 2012 to 47 in 2023. In addition, Prevention Services was created in 2014 and grew from an original staff of 2 to 8.

The university’s current strategic plan, [Wolfpack 2030: Powering the Extraordinary \(2021-2030\)](#), places an even greater emphasis on well-being, as Goal 4 champions a culture of equity, diversity, inclusion, belonging, and well-being in all we do.

Within this framework, Vice Chancellor and Dean Scott charged the Task Force with creating a university-wide report by completing the following actions:

- Take an inventory of existing mental health resources on campus.
- Identify curricular and co-curricular best practices through a literature review and a study of peer institutions.
- Review existing NC State policies, rules, and regulations that may impact student mental health.
- Develop recommendations for improvements and innovations to address student mental health.

The Task Force delivered the initial draft of their report in mid-February 2023 so that consideration and implementation of recommendations could begin as quickly as possible. The goal was to provide evidence-based and community-informed recommendations to help improve student mental health at NC State.

Members of the Task Force

Co-Chairs

- Lisa Zapata, Senior Associate Vice Chancellor, DASA
- Helen Chen, Senior Vice Provost, Office of the Executive Vice Chancellor and Provost

National and NC State Mental Health Trends

- Monica Osburn, Executive Director, Counseling Center and Prevention Services

Inventory of Current Practices, Strategies, and Programs Subgroup

- Shannon DuPree, Director, Wellness and Recreation, DASA, Lead
- Angelitha Daniel, Assistant Dean for Diversity, Equity and Inclusion, College of Engineering
- Justin Hammond, Assistant Vice Chancellor of Strategic Marketing and Communications, DASA
- Joy Kagendo, Lecturer, Health Minor Coordinator, Department of Health and Exercise Studies, University College, DASA
- Chester Miller, Director, Residential Learning, University Housing, DASA

Literature Review of Curricular Best Practices for Supporting Student Mental Health

- Herle McGowan, Chair of the Faculty, University Faculty Senate, Lead
- Peter Harries, Dean, The Graduate School
- Jerome Lavelle, Associate Dean, Academic Affairs, College of Engineering
- Tina Nelson-Moss, Director of Risk Assessment/Risk Assessment Case Manager, Environmental Health & Public Safety
- Gavin Williams, Head, Department of Chemistry, College of Science

Literature Review of Co-Curricular Best Practices for Supporting Student Mental Health

- Kesha Reed, Associate Vice Chancellor and Associate Dean, DASA, Lead
- Sarah Ascienzo, Assistant Professor, School of Social Work
- Alan Ellis, Associate Professor, School of Social Work
- Deveshwar Hariharan, Graduate Student Association President, Graduate Student

Campus Policies, Rules and Regulations Impacting Student Mental Health

- Betsy Lanzen, Associate General Counsel, Office of General Counsel, Lead
- Charles Clift, Assistant Vice Provost and University Registrar, EMAS
- Chazzlyn Jackson, Chair, Student Government Mental Health Intervention Working Group, Graduate Student
- Melissa Pasquinelli, Associate Dean for Academic Affairs, College of Natural Resources

Stakeholder Engagement

- Donna McGalliard, Interim Associate Vice Chancellor, DASA, Lead
- Raymond Harrison, Senior Associate Athletics Director, NC State Athletics
- Courtney Hinton, Interim Medical Director and Primary Care Staff Physician, Campus Health, DASA
- Lisa LaBarbera-Mascote, Senior Director, Campus Community Centers, Office for Institutional Equity and Diversity
- Eleanor Lott, Department of Wellness, Student Government, Undergraduate Student
- Julia Rice, Director of Wellbeing, College of Veterinary Medicine

Task Force Support

- Madalene Adams, Program Coordinator, DASA Assessment
- Angela Johnston, Director of Planning and Special Projects, DASA
- Jordan Luzader, Assistant Director, DASA Assessment
- Samantha Rich, Director, DASA Assessment
- Debbie Willmschen, Writer, DELTA
- Merranie Zellweger, Director, Project Management, DELTA

Recommendations

Whether from the impacts of the COVID-19 pandemic or the overwhelming stressors caused by the ongoing effects of our changing world, we must recognize that mental health and wellness services at NC State must rise to meet these challenges.

As a decentralized campus, we repeatedly heard throughout our research and listening sessions that building community and a sense of belonging is challenging. Most importantly, we heard that these factors have *changed* in the last few years. Our students, faculty, and staff want improvements, but are unsure how to bring the resources together to form a unified alliance that will work toward one common goal.

The Task Force believes that the work of this committee is an essential *first step* toward reaching that goal.

Overarching Recommendations

In addition to developing specific recommendations, the Task Force identified the following overarching action items that are fundamental to improving student mental health at NC State:

- We must **integrate campus-level diversity, equity, inclusion and mental health planning** to ensure that we foster a sense of belonging for all students, especially those in underserved populations.
- We must **form implementation teams** immediately to continue the work begun by the Task Force. These teams would be charged with researching, evaluating, and potentially implementing the recommendations.
- We must **continually assess** the effectiveness of existing services and programs designed to address student mental health and any new initiatives created through this process. We will use data gathered through assessments to drive evidence-based decision-making to inform and improve policies, programs, services, and all efforts to support student mental health.
- We must continue to find ways to **increase awareness of current mental health and wellness resources** and continue to provide ongoing communications that encourage healthy behaviors, mental health, and overall well-being. It is clear that NC State promotes and supports student mental health, and communicating these wide-ranging efforts must be a top priority. In the Listening Sessions, students described a need to revisit how resources are introduced to students, stating a need for reiteration throughout their time at NC State.
- We must **continue to engage the campus community in the ongoing conversation regarding student mental health**. We will offer more listening sessions over the spring

semester for students, faculty, and staff to gather feedback and input on this critically important topic. When an analysis of listening session data is complete, additional recommendations may emerge.

Individual Recommendations

The Task Force created a list of recommendations after reviewing the following:

- NC State's current practices, strategies, and programs designed to support student mental health
- The literature on curricular and co-curricular best practices for supporting student mental health
- Policies, rules, and regulations that may impact student mental health
- The feedback and input from the campus community through an open-ended survey and listening sessions

The recommendations are organized into the following categories: **Culture of Care, Resources, and Policies**. The time needed to evaluate and potentially implement each recommendation varies. Some recommendations are already in progress, some can potentially be implemented in the short term (defined as by the end of this academic year), and some will take longer.

It is important to note that given the urgency of creating recommendations and identifying ways to support the mental health of our students, the Task Force did not discuss the pros and cons of these recommendations. The work of exploring the viability of each recommendation will begin immediately following the work of the Task Force. Furthermore, the Task Force recognizes that implementing all of the recommendations may not be possible or feasible.

Culture of Care

The Task Force recommends that NC State **enhance its culture of care**. Embracing and manifesting a culture of care demands a multi-pronged and holistic approach that requires strategies and interventions at all levels of the care continuum and across the institution. The literature is clear that institutional transformation – rather than solely implementing isolated interventions – is the most promising path to enhancing the health of members (Eckel & Kezar, 2003²; Hawe et al., 2009³; Newton et al., 2016⁴). A culture of care is one of kindness, caring, and respect for all.

² Eckel, P. D., & Kezar, A. (2003). *Taking the reins: Institutional transformation in higher education*. American Council on Education.

³ Hawe, P., Shiell, A., & Riley, T. (2009). Theorizing interventions as events in systems. *American Journal of Community Psychology*, 43(3–4), 267–276. <https://doi.org/10.1007/s10464-009-9229-9>

⁴ Newton, J., Dooris, M., & Wills, J. (2016). Healthy universities: An example of a whole-system health-promoting setting. *Global Health Promotion*, 23, 57–65. <https://doi.org/10.1177/1757975915601037>

Building upon the strong foundation we have in place, we will be at the forefront of how a university truly cares for its students. For that to happen, the entire campus community, faculty, staff, and administrators must take responsibility for our students' mental health and wellness. University leadership across campus should communicate that mental health and well-being are institutional priorities and emphasize that mental health and overall well-being are central to student life.

To enhance a culture of care, we must identify the root causes that are barriers to student mental health and continually assess the environment for emerging challenges. The feedback we received from our community aligns with the root causes found in the literature. Those barriers and challenges include an inability to meet basic needs (food, housing, transportation, and finances), rigid coursework expectations, a perceived lack of empathy and flexibility from faculty, limited access to resources, a lack of a sense of belonging, and policies that negatively affect mental health. Recommendations for bolstering a culture of care seek to respond to these challenges.

Institution

The following recommendations require structural and foundational changes and an **institutional-level commitment**.

Short Term

- **Add additional interventions and opportunities that promote a sense of belonging, connection, and community.** In the Online Survey, undergraduate students suggested that the university work to increase opportunities for students to engage with other students to increase belonging on campus. Listening Sessions underscored that students strongly believe a focus on community and connection will best support student mental health and create a community of care and is particularly true for students who identify as members of marginalized groups and at-risk populations.

Longer Term

- Become a [JED Campus](#). The Jed Foundation (JED) provides colleges and universities expert support, evidence-based best practices, and data-driven guidance to protect student mental health and prevent suicide. JED currently works with over 370 higher education institutions representing over 4.8 million students, including seven colleges and universities in North Carolina. JED partners with the [Steve Fund](#), the nation's leading nonprofit organization devoted to the mental health and emotional well-being of young people of color.
- **Create a Dean of Students type role.** The Dean of Students serves as the connection between students, families, faculty, staff, and administration for a myriad of services: student involvement questions, clarification about policies or procedures, helping

students to navigate campus resources, assisting with student crises, or general questions about campus opportunities. NC State is the only institution in the UNC System without a Dean of Students.

- **Review existing advising models used across campus to optimize student outcomes.** Determine if advising at NC State is sufficiently supporting our students.

"I recommend reducing the advising load for those faculty to no more than 50 students, so they can keep an eye on incoming students and notice who is struggling." (Faculty, Online Survey)

"Improve student advising. Many students end up overwhelmed, especially in their first semester (I know I did!) because they are used to taking 5-6 high school classes at a time. Having advisors who explain course load and help students set a good, balanced schedule, especially in the first year, can really help." (Teaching Postdoctoral Scholar, Online Survey)

- **Continue to address food insecurity, housing instability, and other environmental factors** to minimize these barriers to well-being. While the university has raised significant funds and has dedicated tremendous resources to reduce these factors, these barriers to well-being continue to exist.

"We are food insecure. We are housing insecure. Graduate student income is below the poverty line. Even the university housing is more than half of our monthly stipend. How are we supposed to be mentally healthy under these conditions?" (Graduate Student, Online Survey)

- **Implement widely-available screening for mental health for students** with adequate processes in place to support students identified as at-risk or in need of services. Consider [ULifeline](#), which the Jed Foundation developed. While screening occurs at the Counseling Center, at every appointment in Campus Health, [screenings are available for anyone](#). We should consider widely-available screening.

- **Implement "means restrictions" via the built environment** to prevent suicides in locations on and around campus. Examples of means restrictions include securing rooftops, bridges, and parking lots with barriers and alarms; installing breakaway closet rods in dorms and limited weight-bearing shower components; and hosting drug take-back programs. As seen in the co-curricular literature review, means restriction is one of the few suicide prevention strategies with demonstrated effectiveness.

- **Increase prevention efforts.** Maintain a focus on adequately providing mental health services throughout campus while creating strategies to address wellness promotion and prevention, not just intervention.

In the Listening Sessions, students expressed a desire to diversify NC State's approach to mental health. They described the need for mental health prevention and promotion efforts in programming and everyday interactions.

→ **Create more gathering spaces that cultivate community.**

In Listening Sessions, students drew attention to the structure of physical spaces on campus. Students described wanting the Counseling Center and other areas where students engage with mental health services to be welcoming; they described wanting smaller classrooms; and there was also a focus on campus beautification of indoor and outdoor spaces.

"We've spent lots of resources as a campus in making the Libraries, Talley, and other environments on campus social and engaging (which is why students want to be, and thrive, there!). We need to be doing the same for classroom environments. It's not just about the technology for these settings; it's about making changes and improvements to facilitate interaction and connection!" (Faculty, Online Survey)

→ **Continue to address financial barriers to success among students.** Many graduate students made this recommendation in the Online Survey. For example, one student wrote,

"TAs and RAs NEED MORE MONEY TO LIVE. Do something about that. And not just enough to make us not eligible for food stamps anymore, but enough to live outside the walls of the academy... I want the money, I deserve the money I need to be able to have a LIFE. When TAs and RAs have lives, our mental health improves, and we produce better scholarship and are better able to support each other and undergrad students." (Graduate Student, Online Survey)

Financial stress can be even more severe for self-funded graduate students and graduate assistants in programs with low stipends. Listening Sessions and the Online Survey also revealed other financial obstacles to explore, such as the impact of the withdrawal process, availability of scholarships and grants, and access to off-campus providers.

Curriculum

The following recommendations focus on the **classroom**.

In Progress

→ **Schedule Wellness Days each semester** and require that no exams or assignments are due on the wellness day or the day following. Respondents to the Online Survey expressed mixed support for Wellness Days. However, there was a sense of agreement that they should be scheduled in advance of the semester. Students described how

faculty moved coursework and due dates to immediately before or after the planned Wellness Day. Respondents told how this caused stress and meant they could not focus on their wellness. Students expressed concern that faculty did not “respect” the intention of Wellness Days.

One student stated,

“The ‘wellness days’ do not help with the way they are being implemented. Instead of a day of focusing on yourself, most students are just catching up on work. In addition, assignments or tests due around that time are just pushed back to days where other big assignments/tests are scheduled.” (Undergraduate Student, Online Survey)

Longer Term

→ **Add a syllabus statement** on the importance of mental health awareness and provide information regarding available resources at the institution.

→ **Coordinate exams at the institutional or departmental levels**, as exam saturation is a prime source of stress. For example, midterm exams should be scheduled in the same manner as final exams.

“Exams and large assignments need to be staggered, especially for classes typically taken together. Provide a system for professors to work with each other to schedule exams.” (Undergraduate Student, Online Survey)

→ **Ensure course expectations and workload align with credit hours earned.**

“I think professors need more monitoring for the general pacing and curriculum of their classes. While some classes are designed to be more rigorous than others, and some subjects are naturally more difficult, I know I and fellow students have all had classes where we felt like we were drowning in an unnecessary amount of work.” (Undergraduate Student, Online Survey)

→ **Examine academic expectations** to incorporate reasonable flexibility and support student mental health. For example, faculty should use structured and transparent assignments with clear learning goals, instructions, and grading rubrics.

In addition, students described rigid coursework expectations in our Listening Sessions, including heavy workloads, inflexible deadlines, due dates over weekends and breaks, and scholarship programs/funding requirements that caused additional stress.

→ **Modify the Department of Health and Exercise Studies GEP courses required by every undergraduate student to increase wellness and life skills education.**

“There is an opportunity to revisit the GEP, modifying the HES requirement to further NC

State support of students. A revision and alignment of how courses and content are delivered should be reviewed to incorporate building community, goal-setting, mindfulness, physical activity, and overall wellbeing. Some faculty are already teaching integrating these concepts. All undergraduate students currently must engage with the department to fulfill the GEP. This is an existing way in which to engage them.” (Faculty, Online Survey)

→ **Create a common core first-year experience course.**

“At my college, we had a required course called ‘University 101,’ which provided students with a course that discussed time management, processing change, overwhelm, physical and mental health, and how to help oneself when struggling. I’m not familiar with the curriculum at NC State at that level, but it might be one approach to ensuring that all students are getting the same information, as well as ensuring they all have the same soft skills and knowledge in this area.” (Staff, Online Survey)

Prevention, Education and Training

The following recommendations focus on **prevention, education, and training**.

Short Term

- **Require students to complete a well-being skills training program.** Mindfulness-based, cognitive-behavioral, and relaxation skill training programs are the most efficacious skill-training interventions.

“My suggestion would be to add a module to the required modules. Our kids get drug and alcohol training, hazing, but no mental health. A module that explains how to get help, and how to recognize when someone else needs help (and how to get it for them) would be beneficial.” (Parent, Online Survey)

- **Encourage faculty and staff to attend ally training programs, diversity training, and racial dialogue workshops** to prevent microaggressions/discrimination and decrease interpersonal harms, which negatively impact student mental health.

- **Create a campus-wide theme centered on wellness and belonging for the 2023-2024 academic year.** Plan a series of engagement events throughout the year through cross-campus partnerships that foster community and discussion among students, faculty, and staff.

Longer Term

- **Require faculty, academic advisors, graduate research advisors, graduate teaching assistants and any staff who directly and regularly interact with students to complete “gatekeeper training”** to learn how to recognize early warning signs of mental health

distress. Two on-campus options are Mental Health First Aid (MHFA) and QPR: Question, Persuade, and Refer (QPR).

"REQUIRE QPR TRAINING ANNUALLY!!! Faculty have to complete Data Security training every year. Maybe we can show we care about students by requiring faculty to get trained in areas of recognizing and responding to student issues. Although it is not in our SFR, responding to student needs is now part of our job whether we want to believe that or not. We should at least have the tools to help address issues instead of making it up as we go along (or just ignoring it since "it's not part of our job")." (Faculty, Online Survey)

→ **Add a health and wellness component to employee performance appraisals.**

"Add a wellness component to our performance appraisals, similar to diversity. Wellness/wellbeing is part of diversity when it's done right. They should be part of our work/education. Our campus community needs it." (Staff, Online Survey)

→ **Implement a peer mentoring support program.**

"This isn't an NC State only problem, obviously. The availability of counselors is too low (students AND FASAP), mental health inpatient services in the area are insufficient, AND it's not likely to get better without a huge influx of funds (which should be pursued). New, non-traditional approaches are needed. The most essential thing for protecting mental health is having ongoing, positive, 1:1 human connections. That can't be artificially generated ('go sign up for a club'). Think about other ways to facilitate connections - buddy systems, peer mentoring programs, etc. and ask students what would work for them, what to try." (Staff, Online Survey)

In Listening Sessions, students expressed the need for mentorship programs and suggested partnerships with academic colleges, departments, and residence halls to support programming that promotes mental health in academia. Of note, three colleges currently have such a program at the graduate level through the [Graduate Peer Mentoring Collaborative](#).

Communication

In addition to other overarching recommendations regarding increased communications regarding overall university mental health and wellness, the Task Force recommends the general communications improvements listed in this section.

In Progress

- **Improve the usability of the Counseling Center website.** The website is currently undergoing a redesign.

→ **Create a “one-stop shop” website for mental health and wellness resources.**

A “one-stop shop” website is in the planning phase.

“I recently came back from a conference that suggested that mental health resources be listed by category on the website. It helps students know where to go. When information is listed in a “dump and go” format, students who are already in crisis feel overwhelmed and don’t know where to start.” (Staff, Online Survey.)

→ **Review and update NC State’s postvention protocols.** Postvention is the process of providing psychological support, crisis intervention and other forms of assistance to those directly affected by a student death, critical injury or other crisis situation. For example, respondents to the Online Survey and Listening Session requested more communications about deaths on campus.

Short Term

→ **Compile and advertise a list of courses that support well-being**, for example, HON 398-008: Practicing Happiness. Create additional course offerings similar to [The Science of Wellbeing](#) at Yale University or [U Sad? Coping with Stress, Anxiety, and Depression](#) at University of Maryland.

One faculty member wrote, “It is not ok for us to have to go to Reddit or the News & Observer to figure out who died and if we knew them.” The campus should determine if and how information will be shared and share those decisions with the community.

Resources

The following recommendations focus on additional resources needed to improve student mental health.

In Progress

- **Embed clinicians across campus** who report to the Counseling Center in spaces where students are already connected, such as residence halls and colleges, to increase access to care. Currently, there are embedded counselors at NC State in Athletics, College of Veterinary Medicine, Advanced Analytics, Campus Health, College of Agriculture and Life Sciences/College of Sciences, College of Engineering, and Wilson College of Textiles/The Graduate School. The following colleges are creating or filling embedded clinician positions: Poole College of Management, College of Natural Resources/College of Education, and the College of Humanities and Social Sciences.
- **Create a faculty toolkit and other resources for faculty** to include concrete suggestions for creating a welcoming environment and sense of belonging and supporting student

mental health. The Counseling Center created [Fostering a Campus Environment Supportive of Student Mental Health: A Faculty Toolkit for Supporting Student Mental Health](#), based on work from the University of Michigan. Consider avenues for raising awareness about this resource and creating additional toolkits, guidebooks, and resources for faculty.

- **Increase access to counseling services and decrease the wait time.** This has been a consistent recommendation from students, faculty, and staff and is a challenge for NC State, other universities, and the broader community. The demand for counseling services is greater than the supply of clinicians. The university partnered with Academic Live Care in the fall of 2022 to expand the services available to our students. All NC State degree-seeking students can access up to 12 free telehealth counseling appointments over the calendar year through the platform. This partnership should be evaluated for future planning.

Short Term

- **Hiring and retaining more clinicians and case managers** was a consistent recommendation from students, faculty, and staff. In addition, community members want the university to continue to recruit and retain clinicians and case managers that reflect the population of the student body. In the Listening Sessions, students described how under-represented populations (race, ethnicity, sexual orientation, and so on) have specific concerns and want to see those needs and concerns reflected in their care.

Longer Term

- **Provide a wellness app for the NC State community** to increase access to care. Athletics provides the wellness app Calm to all student-athletes and staff. The university could explore the feasibility of offering this type of resource to all community members.
- **Provide additional student support services and community engagement programming opportunities on Centennial Campus.**

"Please include Centennial Campus in this mission. There is quite the disconnect between main campus resources/initiatives and Centennial Campus. Majority of the student population on Centennial are engineering students which are under a lot of stress and pressure (as all students are). We also have a lot of international students at the graduate (and undergraduate) levels, which adds an extra layer of stress since they are away from home, family, and support. I worry about my students and their mental health, and I hope that Centennial Campus is being specifically included on this task force." (Staff, Online Survey)

- **Provide student support services for distance education students**, such as Counseling Center, Campus Health, and Wellness and Recreation.

"I would love to see more resources for students engaged in distance education. Many graduate students enrolled in online programs live locally, want to connect with resources, but encounter barriers receiving campus support/assistance." (Faculty, Online Survey)

Policies

Members of the Task Force consistently heard that the university's current Policies, Rules and Regulations (PRRs) can be difficult to understand and navigate. In addition, several key regulations unintentionally create challenges for community members and significantly impact community members' well-being. For example, the regulation having the most direct impact on student mental health is the Attendance Regulation.

Students described attendance policies as "inconsistent and harmful" and "insufficient." In the online survey, one student stated, *"Fear of decreased grades as a result from absences may lead students to having to choose between their academics and their mental health."* In the Listening Sessions, faculty noted the withdrawal, course drop, and absence verification processes are stressful and challenging for students to navigate.

Given the impact of our policies, rules, and regulations on our students, faculty, and staff, the Task Force believes the changes we implement through these recommendations will transform the institution and have a positive impact on the entire campus community's well-being.

Using the data gathered from this report and comments received during feedback and listening sessions from the university community, we recommend the updates summarized in the following sections. Details regarding the impacts or concerns of each PRR, recommendations, stakeholders, and suggested timeline for revisions are provided in [this spreadsheet](#).

The recommendations fall into the following categories:

- General Recommendations
- Academic Regulations
- Withdrawals, Leaves of Absence, and Adding or Dropping Courses Regulations
- Grade Regulations

General Recommendations

The Task Force received the following general feedback regarding updates or changes to university policies:

- Develop a user-friendly technology for students to access university policies and information regarding how those policies affect them, possibly including a chat feature.

- Review all PRRs to ensure that they use inclusive, non-gendered language. In addition, investigate methods to make PRRs more accessible and easier to understand.
- Consider moving all academically relevant information for students into a single PRR and be clear about differentiations between undergraduate and graduate students.
- For PRRs or university processes that request medical documentation, investigate whether it is appropriate or necessary to request medical documentation (especially if it is sensitive medical information). For our students, obtaining the required medical documentation from their providers can be time-consuming and stressful; thus, if it is not necessary, we recommend that we refrain from requiring students to provide this information.
- For PRRs relating to withdrawals or adding or dropping courses where administrative approval is required, provide a link in “Additional References” to helpful FAQs or charts that are easy for students to understand and include information about who will make the decision, the criteria used for those decisions, and any associated consequences.

Academic Regulations

This section provides specific feedback gathered by the Task Force regarding general academic regulations:

- [REG 02.20.03 Attendance](#): Review and modernize the attendance regulation to clarify attendance expectations with an eye toward balancing structure (to encourage participation that facilitates student learning) and flexibility.
- [UNC System 400.1.6 Academic Calendar](#): Add Wellness Days to the rules that govern the development of the Academic Calendar.
- [REG 02.20.14 – Test and Examinations](#): Consider language prohibiting weekend or holiday deadlines in Section 2.
- [REG 02.20.13 – Teacher Availability to Students](#): Consider addressing a minimum standard for in-person office hours and accessibility via email and other means.
- [REG 02.20.07 – Course Syllabus](#): Consider changing the focus of this PRR to be on *Required Course Components*, where the syllabus is the communication device of those components. In addition, make the deadline to provide a syllabus earlier (ideally, at registration) and require information to help set expectations about how much time will be needed for the course so that students can better manage their schedule and work expectations. Incorporate and revise [REG 02.20.10 – Listing of Required Course Materials with the NCSU Bookstores](#) into this PRR.

- [REG 02.05.02 – Length of Time to Graduation](#): Determine whether this regulation can be repealed, as it seems to provide only recommendations and not requirements. At a minimum, Section 2 was revoked by the legislature, is no longer applicable, and should be removed. If the regulation is needed, broaden Section 5 to specifically include mental health reasons, making clear to whom this regulation applies and whether the eight-semester timelines need to be altered or extended.

Withdrawals, Leaves of Absence, and Adding or Dropping Courses Regulations

This section provides specific feedback gathered by the Task Force related to regulations about withdrawals, leaves of absence, or adding or dropping courses:

- Undergraduate Leave of Absence Regulation (**proposed new regulation**): Create a leave of absence policy for undergraduate students and provide more clarity around the policy for graduate students.
- [REG 02.05.04 – Term Withdrawal from the University](#): Provide consistency for withdrawal procedures across campus. Add an “Additional References” section to the regulation PRR webpage to assist students in assessing all of the impacts of the withdrawal process and to help them clearly understand who makes the decision on the withdrawal request and what factors are considered in the analysis.
- [REG 02.20.02 – Adding and Dropping Courses](#): Revamp the procedures related to deadlines for when students can drop a class (both undergraduate and graduate) with consideration towards including mental health exceptions in section 4.1 of the regulation and having a certain percentage of the student’s grade available to the student before the deadline.
- [REG 02.20.15 – Credit Only Courses](#): Consider extending the deadline in Section 3.1 for students to decide to take a class for a grade or credit only. In addition, in Section 1, consider raising the 12-semester hour limit for credit only classes to count toward graduation.
- [REG 07.55.03 – Refunds](#): Consider whether the time period in which refunds may be prorated may be extended, whether the factors the Appeals Committee uses to make a determination should be included in the regulation or otherwise made more transparent, and whether the Appeals Committee may consider evidence that a withdrawal date was in practice much earlier than the official listed date on the withdrawal request form.

Grade Regulations

This section provides specific feedback gathered by the Task Force related to regulations about grades:

- [REG 02.45.02- Grades and Credit in Graduate Courses](#) and [REG 02.50.03 Grades and Grade Point Average](#): Consider whether these regulations should be combined; if not combined, clarify whether both regulations apply to graduate students. In addition, consider whether the grading scale may be revised to enhance student mental health while still meeting academic objectives and consider revising language that limits when an instructor may make a grade change.
- [REG 02.20.16 – Undergraduate Grade Exclusion](#): Move the grade exclusion limit from two courses to four, as the UNC System Fostering Undergraduate Student Success (FUSS) policy allows. In addition, evaluate allowing grade exclusions to be used after a graduation application is in place, as long as the course does not count towards the student’s graduating major or minor requirements.
- [REG 02.20.06 Course Repeat Regulation](#): Make changes to Section 2 to remove the first attempt from GPA calculation or lessen its impact in some other manner.
- [REG 02.45.01 Academic Difficulty \(Applicable to graduate students\)](#): Provide more clarity to the terminology “satisfactory progress.” In addition, consider having allowable exceptions for good reason.
- [REG 02.05.01 – Continuation of Undergraduate Enrollment \(academic suspension\)](#): Examine whether it is appropriate to have exceptions to the hard GPA lines for extenuating circumstances, such as health reasons. In addition, evaluate and clarify language in Sections 2.2.1 and 2.3.1 (“grade point deficit greater than or less than 15”) and in Section 2.3.4 (“remain on Academic Suspension”).

Implementation Planning

A newly formed steering committee will begin meeting immediately to operationalize the recommendations of the Task Force.

Steering committee members:

- Chancellor’s Cabinet and Chair: Doneka R. Scott, Vice Chancellor and Dean, Academic and Student Affairs
- Graduate Student Association President: Margaret Baker

- Communications: Justin Hammond, Assistant Vice Chancellor, Academic and Student Affairs
- Student Body President: McKenzy Heavlin
- Faculty Senate Chair: Herle McGowan, Teaching Professor, Department of Statistics
- Staff Senate Chair: Jill Phipps, Office of Information Technology, Business Services
- Office of the Executive Vice Chancellor and Provost: Katharine Stewart, Senior Vice Provost for Faculty and Academic Affairs
- Task Force Co-Chair: Lisa Zapata, Senior Associate Vice Chancellor, Academic and Student Affairs
- Staff Support: Tia Schulstad, Senior Administrative and Planning Coordinator, Academic and Student Affairs

The steering committee is charged with continuing the work of the Task Force and will identify individuals to serve on implementation teams to research and evaluate each recommendation. Understanding that implementing all of the recommendations might not be possible, the evaluations will consider cost, time, potential barriers, prioritization, and other factors to determine feasibility at NC State.

Implementation teams will consult with, and report to, the steering committee throughout the process. The Steering Committee will share the implementation plan with the university community when it is fully developed.

Closing

The Student Mental Health Task Force members want to thank Vice Chancellor and Dean Scott for the opportunity to serve on this Task Force and to explore how to address the mental health crisis we are experiencing at NC State and across the nation. Although the timeline given to the Task Force was ambitious, the process the Task Force followed was thorough and thoughtful.

The work was not done linearly, as the need was too urgent. The subteams addressed their charges simultaneously, inventorying existing resources, reviewing the literature inside and outside the classroom, examining our policies, and engaging the campus community.

Two overarching conclusions became apparent as a result. First, NC State is dedicated to supporting student mental health and has significant programs, services, and resources in place to do so. Second, there is not only room for, but also a need for, additional efforts. Although we recognize that implementing every recommendation may not be possible, we are confident that we can significantly impact student mental health at NC State. We appreciate the opportunity to make a difference in the lives of our students and at our institution.



NC STATE

Student Mental Health Task Force

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