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**Proposal of the Need for Mental Health First Aid Training of Associate Degree
Nursing Faculty in a Community College Setting**

by

Amy Kelly

A project submitted to the faculty of
Gardner-Webb University Hunt School of Nursing
in partial fulfillment of the requirements for the
Master of Science in Nursing Degree

Boiling Springs, North Carolina

2020

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Abstract

Mental health issues are on the rise among students in universities as well as community colleges. College can be a stressful time in many people's lives especially when the added demand of work and family are involved. Community colleges and universities use counseling services for their mental health needs but sometimes the services are not used due to the stigma that comes along with mental health. Nursing school can be a challenging time for students because of the rigorous training and workload. This project poses to implement Mental Health First Aid Training (MHFA) for faculty and staff of a nursing program at a community college setting. The nursing faculty and staff are the front lines to students and their success. This training will prepare the faculty and staff to identify impending mental health issues and to know which steps to take during a mental health crisis until professional assistance is available.

Keywords: student nurse, mental health, stress, first aid

Acknowledgements

In coming to an end of a very long overdue journey, I cannot help but think what made me want to become a nurse. You see my mom wanted me to become a nurse when I graduated high school and I went with it because I thought she would be proud, but I really was not sure if that was what I wanted. Well of course since I really was not sure at that time, I did not make it very far and I completely went into a different career path. Years later my mom died and while it hurt me to my core I remembered her desire for me to be a nurse so a second time I pursued becoming a nurse, only this time I had a husband and two boys and I had more responsibility than the first time around. But somehow, I did it. I did it with the love of a husband that is beyond the best person in my life, my constant support, encouragement, protection and truly one of a kind. I did it with two active, very busy boys who are a constant Joy and also stood by and had patience with me when I was studying or writing. They were an inspiring motivation on this journey. They made me want to show them that no matter what happens in life if you set your mind to something you can accomplish it, and that it is never too late to chase a dream. To Jason, Carson and Cole there will never be enough thank yous for your support during this time. You all are my reason and I love you.

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I truly love being a nurse and I am so thankful to be accomplishing a goal that can put me in a position to encourage others that are pursuing a career in this wonderful profession.

CHAPTER I

Introduction

Mental health is defined by the World Health Organization (WHO, 2004) as a “state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively, and is able to make a contribution to his or her community” (p. 2). Mental health can include our emotional, psychological, and social well-being. It can affect how individuals think, feel, and act (WHO, 2004). Mental health can also determine how we handle stress, relate to others, and make life choices. Mental health is important at every stage of life but the added stress of being enrolled as a student in a nursing program has the potential to impact mental health in a negative way. Nursing school can add anxiety and life pressures and high demands which can have the potential to pose harmful and even fatal consequences to occur in a person’s life. The Center for Collegiate Mental Health (CCMH, 2018) noted in their 2017 annual report that anxiety and depression are two of the top 10 reasons college students seek counseling. Time management is crucial for being successful while enrolled into a nursing program and most community college students are juggling classwork, jobs and a family, in addition to the rigorous demands of being enrolled in a nursing program of study which can increase the risk for a new mental health diagnosis. Research indicates that anxiety and depression are increased among college students and sadly faculty and college officials may not be aware of the damage anxiety can cause to students and are not knowledgeable of the necessary steps to take to address true mental health disorders (Eisenberg et al., 2012).

Problem Statement

The high degree of stress and anxiety that student nurses face can contribute to a challenge to their mental health. The aim of this project was to proactively teach nursing faculty and staff Mental Health First Aid (MHFA) strategies to recognize students in distress and facilitate healthy conversations to help a student suffering a mental health crisis. Mental Health First Aid (MHFA) is a standardized educational program developed to raise awareness and combat the stigma around mental health problems and suicide in the general public by increasing mental health literacy, improving attitudes, and facilitating help with resources (Kitchener & Jorm, 2002).

Significance

Community college nursing students may be faced with many more challenges than university students as the majority of students that choose to attend a community college are trying to also work and manage their families while trying to stay on task with their coursework. The challenges of balancing school and family can at times negatively impact a student's mental health and influence their ability to be successful while enrolled in a nursing program. In keeping with the general population, the number of college students with a serious mental illness has risen significantly (Twenge et al., 2019). One study of campus counseling centers revealed an increase in the number and severity of students with mental health problems (Benton et al., 2003). Due to the lack of mental health training by faculty and staff, there is a tendency for academics to label emotional difficulties as problem students. This lack of training can be compounded due to academic staff stigma surrounding mental health, and inability to recognize and deal with emotional issues timely and effectively (Yorgason et al., 2008). Nursing faculty and

staff are the front-line presence to nursing students during their educational journey and should be equipped with the correct training to help students that are struggling with a mental health issue and/or crisis. MHFA can be an effective training program to equip nursing faculty and staff with the needed skills to intervene with students in order to maintain optimum mental health for students enrolled in an Associate Degree Nursing Program at a community college setting.

The number of students with a serious mental illness has significantly risen (Storrie et al., 2010). With mental health illnesses on the rise, colleges and universities have to be prepared to know how to face these challenges. Sixty-six percent of student affairs administrators identified in a recent survey that mental health was their top concern (Simon, 2017). It is important for nursing faculty and staff to be prepared to help students succeed if a mental health issue or crisis would arise when the student is taking courses in the nursing program. The purpose of nursing education is to prepare graduates with the knowledge, skills and attitudes to care for patients safely while meeting the State Board of Nursing rules and regulations. The process of nursing school can also become a source of stress for students separate from them fulfilling their career goal (Kang et al., 2009). Defined by the WHO as the 'Epidemic of the 21st Century', stress is a state of experiencing stressors causing uneasiness, dissatisfaction, strain or compulsion in the individual and also reactions to these stressors (Fink, 2017).

In a study conducted by Labrague (2013) it was found that nursing students experienced significant amounts of stress and this intense stress level negatively affected their mental health. Labrague indicates that intense stress experienced by nursing students decreases their ability to think clearly and can negatively impact their academic

achievement. It is also indicated that nursing students who experience high levels of stress often suffer from more mental health conditions such as depression, anxiety, and suicidal tendencies (Cheung et al., 2016). Stress is impossible to avoid in life, however it is important for faculty to have a formalized training program such as MHFA in place to provide faculty with the tools needed to assist students at risk for an altered mental state due to the stressors brought on by being enrolled in a nursing program.

Purpose

The purpose of this project was to propose the need for a structured MHFA training course for Associate Degree Nursing faculty in a community college setting. Stress and mental health concerns are a universal problem among nursing students. In one study it was determined that nursing students had higher levels of stress compared to the general population of students in other health discipline programs (Simonelli-Muñoz et al., 2018). The need to educate and train nursing faculty and staff regarding the stigma, coping skills, and resources necessary to intervene for students experiencing a mental health crisis is imperative for nursing students' opportunity for success.

Theoretical Framework

Jean Watson's Theory of Human Caring is the theoretical framework that was used to guide this project and to examine the caring behaviors necessary to successfully communicate and interact with nursing students. The theory of Human Caring was developed while Watson was teaching at the University of Colorado between 1975 and 1979 (Watson, 1997). The basis for Watson's theory is to bring meaning and focus to nursing as an emerging discipline and distinct health profession that had its own unique

values, knowledge, and practices. This theory has been used in all disciplines of nursing practice.

Watson's Theory of Human Caring is made up of 10 Carative Factors which include: the practice of loving kindness and equanimity within the context of caring consciousness, instilling faith, cultivation of spiritual self, helping and trusting relationships, promoting and accepting feelings whether negative or positive, problem solving, engaging in teaching and learning, creating a healing environment, assisting with human needs, and believing in miracles (Watson, 1997). Watson's (1997) assumptions that caring promotes health and that caring responses accept the person as he or she is now, as well as what he or she may become are nicely tied to MHFA training. This important nursing theory can help guide the successful proposal, development, and implementation of MHFA training as a strategy for faculty to assist students in a mental health crisis while in nursing school. Watson's theory places the nursing student as the focus of care rather than just academics. Having the ability to care is an important trait for nursing faculty to possess and the authentic presence that Watson described in her theory highlights the importance of building meaningful student-to-faculty caring relationships.

Definition of Terms

For clarity and consistency, the following terms related to this project require further explanation and defining. Mental illness is a condition that affects a person's thinking, feeling, or mood (National Alliance on Mental Illness, 2020). Someone's ability to relate to others and function each day may be affected by these conditions. The experiences can be different for individuals even when the diagnosis is the same

(National Alliance on Mental Illness, 2020). Mental Health First Aid (MHFA) is a course that is 8 hours in duration and teaches participants how to help someone who is developing a mental health problem or experiencing a mental health crisis (Mental Health America, 2020). Student nurse is defined as a student in a program leading to a certification in a form of nursing (Medical Dictionary for the Health Professions and Nursing, 2012).

CHAPTER II

Literature Review

A review of the literature was performed using the Cumulative Index to Nursing and Allied Health (CINAHL), PubMed, and Medline to gain an understanding of MHFA and mental health issues experienced by nursing students. The keywords entered into the databases included the following terms: Mental Health First Aid, student nurses, mental illness, stressors of nursing school. The results led to a limited number of scholarly articles on MHFA training in an academic setting, however a fair number were located on stress during nursing school, as well as MHFA training.

Literature Related to Statement of Purpose

The current literature on mental health illness in college students is rising. According to Storrie et al. (2010), emotional and mental health problems of university students worldwide is increasing. Types of problems experienced by students, how staff dealt with these students, and barriers to seeking help are a few of the issues identified. The issues in the studies were emotional/mental health problems experienced by university students and their effects, how university staff members dealt with students suffering emotional/mental health problems, the barriers and strategies of seeking help, and epidemiological trends occurring at the university level. Decreasing the stigma that goes along with the mental health problems of students and increasing the awareness of the available services will help overcome the barriers. There is a high likelihood if universities embrace an understanding of students' mental health needs and have support services available to students that students can meet their academic goals (Storrie et al. 2010).

Research was conducted by Hadlaczky et al. (2014) to synthesize published evaluations of the Mental Health First Aid (MHFA) program in a meta-analysis to estimate its effects and potential as a strategy to increase public mental health awareness. PubMed, PsychINFO, Cochrane Library, and Google Scholar were databases used in the search for peer-reviewed articles related to MHFA interventions. Change in knowledge, attitudes, and helping behaviors were calculated for outcome measures. Results were homogenous, and moderator analyses suggested no systematic bias or differences in results related to study design. Five hundred and ninety papers were analyzed by three reviewers independently and a total of 15 articles were included. The results were that the MHFA program is considered effective in increasing knowledge regarding mental health problems. The data also showed that participating in a MHFA course decreases negative attitudes toward individuals suffering from mental health problems. The results of this meta-analysis suggest that MHFA increases mental health literacy of the general population. It also improves self-recognition, increases insight into one's own emotional well-being and that of others, increases mental health vocabulary, and counteracts stigma regarding mental health. Considering the effects of the MHFA program on knowledge, attitudes, and behavior it can be used as a useful tool for helping with mental health disorders and suicidality stigma.

Simonelli-Muñoz et al. (2018) explored the reliability and validity of the student stress inventory manifestations questionnaire (SSI-SM). In university students the validity for the SSI-SM is uncertain but is used to evaluate in adolescents. In 2014/2015 115 university nursing students in their second year were included for this quantitative, descriptive, cross-sectional study. Personal information was gathered about the students

including academic performance, lifestyle, and personal issues. The 22 items included on the questionnaire were about emotions, physiological, and behavior and a 5-point Likert-type score was used. After the homogeneity analysis was performed there were only 19 items on the questionnaire. One hundred and ten points was the maximum score and higher scores indicated higher levels of stress. Internal consistency and homogeneity of the questionnaire were tested, and a factorial analysis was performed. The homogeneity analysis showed a Cronbach's alpha of 0.924 and the factorial analysis included four factors of self-concept, sociability, uncertainty, and somatization and had a Cronbach's alpha score of greater than 0.700. Higher stress levels were associated in university students in their second year of nursing school that were female, had family conflicts, slept very few hours, and did not drink alcohol.

Mental Health First Aid Training for Students

Crawford et al. (2015) examined the effects of students studying nursing who were being trained in mental health first aid in a large university. The protocol was a randomized controlled trial to determine the efficacy of the Mental Health First Aid (MHFA) in a large university. Participants were randomly selected for the intervention group which was the group receiving MHFA training during the study or the control group which were student's not receiving MHFA training during the study and waitlisted to receive an online version of the course on completion of the intervention. Participants in the intervention group received 6 ½ hours for 2 days in face-to-face sessions. The sample consisted of undergraduate nursing students located in Perth, Western Australia. The criteria for the inclusion was first year undergraduate nursing student, enrolled in the internal study mode, studying at the Curtin University Bentley Campus, and 18 years of

age or older. The sample size was determined by working in a large university and clinical rotations used during the semester. A self-report questionnaire was used to measure confidence to respond to mental health problems, knowledge recognition and first aid intentions towards someone experiencing a mental health problem, and attitudes and stigmas on mental health in general. The questionnaire was given to participants three times starting at the baseline, immediately post and 2 months after the intervention. The success from this study provides information that will support the early implementation of MHFA training for nursing students. The implementation will help increase their mental health literacy.

Hung et al. (2019) explored undergraduate nursing students' perceptions and experiences of participating in Mental Health First Aid training. The study followed a qualitative descriptive design, and the researchers aim was to develop an understanding of how the MHFA training would influence student nurses and attitudes toward individuals' mental health. In July 2017 participants were gathered from a pool of eight bachelor's nursing degree students in Hong Kong. A pre and post intervention study was conducted examining the effectiveness of MHFA training on mental health literacy and attitudes. A 12-hour MHFA training course was required for participation in the study. Individuals that were eligible for the study were contacted by the researchers via telephone or email giving a 2-week time frame to respond to the invite. The data collection process was conducted through individual, semi-structured, face-to-face interviews by the first and second authors of this study. Five themes were identified in the participants experience with MHFA training: reinforced knowledge and understanding, enhanced techniques and skills, rectified beliefs and values, improved self-awareness of

personal mental health status, and heightened sense of achievement and satisfaction. The overall findings revealed the importance of introducing the MHFA training program into the general nursing curriculum. The findings could also offer insights into the curriculum design of nursing programs.

A study was conducted in Australia by Kelly and Birks (2016) to explore the experiences of students who completed a tailored 13-hour version of MHFA training course in undergraduate and midwifery nursing studies. The study included a survey design as a questionnaire specifically for this study. The survey consisted of 19 items: eight questions were for demographic purposes, five were Likert type questions, and six were open response questions. The survey was administrated online by a subscription survey service. The data collected was quantitative data and it was analyzed using descriptive statistics. To ensure the validity of the questionnaire, a panel of students and academic faculty reviewed the survey. Sixty-six students participated in the survey and the majority of participants were female aged 17-55 years. The results of the study make it clear that the students who responded to the survey found the course relevant and useful. The impact of the course exceeded what the students had expected. The research results support the recommendation that the MHFA training be introduced to universities that currently do not provide this course.

A study was conducted by Senturk and Dogan (2018) to determine the stress experienced by nursing students during nursing education. The study was performed with 318 nursing students in Southeastern Anatolia Region in Turkey. Student Information Form and Stress in Nurse Education Questionnaire [SINE] were used to collect data. The data for this study was one-way ANOVA and Pearson correlation. Over half of the

students who participated in the study were male and close to half were in their second year. The results of this study were stress experienced by students during nursing education was a little above moderate level and stress was experienced both in the academic area and clinical area equally.

Loureiro and Costa (2019) conducted a study to evaluate the impact of mental health first aid training program in undergraduate nursing students. The study was a quantitative pre-experimental study with a single group and pre and post intervention evaluation. The sample of students are from a region of Continental Portugal in the second, third, and fourth years in a bachelor's degree in nursing program. Randomly 90 students were selected. The participants were contacted via email to participate in the program. Forty-six students participated in the course, eight males and 38 females. The tool used for the pre- and post-intervention was the Questionnaire for Assessment of Mental Health Literacy-QaAliSMental. The Primeriros Socorros em Saude Mental (PSSM) Program which is translated from the original Mental Health First Aid Educational Program was created and developed in Australia. The PSSM program had a duration of 14 hours which was broken up into two 7-hour training days. Using Cohen's d the odds ratio (OR) the effect size was measured. The response format of the questionnaire was on a Likert Scale of one not confident and five extremely confident. The limitations and weaknesses of this study are those related to the research design. The non-existence of a control group can affect the validity of the study. Not having an equitable distribution of students throughout the three years is another limitation to the study. To increase the mental health literacy in nursing students this study supports that the MHFA program is an effective intervention to lead to the increase.

Porter (2019) conducted a study that documented student mental health crises on a college campus over a 3-year period of time. The data examined for the study were the types of crisis reported such as suicide/homicide risk, psychotic-like behavior, assault, self-harm, identified triggering events, and the types of internal and external campus supports activated. The study was conducted over a 3-year academic year from 2013-2016 at a large Ontario community college campus. Coding was conducted on 311 mental health-related student crisis incidents. The college's Research Ethics Board approved this study. The incidents that were coded for this study were 176 suicide risk assessments (SRAs), 90 Residence Incident Reports (RIRs) flagged as mental health related, 37 mental health apprehension reports (MHAs), and 35 Code of Conduct Decision reports (CCDs) that have been flagged as mental-health related. Of the 176 SRAs coded, 111 were females and 65 were males. Eighty-eight students were registered as having a disability, and of this, 82 were identified as having a psychiatric disability. Of the 90 RIRs 54 were female and 36 were male. Fifty-two of these students were registered having a disability and 43 had a psychiatric disability. Over half of the MHAs were female and 16 were male. Nineteen of these students had a disability and 17 had a psychiatric disability. Nineteen females and 16 males were involved with the incidents related to the CCD incidents. The documented cases of mental health crises that occurred during the 3-year time period averaged 2.0 events per week. The types of mental health crises and the data give an insight to what can occur as well as the frequency of occurrences. The results of this study were limited because only one post-secondary setting was used for data collection of the documented mental health crises. The results of this study highlight the importance of maintaining an inclusive post-secondary

environment, where policies and procedures are looked at through the lens of mental health.

Rein et al. (2018) conducted a study that evaluated Kognito's effectiveness in preparing users to intervene with at risk students. The Kognito program includes multiple, separate online training modules designed to train students, faculty, and staff through animated interactions with virtual human characters exhibiting signs of psychological distress. The study was conducted at West Virginia University (WVU) which has a student body population of 29,175 students at both the graduate and undergraduate level. Data was collected from 4,428 participants. Only students who completed both the pre and posttest training surveys were used for analyses which brought the total number of participants down to 2,727 participants. The participants completed online assessments twice: before and after the completion of the training. The Kognito training modules were available online to the West Virginia University campus faculty, staff, and undergraduate and graduate students beginning April of 2014 through September of 2015. A series of three-way mixed model analyses of Variance (ANOVAs) were used for data assessment. This study is the first study for the evaluation of the Kognito training program. All of the training modules produced significant improvements in participant's self-reported Preparedness, Likelihood, and Self Efficacy to help at risk students. Of the three domains, the training programs overall greatest improvements were in the trainees perceived Preparedness to intervene with a troubled student. The training program had limitations such as all data was self-reported and was subject to demand characteristics. All assessments were completed online and unsupervised which could have resulted in distraction and no adherence. Data were only

collected from students and faculty at WVU. Kognitio is an effective online tool for large scale training that improves the trainees' perceived abilities to help students and shows promise for use in an academic setting.

A qualitative study was conducted by Foster et al. (2003) to examine the college experiences of people with serious mental illnesses. All participants selected for this study had prior college experience and symptoms of mental illness. The sample includes 15 men and 20 women. Participants had diagnosis of schizophrenia and related disorders, bipolar disorders, major depression, and generalized anxiety disorder. This study had limitation because the participants were identified from a list of research participants in a previous project. For the most part college students with psychiatric disabilities are not receiving services designed to maintain their college attendance. One way to help students with psychiatric disabilities is to make improvements at the service provision in educational institutions. There are many barriers that affect students with psychiatric disabilities who try to go to college. These barriers can be addressed by coordination of community and campus-based services and development of support services. The new service technologies should increase the likelihood of student support and college completion.

Literature Related to Theoretical Framework

Watson (n.d.) describes the Theory of Human Caring as a caring science perspective that is grounded by relationships and connectedness. Caring relationships are authentic, intentional, and sometimes spiritual. The caring model is often considered the foundational framework of the nursing profession (Watson, n.d.). According to Watson (n.d.), caring is transpersonal and moves beyond the ego-self and reaches deeper

connections to the spirit, to detect the other person's condition of being. Caring is also inclusive to self, others, and patients and families (Watson, n.d.). Human caring is about understanding the patient and family on a deeper level and respecting life experiences/cultures to be able to promote healing through a difficult situation (Watson, n.d.). Caring relationships can help to promote positive student outcomes.

CHAPTER III

Needs Assessment

Target Population

The target population for this project will be selected from one of 58 community colleges in the state of North Carolina. The population for this project is the full-time nursing faculty and staff who serve in the Associate Degree Nursing (ADN) Program in the nursing department at this community college. The target population will include six ADN full-time nursing faculty, one director of nursing, and a secretary/admission specialist.

Target Setting

The target setting for this project is a community college that serves two counties and has a student population of over 5,000 students annually. This community college has an outstanding reputation in the community. The community college admits 150 students into their Associate Degree Nursing program each year. For over 50 years this community college has maintained a tradition of excellence through its commitment and dedication to students, in fact one of their core values is student success which aligns nicely to this MHFA training proposal. According to the Revealing Institutional Strengths and Challenges (Gaston College, 2018) survey administered to the students at the participating college in 2018, students reported that their greatest challenge to student success was work and personal issues. While work was a slightly higher concern of the two areas when disaggregated, we have to be mindful that mental health is typically underreported in these types of surveys. The Counseling Center in Student Affairs at the college has also seen a drastic increase in the number of students presenting with personal

and mental health concerns over the past few years, according to the Vice President of Student Affairs at the community college where the project will be implemented. The college's Conduct Awareness Response Encouragement (CARE) Team, which serves as a student behavior intervention team, has also seen an increase in student mental health issues intersecting with student conduct and campus safety. The challenge facing the Counseling Center in Student Affairs is how to adequately navigate this increase in student mental health concerns with a student success and safety mindset and limited staff and resources. This is why it is so imperative to begin program level MHFA training for faculty member.

Sponsors and Stakeholders

The project sponsor is the Dean for the Health and Human Services Division at the college and she was responsible for leading the ADN Nursing Program within her Dean duties. An additional sponsor includes the local hospital practice partner that offers MHFA training at no cost to companies and institutions.

The project stakeholders consist of the Director of Nursing Programs, Associate Degree Nursing Lead Faculty member, classroom, lab and clinical nursing faculty and nursing admission specialist/secretary.

SWOT Analysis

A SWOT analysis was conducted to identify strengths, weakness, opportunities and threats related to this project and include the following.

- Strengths include
 - Community College Associate Degree Nursing Program willing to participate in project,

- availability of staff and faculty at a local community college,
- space on campus to conduct or implement the MHFA training program,
- support from academic dean to initiate project,
- a structured program for MHFA training already exists, and
- a local hospital system willing to do the MHFA training at no cost.
- Weaknesses include
 - current lack of mental health first aid awareness among the college,
 - mental health stigmas that already exist among faculty members,
 - staff may not see the value in participating in MHFA training at first, and
 - faculty that will need to add this training to their already busy schedules.
- Opportunities include
 - a new director for the nursing programs with recent merger (Practical Nursing, Associate Degree Nursing and Nurse Aide),
 - the opportunity to offer the MHFA training to other nursing faculty, not just the Associate Degree faculty members, and
 - flexible scheduling or incentive for faculty to attend the MHFA training.
- Threat includes
 - one hundred percent of nursing faculty and staff may not be willing to participate in the MHFA training.

Available Resources

The needs assessment revealed that the community college selected for this project is well equipped to make the MHFA training for their nursing faculty possible. Very few additional resources are needed to initiate this project. Scheduling of the course

in a classroom with audiovisual equipment and a possible incentive such as professional development hours awarded for faculty to attend may be needed for successful implementation. The community college has adequate classroom space to hold the MHFA training and a willing hospital partner to teach the course at no cost.

Desired and Expected Outcomes

The benefits of this project will be to implement a MHFA training program for the nursing faculty of an Associate Degree Program at a local community college in order to equip faculty in dealing with mental health illness or crisis among their students. This MHFA training for the faculty may have a positive outcome by increasing retention and graduation rates among the students. The desired outcomes for students that receive mental health first aid as a result of a mental health crisis training for their faculty are as follows:

1. Preserve life when in danger of harm to self or others
2. Receive help to prevent the problem from becoming more serious
3. Enhanced recovery steps
4. Receive comfort and support

The expected outcome for the faculty and staff that participant in the MHFA training will be to recognize symptoms of mental health problems, how to offer and provide initial help, and how to guide a person toward appropriate treatment and supportive help. MHFA is not intended to teach participants to be therapists, only first responders to mental health problems or crisis.

Team Members

The project lead will establish a MHFA training committee comprised of the

Dean, Director of Nursing Programs, and Associate Degree Nursing Lead Faculty member. This team will meet weekly to discuss the plans for implementation of the project, scheduling, and future plans for newly hired faculty members. The project leader will act as the team leader during the planning and implementation phase of the MHFA training project.

Cost/Benefit Analysis

Proposal and implementation of this MHFA training project will not require a capital purchase or equipment purchase by the participating community college. The college will use their existing classroom space to conduct the training for the nursing faculty. The course will be provided at no cost to the faculty by one of the hospital practice-partners who are certified trainers of the MHFA training curriculum.

CHAPTER IV

Project Design

Goal/Overall Purpose

First aid is defined as the help given to a person who is injured before regular or medical aid can be obtained (Merriam-Webster Dictionary, 2020). Mental health first aid is the help offered to a person developing a mental health problem. The overall purpose of this project is to equip nursing faculty and staff with the knowledge of early detection of mental health problems and intervention steps needed in handling a student experiencing a change in their mental health status until professional personnel are available.

Objectives

The objective of this project is to have all nursing faculty and staff trained at the participating community college and equipped with the appropriate knowledge about mental health problems to allow them to recognize a crisis may be developing and steps to intervene until professional assistance is available. The objectives for the participants of the MHFA training are the following:

1. Verbalize an understanding of different types of mental health problems
2. Identify steps for first aid for developing mental health problems in their students such as: depression, anxiety, psychosis, substance use, and eating disorders
3. Demonstrate steps to take for a mental health crisis with a student until professional personnel are available

Plan and Material Development

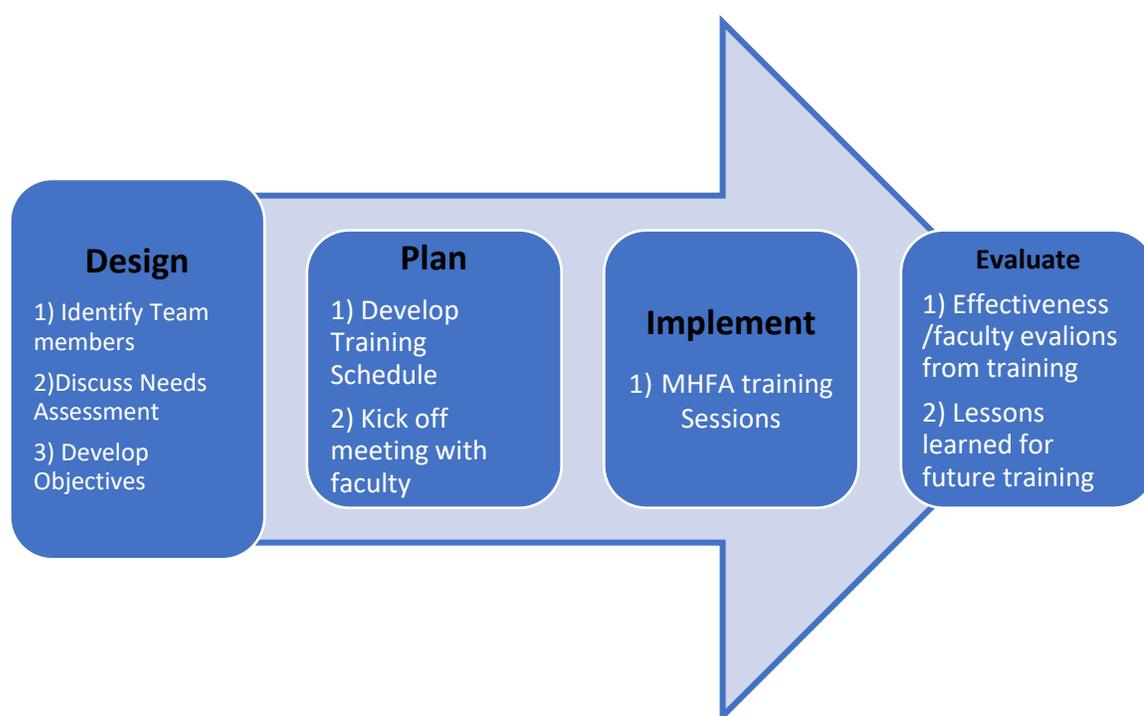
The MHFA training course will be taught by the local hospital practice partner

that is an approved trainer of this important curriculum. The course will be offered during a student break where it does not directly impact student instruction. All materials for the course such as the Mental Health First Aid Training Course Agenda (Appendix A) and the Mental Health First Aid USA textbook (Appendix B) will be provided to participants.

Timeline

Figure 1

Timeline for Mental Health First Aid Training



Note: Figure 1 outlines the timeline for the proposal and implementation of the MHFA training.

Budget

Proposal of the MHFA training program will not require a capital and/or equipment purchase from the participating community college in order for the project to be implemented. The college will use their existing classroom space to conduct the training session.

Evaluation Plan

To evaluate the effectiveness of the MHFA training program the project lead will distribute a survey titled the Confidence Scale (C-scale) created by Dr. Susan Grundy. A copy of the scale can be found in Appendix C. The C-scale survey will be given to faculty to assess their confidence with MHFA training and their ability to talk with a student experiencing a mental health crisis.

Grundy (1993) believes that confidence is considered a pivotal aspect of delivering nursing care to patients. Grundy (1993) utilized the C-scale survey to assess nurse's confidence in physical assessment to establish the reliability and validity. The tool's validity and reliability have been established by Grundy (1993). Cronbach's alpha ranged from .93 (n=27) to .94 (n=18). Permission to use the tool and modify it to meet the needs of this project have been granted by Grundy (Appendix D). Grundy (1993) used the 100-mm confidence visual analog scale and also a confidence verbal descriptor scale to guide the development of the C-scale scores. The C-scale is one page in length and presents five statements to be answered by Likert-type scale. The scale allows participants to select a number range from one, being no confidence to five, being extremely confident (Grundy, 1993). The nursing faculty will place a circle around the appropriate number that corresponded with their confidence level post MHFA training.

To establish validity, the C-scale was presented to 39 students four times over a semester, along with 22 staff nurses at a local hospital with at least one year of experience. The staff nurses were employed in a medical-surgical unit with ages ranging from 29-52. During the final analyses, five students were eliminated from the study because they left the nursing program. Comparison of the mean scores between the

students (13.6 at six weeks, 18.5 at the end of the semester) and the experienced nurses (21.7), revealed the mean score of the practicing nurses was significantly higher than the student scores (Grundy, 1993). There was consistent demonstration of high internal consistency reliability throughout all periods of administration of the C-scale to the staff nurses and students. Through the study construct validity of the C-scale was supported by the results of both the students who are developing physical assessment techniques and the experienced nurses' utilization of the physical assessment. As Grundy (1993) expected, confidence among the nursing students significantly increased, which contributed to the validity of the C-scale.

CHAPTER V

Dissemination

Dissemination Activity

The project lead will formally present the project proposal to the Dean of the Health Division and the Director of Nursing Programs to discuss the need for MHFA training of the Associate Degree Nursing Faculty. The purpose of this project was to support the need for associate degree nursing faculty and staff to be trained in MHFA in order to support student's success while in the nursing program.

Limitations

The size of the Associate Degree nursing faculty team is small which could limit the ability to have a large population to implement the MHFA training course to initially, and could affect the amount of data collection. The implementation of the MHFA will originally occur in one community college setting in North Carolina which will affect geographic generality. Also, MHFA implementation needs to be replicated and data collected in order to support statistical findings related to the project.

Implications for Nursing

Faculty should develop caring relationships with students in their classes by providing supportive, non-judgmental care in dealing with students who may have a mental health issue or crisis. MHFA takes the same approach as traditional first aid in that comfort should be offered to someone until professional assistance or support can be provided. Success of an implementation of MHFA could increase nursing students' success.

Recommendations

Future implementation of MHFA training to all of the nursing faculty and potentially to the entire college faculty members is recommended. Also, the success of MHFA could entice colleges and universities globally to use MHFA as a support for students.

Conclusion

It is reported that 75% of mental health disorders develop before the age of 24, and one in three college students state that in the past year they have felt so depressed it was hard to function (Chen, 2019). People with mental health issues often suffer alone, and stigma stops many from getting the help that they need. Starting with a small target population like the nursing faculty to begin the MHFA training may only be the beginning of a future of mental health support for college students. MHFA can help with student identification of needs and mental health improvement, leading to greater outcomes for students and the college overall.

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Appendix A

Mental Health First Aid Training Agenda



Mental Health First Aid Training

Course Agenda

Nursing Faculty & Staff

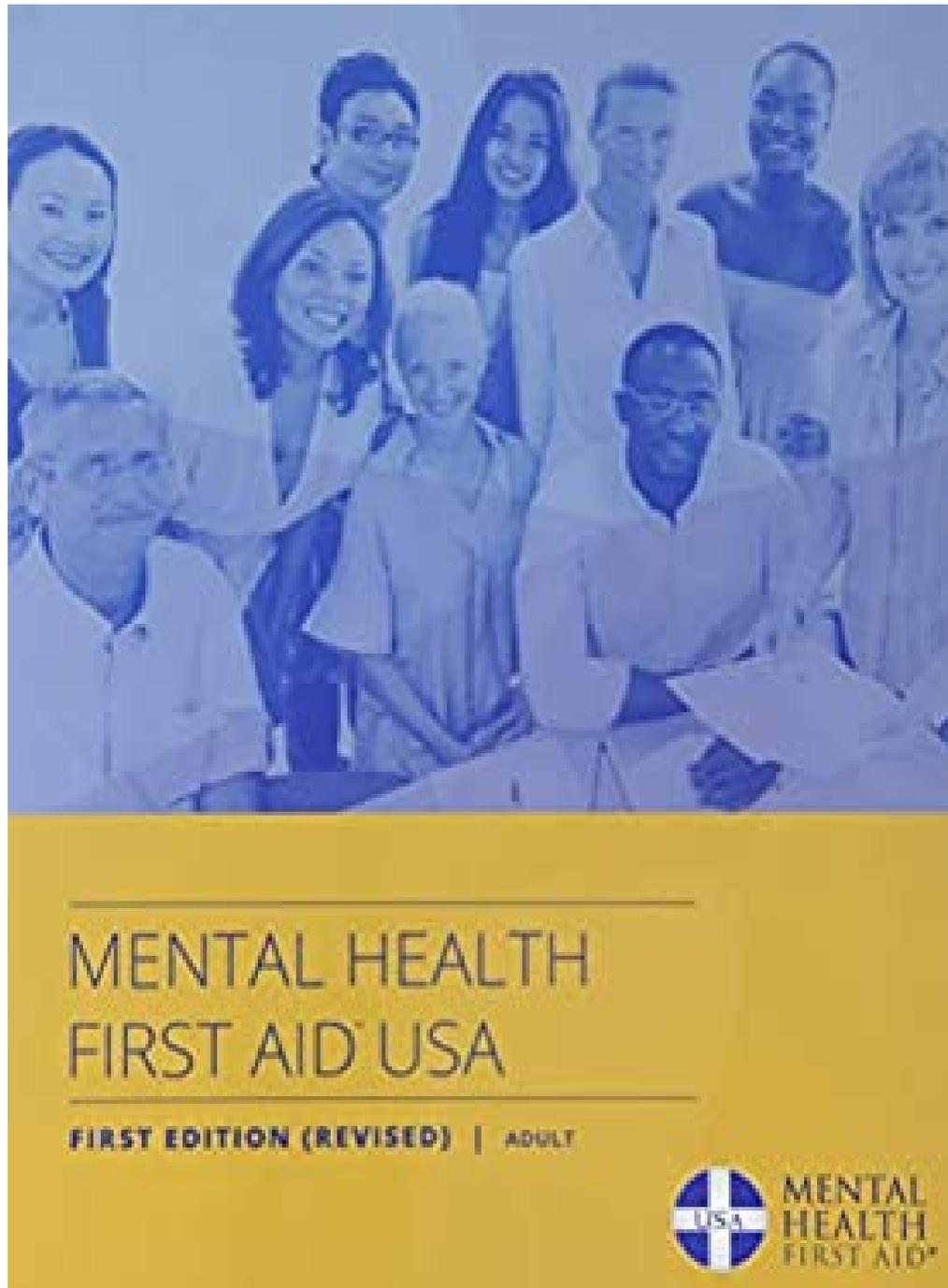
Session 1 Part 1	8:00 am	Welcome & Introduction What is MHFA Exploring the Higher Education Culture Mental Health Problems in the USA The MHFA Action Plan Understanding Mental Health Disorders
Break	10:00 am	
Session 2 Part 2	10:15 am	First Aid for Suicidal Behaviors What is Non-Suicidal Self-Injury First Aid for Depression and Anxiety
Lunch	12:15 pm	
Session 2 Part 2	1:15 pm	First Aid for Panic Attacks First Aid for Traumatic Events

		Understanding Disorders in Which Psychosis May Occur First Aid for Acute Psychosis
Break	3:15pm	
Session 2 Part 2	3:30 pm	Understanding Substance Use Disorders Substance Use in the Higher Education Population Using MHFA Higher Education Resources Participant Review and Course Evaluation
Adjourn	5:30 pm	

Appendix B

Textbook: Mental Health First Aid USA

Textbook: Mental Health First Aid USA (ISBN 978-0-692-60748-0)



Appendix C

C-Scale (Grundy)

C-Scale

Directions: Circle the number which best describes how you perceive your current ability to work with a nursing student having a mental health crisis. (NOTE: Make sure that the circle encloses just ONE number.)

1. I am certain that my performance is correct:

1 2 3 4 5

not at all

certain for

fairly certain

certain for

absolutely

certain

only a few
steps

for a good
number of
steps

almost all
steps

certain for all
steps

2. I feel that I perform the task without hesitation:

1 2 3 4 5

I have much
hesitation

a fair amount
of hesitation

a good part of
it without
hesitation

almost
completely

absolutely no
hesitation

without
hesitation

3. My performance would convince an observer that I'm competent at this task:

1 2 3 4 5

not at all

agree, a little

for much of it

for almost all

for absolutely

of it

all of it

4. I feel sure of myself as I perform the task:

1 2 3 4 5

not at all

very little

for much of it

for almost all

for absolutely

of it

all of it

5. I feel satisfied with my performance:

1 2 3 4 5

not at all

very little

for much of it

for almost all
of it

absolutely
satisfied with
all of it

Appendix D

Permission Email to Use C-Scale from S. Grundy

On Friday, July 31, 2020, 4:40 PM, Grundy, Susan <grundys@csus.edu> wrote:

Dear Amy: (Amy Kelly)

You have my permission to use the C-Scale I developed for your thesis research at Gardner-Webb University, "The Need for Mental Health First Aid Training of Associate Degree Nursing Faculty in a Community College Setting." The copy I am sending to you has "head-to-toe assessment" listed as the skill. It is very easy to change the skill, the type of patient (pediatric versus adult), or the setting. Please feel free to modify the C-Scale as you wish for your research activity that will include the measurement of confidence.

The C-Scale is under copyright protection but there is no fee attached to using the instrument. I do ask that you credit me as the developer of the original instrument. When the subject completes the scale - just add the numbers circled on each of the 5 statements. An individual's score can range from 5 (low confidence) to 25 (high confidence). Do not add the 5 numbers and then divide by 5.

The correct citation of the publication discussing the C-Scale is Nurse Educator (1993), Vol. 18, No. 1, pp 6-9. (The 1992 issue of the article lacked all of the information that I

had edited.) The 1993 article contains the information you need on validity etc. Let me know if you have a problem with obtaining this publication.

If you have any questions, feel free to email me. If you need a formal letter granting permission to use the C-Scale, let me know. A formal permission letter might be required by some academic institutions, publishers, or others who will not accept a professional email from the holder of material protected by copyright.

I would love to have an abstract of your findings when you are done. I wish you the best of luck with your thesis research. Thank you for adding to the body of nursing science.

Sincerely,

Susan Grundy, EdD, RN

Professor Emeritus

California State University, Sacramento

Also, please let me know if you get this email and that you are able to open the attached copy of the C-Scale.