

## **Mission**

The Mission of Counseling and Psychological Services (CAPS) is to advance student success by promoting emotional wellness and psychological development via culturally competent, high quality, and confidential mental health services, prevention and educational programming, campus wide consultation, crisis response, and outreach. Our staff and trainees are committed to providing a safe, welcoming, and affirming environment for all students.

## **Vision**

Counseling and Psychological Services (CAPS) is a trusted, visible, wide ranging university counseling center that continually strives to enhance the mental health and overall wellbeing of our students and the greater campus community.

## **Core Values**

Inclusion and Equity, Integrity, Collaboration, Education, Connectedness and Support, Social Justice and Diversity, and High Quality Service

## **Staff**

**Director:** Sara Byczek, PhD, LP

**Outreach Coordinator:** Charles Starkman, PsyD, LP

**Group Coordinator:** Lusine Hambarzumayn, M.S., M.A., LLP

**Coordinator of Case Management:** Jimmy Vuong, MSW, LMSW

**Coordinator of Multicultural Services:** Joanna Ransdell, MSW, LMSW

**Temp Staff** (from October 2019- June 30<sup>th</sup> 2020): Jessica Ryder, LLPC

**Administrative Staff:** Bernadette Trisko

## **Hiring**

During the 2019-2020 academic year, CAPS underwent multiple staffing changes, most of which focused on filling gaps needed to implement the new clinical service delivery modeled started in the Fall 2019 semester. The Associate Director position, which was vacated at the end of May 2019, was changed into a clinical position. The two previous part-time clinical positions were both changed into full-time positions, with one clinician accepting the offer of full-time work and the other declining and leaving the institution. These two changes went into effect September 1<sup>st</sup>, 2019. In October 2019, CAPS hired the Outreach Coordinator position (the previous Associate Director Position) and in November hired the Coordinator of Multicultural Services (the previous part-time position).

## **Clinical Services**

CAPS provides a variety of clinical mental health services for registered University of Michigan-Dearborn students. Students seeking services come to our office any time Monday through Friday between 8am to 5pm to complete a confidential computer assessment that assists us in determining the best services to meet their unique needs. Students whose needs fall outside the appropriate scope of services that CAPS provides are provided case management to assist them in connecting to appropriate services within the community. CAPS provides the following clinical services:

- Solution-focused individual counseling
- Group counseling
- Walk-in appointments for urgent and crisis issues
- Case management
- Referrals for campus and community providers and psychiatric evaluations

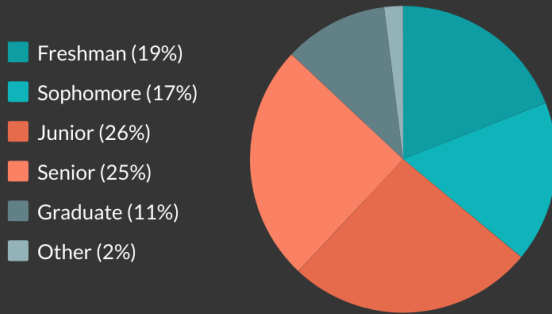
This year (July 1<sup>st</sup>, 2019- June 30<sup>th</sup>, 2020) CAPS saw a 16.5% increase in the number of students receiving clinical services and a 12.5% increase in the total number of sessions conducted. The average number of sessions per student was 6. Approximately 57% of students received 1-5 sessions, 25% received 6-10 sessions, and 14% received 11-20 sessions, reflecting the clinical model change to a more solution focused approach. The most common diagnoses were Generalized Anxiety Disorder, Adjustment Disorder with Anxiety and Depression, and Major Depressive Disorder. Over 403 students sought out therapy services, 295 of these requests marked non urgent, 88 semi-urgent and 20 urgent. The average wait time for an intake appointment during the Fall and Winter semester was 8 days with a range from one day to 4 weeks.

In both the Fall and Winter semester, CAPS ran four separate interpersonal process therapy groups serving over 50 clients through this method of treatment. Additionally, over 50 students presented to CAPS in crisis requiring a same-day urgent appointment.

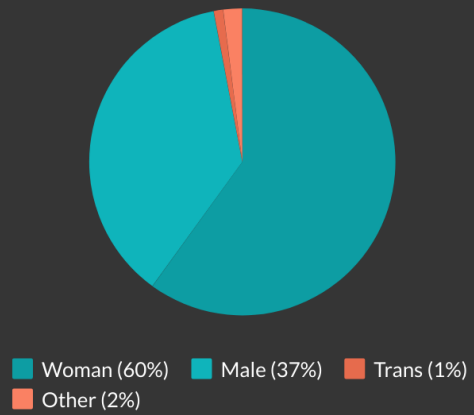
# CAPS Clients

## Demographics

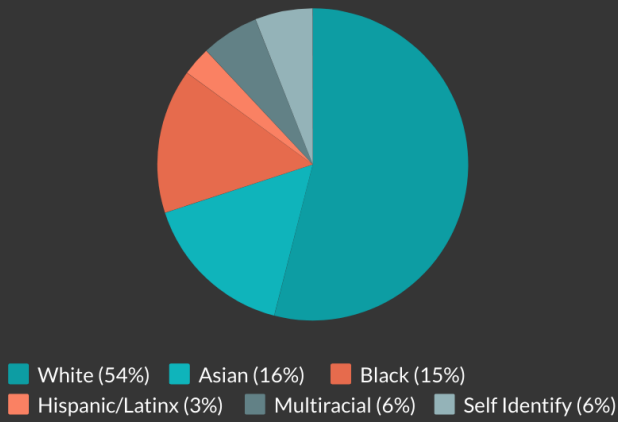
### Academic Status



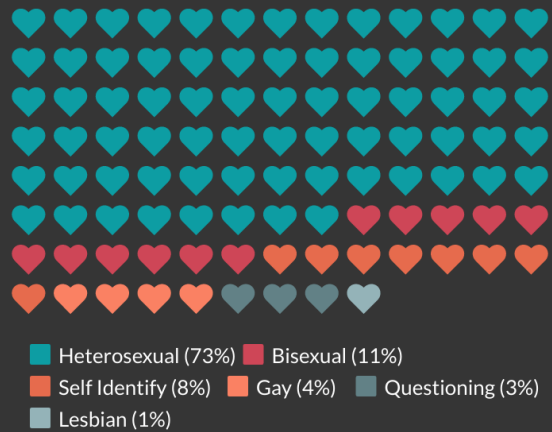
### Gender



### Race

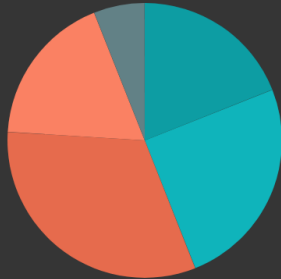


### Sexual Orientation



## Data

### Experiencing current financial stress



Always (19%) Often (25%)  
Sometimes (32%) Rarely (18%) Never (6%)

51% of clients are involved with extracurricular activities.



11% of clients are registered with Disability Services.



49% of clients have received no prior counseling.



30% of clients are first-generation college students.



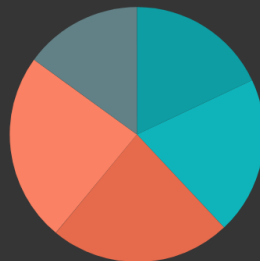
9% of clients are International students.



## Support

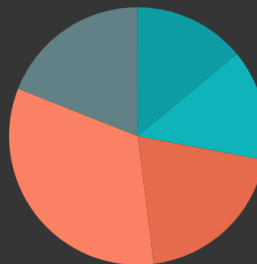
### When asked if they felt support from their family

Strongly disagreed (18%)  
Somewhat disagreed (20%)  
Neutral (23%)  
Somewhat agreed (24%)  
Strongly agreed (15%)



### When asked if they felt social support

Strongly disagreed (14%)  
Somewhat disagreed (14%)  
Neutral (20%)  
Somewhat agreed (33%)  
Strongly agreed (19%)



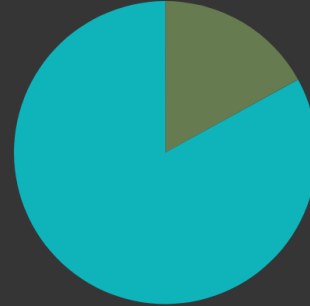
# Reports

Reported being physically attacked



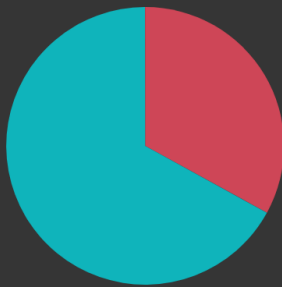
Yes (10%) No (90%)

Reported sexual violence



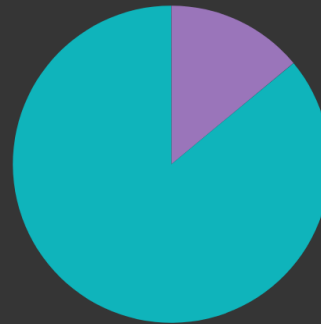
Yes (17%) No (83%)

Reported childhood emotional abuse



Yes (33%) No (67%)

Reported childhood physical abuse



Yes (14%) No (86%)

28% reported engaging in self injury, with 12% within the last year doing so.



39% reported considering suicide, with 17% within the last year.



12% reported a prior suicide attempt, with 4% attempting within the last year.



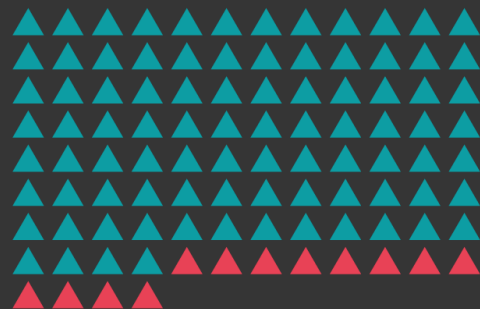
21% reported having an unwanted sexual experience, with 5% within the last year.



25% reported being harassed/abused within the last year.



Clients with prior mental health related hospitalization



Not hospitalized (88%) Hospitalized (12%)

## **CAPS Consultation Recommendations and Changes**

During the Summer 2019 semester, the Provost Office approved the hiring of a consultant to review the services and processes at CAPS to assist with decisions related to hiring and service delivery. The consultant hired was Dr. Todd Sevig, the director of the University of Michigan Ann Arbor CAPS. Over several meetings with CAPS staff, the CAPS director and key campus stakeholders, Dr. Sevig submitted recommendations to the University. These recommendations were then discussed and modified in an all-day meeting between Dr. Sevig and Dr. Byczek. After discussion with key stakeholders, several of the recommendations were approved for implementation including the following:

- Changing the Associate Director Position to a full-time clinical position (Position hired in October 2019)
- Changing the two part-time clinical positions, to two full-time clinical positions (effective September 1<sup>st</sup>, 2019)
- Implementation of Coordinator Roles for all clinical positions (effective September 1<sup>st</sup>, 2019)
- Change of Service Delivery Model (effective September 2019)
- Development of physical space to include more private waiting area, a group therapy room and an additional office space (effective September 2019)
- Implementation of an after-hours crisis line, e.g. Protocol (effective January 2020)

### **Change of Service Delivery Model and Coordinator Roles**

CAPS' model of clinical service delivery changed to a solution-focused treatment for students. Session limits no longer exist, empowering the clinicians to utilize a "modified step care" approach to manage their clinical client load. Treatment options for students expanded to include topical psychoeducational workshops, daily offered group therapy, self-help education, case management, and individual counseling. Clinicians were provided training and guidelines to assist them in the move to solution-focused short-term therapy. This model left room for students who required more extensive therapy but did not have the resources or means to receive such services in the community.

Students still come into the CAPS suite to initiate services. They are directed to complete the online assessment which takes approximately 15-20 minutes. The administrative assistant helps the student complete this assessment and utilizes pre-arranged criteria to determine whether the student's request is appropriate for a trainee or senior staff clinician. The administrative assistant then immediately schedules the intake appointment for the student. If the student presents in crisis or endorses suicidal or homicidal thoughts during the online assessment, the administrative assistant has the student meet immediately with an available clinician for a consult. A student's appropriateness for services, type of service, and length of service is determined during the initial intake.

In order to implement this new modified step care model, the creation of more office space, including a dedicated group room, was approved and completed in September 2019. With the needed space, CAPS hours remained 8am-5pm, but more group services and workshops were offered. CAPS clinicians' schedules were modified based on the below breakdown of work hour expectations:

For non-clinical supervisors:

- 4 intakes
- 2 hours group therapy (every clinician co-leads 2 groups a semester)
- 20 hours individual therapy appointments
- 1 hour for staff meeting/case consultation meeting
- 5 hours for paperwork/prep
- 4 hours for outreach/liaison relationships/workshops/presentations
- 4 hours dedicated to coordinator role

For clinical supervisors:

- 3 intakes
- 2 hours group therapy (every clinician co leads 2 groups a semester)
- 1 hour clinical supervision
- 1 hour supervision of supervision
- 2 hours to review tapes
- 17 hours of individual therapy appointments
- 5 hours for paperwork/prep
- 4 hours for outreach/liaison relationships/workshops/presentations
- 4 hours dedicated to coordinator role

In addition, each clinician was assigned to be a coordinator of the areas listed below and to develop an official liaison relationship with two campus offices and one of the colleges.

- Group Services
- Outreach
- Case Management
- Multicultural Services

## **Training Programs**

Counseling and Psychological Services has been a training site for doctoral and masters level psychology and counseling trainees for more than 15 years. The training program offered by

CAPS is developmentally based. Trainees enter their experience at the office at different points in their graduate degree and therefore their experiences are individually tailored to meet their unique needs. The program trains all trainees in evidence-based practices and approaches. The center takes a social justice approach to working with clients and helps to work with trainees in developing their own multicultural competencies and lens while having the opportunity to work with a diverse student population. New this year was implementation of a seven-week social justice seminar series that focused specifically on exploring the intersections of mental health, emotional wellbeing and social justice and the role of mental health clinicians in this work.

Training is an important part of CAPS' identity. The experience of having graduate level trainees completing their practicums at the office not only provides more options of clinicians from various backgrounds for UM-Dearborn students, but enriches the experiences of CAPS staff who work with the trainees as well. This year we were able to offer three positions, two masters-level psychology practicums and one masters-level social work practicum. These graduate trainees came from two different universities and two different programs.

### **Psychology & Social Work Masters Training Program**

Reilly Chabie (Eastern Michigan University) and McKendra Cramer (Eastern Michigan University) made up our cohort of master's level psychology trainees. Katherine Murton (University of Michigan Ann Arbor) was our first master's level social work trainee. Master's-level practicum students are expected to carry a caseload of 6-8 individual clients, engage in outreach/program activities, participate in weekly individual and group supervision, attend weekly professional development seminars, engage as a liaison for a pre-identified area on campus, and-new this year-assist in co-leading a therapy group. Graduate trainees liaised with the Office of Student Life, Center for Social Justice and Inclusion, and the Union Office Campus Housing.

Master's-level trainees are assigned clients whose reported concerns are less severe in order to match their developmental level as a clinician, as this practicum is typically their first experience engaging as a therapist. The severity of the presenting concern does increase as the trainee gains more experience, skills and confidence. All graduate trainees are required to video record all their sessions and provide their individual supervisor with at least one hour of recordings each week to be reviewed. The three trainees provided 18% of all the clinical appointments for the Center this year.

Due to the shift to remote services in March resulting from the COVID-19 pandemic, the decision was made to have trainees transfer their clients to senior staff. The CAPS director worked together with the trainees' clinical supervisors to modify the remaining six weeks of their training experience to focus more on providing online workshops and professional development training opportunities.

### **Outreach**

CAPS presented over 65 outreach/presentation activities this academic year up to mid-March, reaching over 1,900 campus members including National Depression Screening Day and Eating

Disorder Screening Day. Additionally, CAPS participated in several events providing resource tables.

In mid-March, CAPS, along with the entire UM-Dearborn Campus, moved to remote access due to the COVID-19 pandemic. CAPS continued to provide outreach programs, quickly pivoting to online workshops as a primary mode of conducting outreach to campus. From March 16<sup>th</sup> to June 30<sup>th</sup>, CAPS conducted over 65 online workshops attended live by close to 500 individuals, with many more watching the recorded workshops afterwards. Some examples of the topics of these workshops include: Sleep Hygiene, Balancing Anxiety as we begin to leave the house, Virtual Dating, Struggles with Working Remotely, Coping with a Sense of Uncertainty, and many relaxation-focused topics. These workshops were recorded and listed on the CAPS website and also uploaded onto a newly created CAPS YouTube playlist. In addition, CAPS created a Virtual Mental Health Care Package full of resources and tips that was sent to students via email from the Dean of Students and housed on the CAPS website where many other additional self-care and coping resources are listed and updated weekly.

## **Mental Health and Wellness Peer Mentor Program**

The Mission of the Mental Health and Wellness Peer Mentor Program is to provide support and education to UM-Dearborn students on mental health and wellness. This is accomplished by providing support groups for students and engaging in programs and workshops to reduce stigma associated with mental health and increase help-seeking behavior. The 2019-2020 academic year was the second year of the Mental Health and Wellness Peer Mentor program. This program was originally developed through a collaboration between CAPS and the office formerly known as the Office of Student Engagement and supported financially by the Women's Resource Center, Athletics, Office of Student Success, Office of Student Engagement, and Career Services. The second year of the program was supported by the Division of Student Affairs including CAPS, the Office of Student Life, and the Center for Social Justice and Inclusion. This year's cohort consisted of 8 students the first semester and 11 students the second semester.

Based on experiences the first year of less interest in support groups during the Fall semester, the Peer Mentors focused on providing workshops and various psychoeducational presentations during the Fall. This also assisted in helping more students in the campus community know about the program with hopes of building increased interest in the support groups held in the winter. In the Winter semester the peer mentors offered 4 general support groups, a support group specifically for graduate students, and a support group specifically for LGBTQ students. Unfortunately, due to COVID-19 and the pivot to remote services, the support groups only were held in February and part of March. In response to the shift to remote services, in the Summer semester the Mental Health and Wellness Peer Mentors started conducting remote workshops, presenting on over 20 different topics. They also started a remote LGBTQ support group in collaboration with CAPS staff.



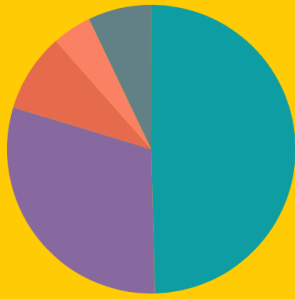
## Satisfaction Survey

In May 2020, CAPS sent out a brief satisfaction survey to all students who completed the computer assessment to request counseling services up to this point of the academic year. 120 students completed the survey that asked several Likert scale questions about their experience with CAPS and also provided open ended space for any written feedback. Overall, students' experiences with CAPS were positive. One respondent stated "Really kind staff and would definitely continue my time at CAPS, if needed. I felt that I was in a safe and confidential place to share my struggles and I felt that I truly benefited from going to CAPS." Other respondents noted concerns about sessions limits, which was confusing considering CAPS does not have official session limits and clinicians create a treatment plan including the number of sessions offered based on the students presenting concerns. The number of sessions is flexible as clinically appropriate. Since this concern was mentioned several times, it seems there is a need to clarify this when students first come to seek assistance. More information gained from this survey is listed below.



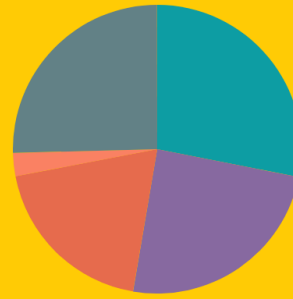
## Treatment at CAPS

The reason(s) I came to CAPS was/were addressed.



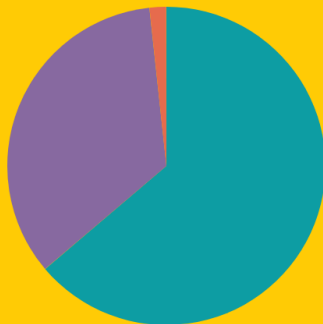
Strongly Agree (49.6%) Agree (30.1%)  
Disagree (8.8%) Strongly Disagree (4.4%)  
Does Not Apply or Too Soon to Say (7.1%)

CAPS has helped me make decisions about my academic future.



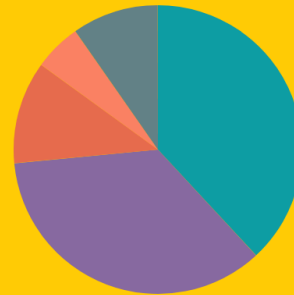
Strongly Agree (28.1%) Agree (24.6%)  
Disagree (19.3%) Strongly Disagree (2.6%)  
Does Not Apply or Too Soon to Say (25.4%)

My first contact with CAPS was welcoming.



Strongly Agree (63.8%) Agree (34.5%)  
Disagree (1.7%)

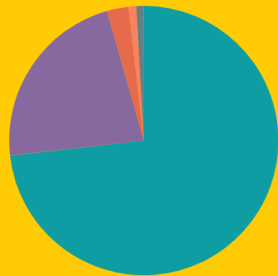
My treatment at CAPS has been successful.



Strongly Agree (38.1%) Agree (35.4%)  
Disagree (11.5%) Strongly Disagree (5.3%)  
Does Not Apply or Too Soon to Say (9.7%)

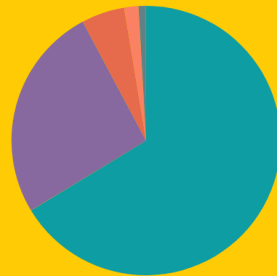
▼ **Treatment from Counselor**

My counselor treated me with dignity and respect.



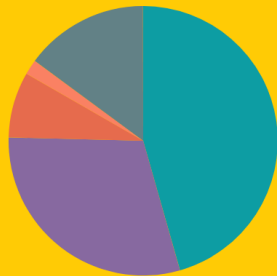
Strongly Agree (73.23%) Agree (22.38%)  
 Disagree (2.6%) Strongly Disagree (0.9%)  
 Does Not Apply or Too Soon to Say (0.9%)

My counselor listened to and understood my concerns.



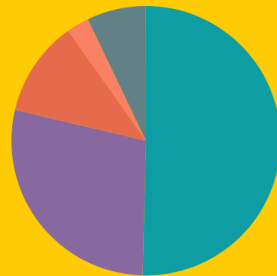
Strongly Agree (66.33%) Agree (25.87%)  
 Disagree (5.19%) Strongly Disagree (1.7%)  
 Does Not Apply or Too Soon to Say (0.9%)

My counselor discussed my treatment options with me.



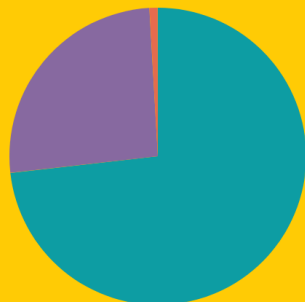
Strongly Agree (45.6%) Agree (29.8%)  
 Disagree (7.9%) Strongly Disagree (1.8%)  
 Does Not Apply or Too Soon to Say (14.9%)

My counselor assisted me in reaching my goals.



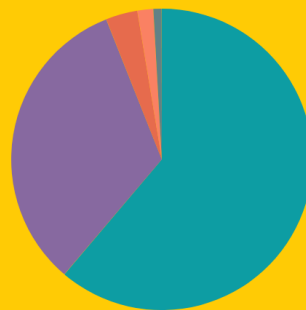
Strongly Agree (50.4%) Agree (28.3%)  
 Disagree (11.5%) Strongly Disagree (2.7%)  
 Does Not Apply or Too Soon to Say (7.1%)

The counselor spoke to me using words I understand.



Strongly Agree (73.23%) Agree (25.87%)  
 Strongly Disagree (0.9%)

I felt safe sharing with my counselor.

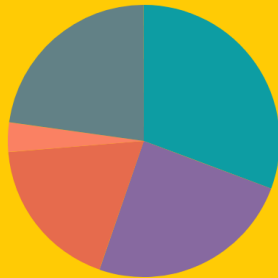


Strongly Agree (61.2%) Agree (32.8%)  
 Disagree (3.4%) Strongly Disagree (1.7%)  
 Does Not Apply or Too Soon to Say (0.9%)



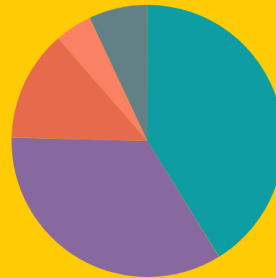
## Because of CAPS...

My academic performance has improved.



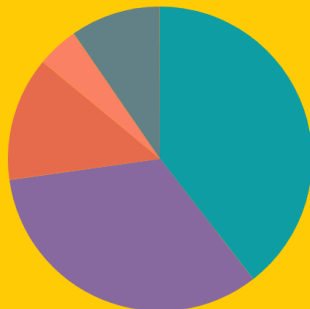
Strongly Agree (30.7%) Agree (24.6%)  
Disagree (18.4%) Strongly Disagree (3.5%)  
Does Not Apply or Too Soon to Say (22.8%)

My ability to deal with my problems has improved.



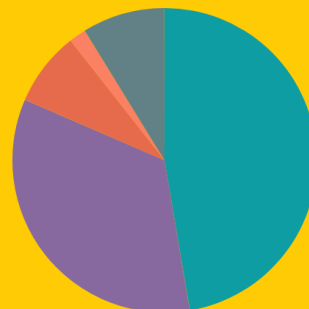
Strongly Agree (41.2%) Agree (34.2%)  
Disagree (13.2%) Strongly Disagree (4.4%)  
Does Not Apply or Too Soon to Say (7%)

I make better decisions.



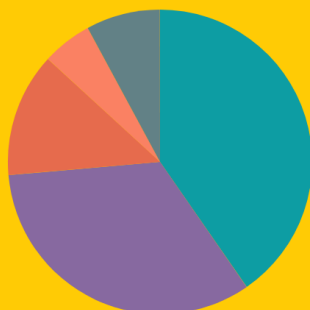
Strongly Agree (39.5%) Agree (33.3%)  
Disagree (13.2%) Strongly Disagree (4.4%)  
Does Not Apply or Too Soon to Say (9.6%)

I helped develop my treatment goals.



Strongly Agree (47.35%) Agree (34.17%)  
Disagree (7.89%) Strongly Disagree (1.8%)  
Does Not Apply or Too Soon to Say (8.79%)

I am satisfied with my progress.



Strongly Agree (40.36%) Agree (33.27%)  
Disagree (13.19%) Strongly Disagree (5.29%)  
Does Not Apply or Too Soon to Say (7.89%)

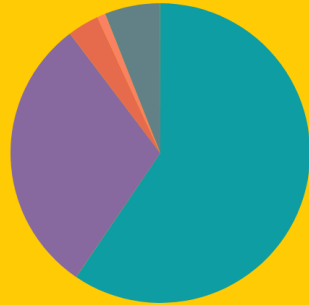
I am more likely to continue my education at UM-Dearborn.



Strongly Agree (30.7%) Agree (19.3%)  
Disagree (11.4%) Strongly Disagree (2.6%)  
Does Not Apply or Too Soon to Say (36%)

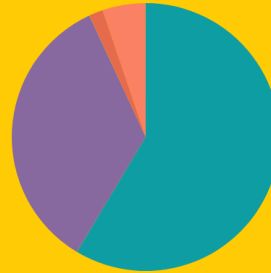
▼ **Feedback on CAPS Operations**

Front desk staff were responsive.



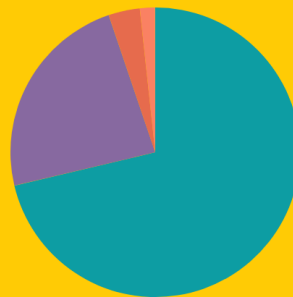
Strongly Agree (59.5%) Agree (30.2%)  
 Disagree (3.4%) Strongly Disagree (0.9%)  
 Does Not Apply or Too Soon to Say (6%)

I am able to access services within CAPS business hours.



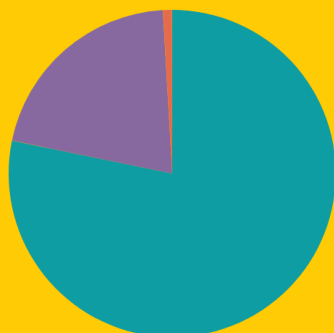
Strongly Agree (58.6%) Agree (34.5%)  
 Disagree (1.7%) Does Not Apply or Too Soon to Say (5.2%)

Appointment and schedule procedures were clearly communicated.



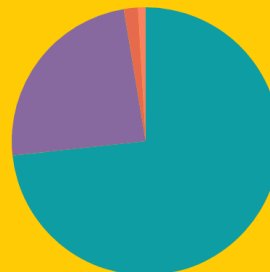
Strongly Agree (71.3%) Agree (23.5%)  
 Disagree (3.5%) Does Not Apply or Too Soon to Say (1.7%)

CAPS respected my privacy.



Strongly Agree (78.22%) Agree (20.88%)  
 Does Not Apply or Too Soon to Say (0.9%)

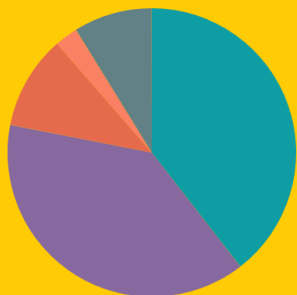
The intake process was professional and private.



Strongly Agree (73.3%) Agree (24.1%)  
 Disagree (1.7%) Does Not Apply or Too Soon to Say (0.9%)

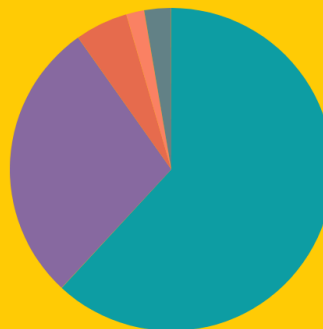
▼ **Moving Forward**

I am confident I can apply what I've learned at CAPS.



Strongly Agree (39.5%) Agree (38.6%)  
 Disagree (10.5%) Strongly Disagree (2.6%)  
 Does Not Apply or Too Soon to Say (8.8%)

I would return to CAPS, if needed.



Strongly Agree (61.9%) Agree (28.3%)  
 Disagree (5.3%) Strongly Disagree (1.8%)  
 Does Not Apply or Too Soon to Say (2.7%)

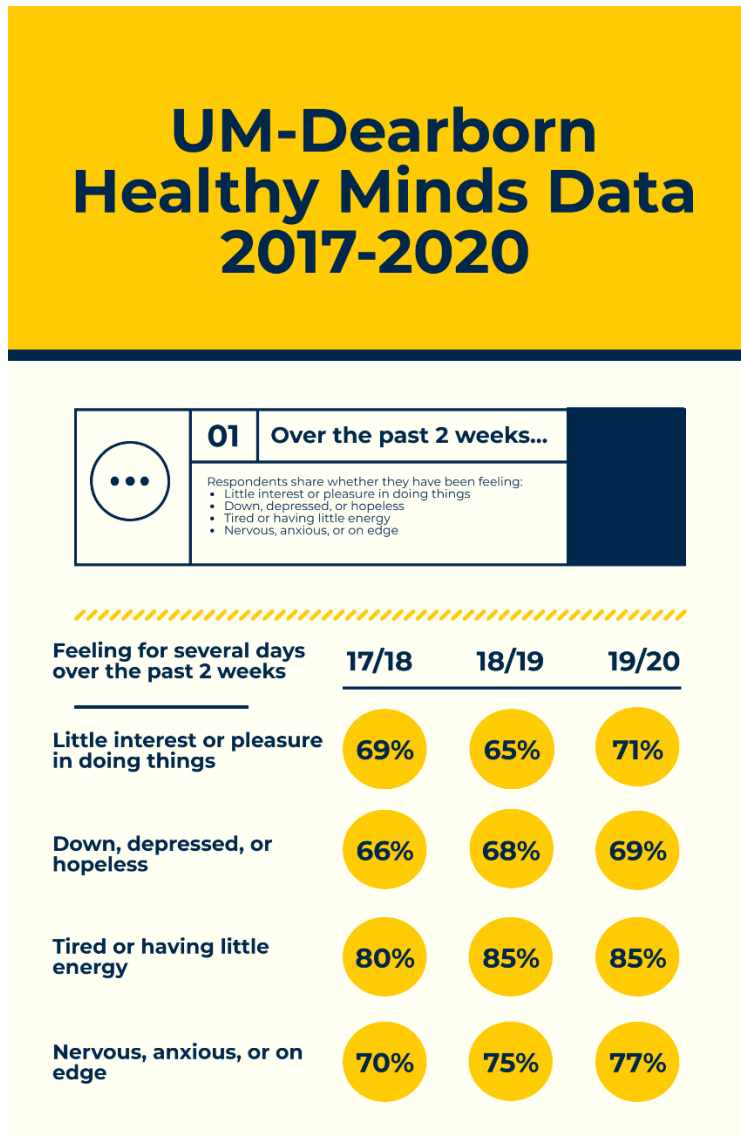
I would recommend CAPS services to other students.



Strongly Agree (63.94%) Agree (24.58%)  
 Disagree (5.29%) Strongly Disagree (1.8%)  
 Does Not Apply or Too Soon to Say (4.4%)

## Healthy Minds Data

The Healthy Minds Survey (HMS) is an annual web-based survey study examining mental health, service utilization, and related issues among undergraduate and graduate students. Since its national launch in 2007, HMS has been fielded at over 180 colleges and universities, with over 200,000 survey respondents. The 2019-2020 year was the third consecutive year UM-Dearborn participated in the survey due to their participation in the JED Campus and Steve Fund programs. Over 1,400 students participated in the research this year, almost doubling our response rate compared to previous years. When comparing the data over the three years, there are little changes in the presenting concerns and struggles of the participants. One positive finding of note is the steady increase of students who are aware of what the campus mental health resources are. Key findings from this year, along with comparisons from previous years, are highlighted below.






## 02

## Mental Health Screening

- Respondents are assessed for:
- Major Depression (positive PHQ-9 screen)
  - Depression overall
  - Anxiety Disorder (positive GAD-7 screen)
  - Eating Disorder (positive SCOFF screen)




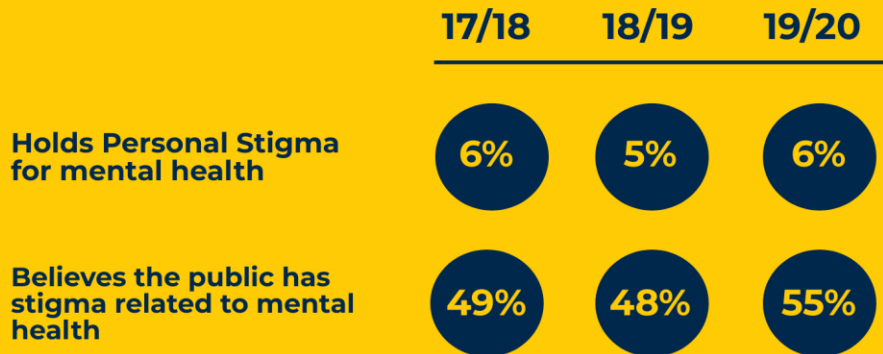
	17/18	18/19	19/20
Major Depression (positive PHQ-9 screen)	21%	20%	20%
Depression Overall	38%	38%	40%
Anxiety Disorder (positive GAD-7 screen)	31%	33%	36%
Eating Disorder (positive SCOFF screen)	10%	9%	13%


	<b>03</b>	<b>Self-Injury, Suicide, &amp; Therapy</b>
	Respondents indicate if they have: <ul style="list-style-type: none"> <li>• Engaged in non-suicidal self-injury in the past year</li> <li>• Experienced suicidal ideation in the past year</li> <li>• Went to mental health therapy in the last year</li> <li>• A lifetime diagnosis of a mental disorder</li> <li>• Reported a current need for therapy</li> </ul>	

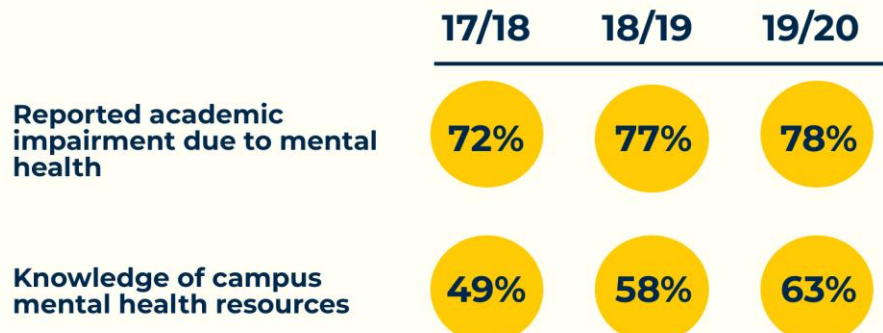


	17/18	18/19	19/20
Non-suicidal self-injury (past year)	20%	24%	23%
Suicidal Ideation (past year)	13%	16%	16%
Mental Health therapy (past year)	24%	28%	33%
Lifetime diagnosis of mental disorder	14%	19%	25%
Reported current need for therapy	70%	79%	79%

	<b>04</b>	<b>Stigma</b>
	<p>Respondents share the personal stigma that they hold for mental health, and whether or not they believe the public has stigma related to mental health.</p>	



	<b>05</b>	<b>Academic Impairment &amp; Campus Resources</b>
	<p>Respondents indicate whether they have experienced academic impairment due to mental health, and if they have knowledge of campus mental health resources.</p>	



## Accomplishments

The 2019-2020 academic year contained several other accomplishments not already mentioned. The first of which focuses on CAPS' continued work with the JED foundation. The University of Michigan-Dearborn entered into a four-year program with the JED Campus Foundation in the fall of 2017. This four-year program provides assessment and guidance on actions the University of Michigan-Dearborn can take to provide more robust and holistic mental health services. Related to some of the strategic goals identified by the assessment provided by JED, the Wellness Wednesday Listserv was created. This listserv is available for any student, staff, or faculty. Every Wednesday, an email is sent that focuses on one of the nine domains of wellness. The emails are composed by staff, faculty, and students that are connected to the campus committee formed to work on the JED goals. In addition, the campus committee decided to rebrand the name of the group to the Wellness Collaborative, in order to both provide a better description of the work engaged in as well as to recognize that even after the four-year JED program is complete, the work related to mental health and wellness will continue.

CAPS also completed the goal of implementing repeat administration of the CCAPS measure in order to better measure clinical progress throughout treatment. This information is now used to assist clinicians in modifying their treatment plan and approach to meet the clinical symptoms and struggles students are facing.

One of the largest accomplishments of note for this year was the incredible job the CAPS staff did in pivoting the clinical services provided to students in person to completely remote. March 13<sup>th</sup> was the last day the CAPS staff would be in the physical CAPS suite providing services due to COVID-19. The entire week prior, much work was done to identify, obtain, and learn the programs and tools needed to shift to online clinical services. Starting on March 16<sup>th</sup>, all clinical services were provided utilizing the BlueJeans program (HIPAA compliant) from CAPS' staff homes. Policies and procedures were developed to guide the shift to remote services, including providing the 26 credit hour Zur training on teletherapy to each clinician. Protocols were established for students to connect with CAPS to receive services utilizing the CAPS general email and complete the paperwork housed on the Titanium record-keeping platform from their home computers. Group counseling was canceled for the remainder of the Winter semester with individual therapy services offered to those students who were not already connected with a therapist. In the summer, after research to identify the best platform and methods for conducting group therapy online was complete, a successful pilot online therapy group was started utilizing the BlueJeans platform.

CAPS staff met daily to discuss how CAPS could shift to best serve the campus community during this unprecedented time. CAPS shifted to an increased focus on providing larger community mental health support for campus. To accomplish this goal, CAPS implemented several programs and changes including:

- Daily live workshops (on Zoom) that were recorded and later shared on the CAPS website
- Increased advertisement of services and support on social media

- Increased resources and self-care info added weekly to the CAPS website
- Creation of a CAPS YouTube playlist of the workshops that is housed under the University of Michigan-Dearborn's main YouTube channel
- Creation of a Virtual Mental Health Care Package sent to all students and housed on CAPS webpage
- Implementation of SilverCloud - an online, self-guided, interactive stress management and mental health program
- Reorganization of CAPS website

During this shift to working from home, CAPS staff met daily to provide support for each other as we all learned to navigate life during a pandemic and the challenges of working remotely. A highlight of this support was the willingness of every staff to engage in Friday Spirit Day dress-up themes for our Friday morning staff meeting. The ability to challenge each other to come up with creative and unique costumes using only the items from home gave us all an opportunity to laugh during a time when it was definitely needed. I believe this activity really demonstrates the general nature of this amazing staff.



## Future Goals

CAPS' goals for the next academic year center on the need to adapt the services we provide to the changing environment brought on by the COVID-19 pandemic.

More specific goals include:

- Increase in remote workshops and outreach that focus on the changing needs of the campus community.

- Increase use of social media platforms to increase awareness and reach of programming and services
- Creation and implementation of a commitment statement related to social justice and diversity
- Creation and implementation of online same-day clinical drop-in appointments
- Adaptation of training program while working remotely
- Creation of undergraduate psychology internship
- Increase in tools and resources for faculty and staff to utilize to assist students struggling with their mental health