## Interventions

- A. As indicated by some studies on active learning, active learning approaches themselves can promote a reduction in psychological distress. Araghi and colleagues' (2023) study of students with depression found that active learning could provide connection with similar peers, positive social experiences, and distraction from symptoms (See also, Bledsoe & Baskin, 2014). To the degree that an active learning environment promotes autonomy, feelings of competence and control over one's learning, and connection to the others, it may directly support the well-being of students who are experiencing psychological distress (Howard et al., 2024; R, C, A).
- B. Psychoeducation on psychological distress can be within the realm of college instructors' capacities and is generally an effective tool (Donker et al., 2009). This might include sharing links to information from trusted resources (e.g. National Institute of Mental Health, https://www.nimh.nih.gov/health/publications; Centre for Clinical Interventions, https://www.cci.health.wa.gov.au/Resources/Looking-After-Others) and a description of on-campus services. This requires obtaining familiarity with the relevant resources, which itself has been recommended for supporting the mental health of students (Bledsoe & Baskin, 2014; Hsu & Goldsmith, 2021; C, A, R).
- C. In addition to recommending that struggling students seek professional help, students may be well served by <u>self-help tools</u> (Amanvermez et al., 2022; Worsley et al., 2022). There is some evidence that evidence-based digital mental health applications can be helpful for providing information and reducing distress (Linardon et al., 2019). Although not a thorough overview, some of the applications that seem the most widely used and supported by research evidence are Wysa, Headspace, Youper, MoodGym, SuperBetter, and Happify (Gál et al., 2021; Wasil et al., 2020). Also, the Association for Behavioral and Cognitive Therapies has complied a recommended list of self-help books, which could be shared with students (https://www.abct.org/self-help-book-recommendations/; Gualano et al., 2017). (Intervention; C, R, A)

- D. <u>Mindfulness</u> has positive impacts on young adult mental health (Reangsing et al., 2022), including self-help versions of mindfulness interventions (Gong et al., 2023; Taylor et al., 2021). Mindfulness can also improve academic performance as well (Ostermann et al., 2022). There is early evidence on the integration of mindfulness into classrooms, as delivered by instructors (see Honsky et al., 2023) or counseling staff (Glena et al., 2023). (Intervention; C, R, A)
- E. Henry and colleagues (2019) outline models for conceptualizing pre– and post–failure attitudes and behaviors in academic settings. In these models, one of the determining factors of long–term success is whether the student possesses a growth mindset at pre–failure (Dweck, 2006). Growth mindset interventions are mainly helpful for those that are underperforming (Burnette et al., 2023), which may very well be the students who have the greatest levels of psychological distress. (C, A)
- F. Henry and colleagues (2019) also argue that successfully responding to failure depends on the belief that failure is the result of unstable and controllable factors, leading to the use of adaptive coping strategies (Henry et al., 2019). Providing information on the various forms of coping from Henry and colleagues (2019) may promote a greater openness to failure and better responses post-failure. (Intervention; C, A, R)
- G. <u>Stigma reduction</u> may increase struggling students' willingness to seek help and non-struggling students' acceptance of their struggling peers. Social contact-based interventions may be effective for reducing stigma, including the National Alliance on Mental Illness' In Our Own Voice program (Matteo & You, 2012; Pittman et al., 2010). For classes covering related content, supplemental assignments might also be used to reduce mental illness stigma (Strassle, 2018). (Intervention; R, A, C)
- H. <u>Lifestyle change</u> may have positive outcomes on college students' well-being. Basic psychoeducation could describe the association between the most well-supported lifestyle behaviors (e.g. physical activity, sleep, smoking, and diet) with mental health outcomes (Firth et al., 2020). Notably, failure to obtain enough quality sleep is common among young people, and may very well be one of the driving factors for the current

mental health crisis (Twenge et al., 2019). Sleep interventions can be directly beneficial for mental health (Hershner & O'Brien, 2018), likely due to the bidirectional impact of sleep and depression (Dinis & Bragança, 2018). Beyond basic psychoeducation, students should be directed to see health providers for specific recommendations. (A, C, R)

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