

Navigating Higher Education: A Review of Transdiagnostic CBT and Supported Education for Post-Secondary Students with Mental Health Conditions

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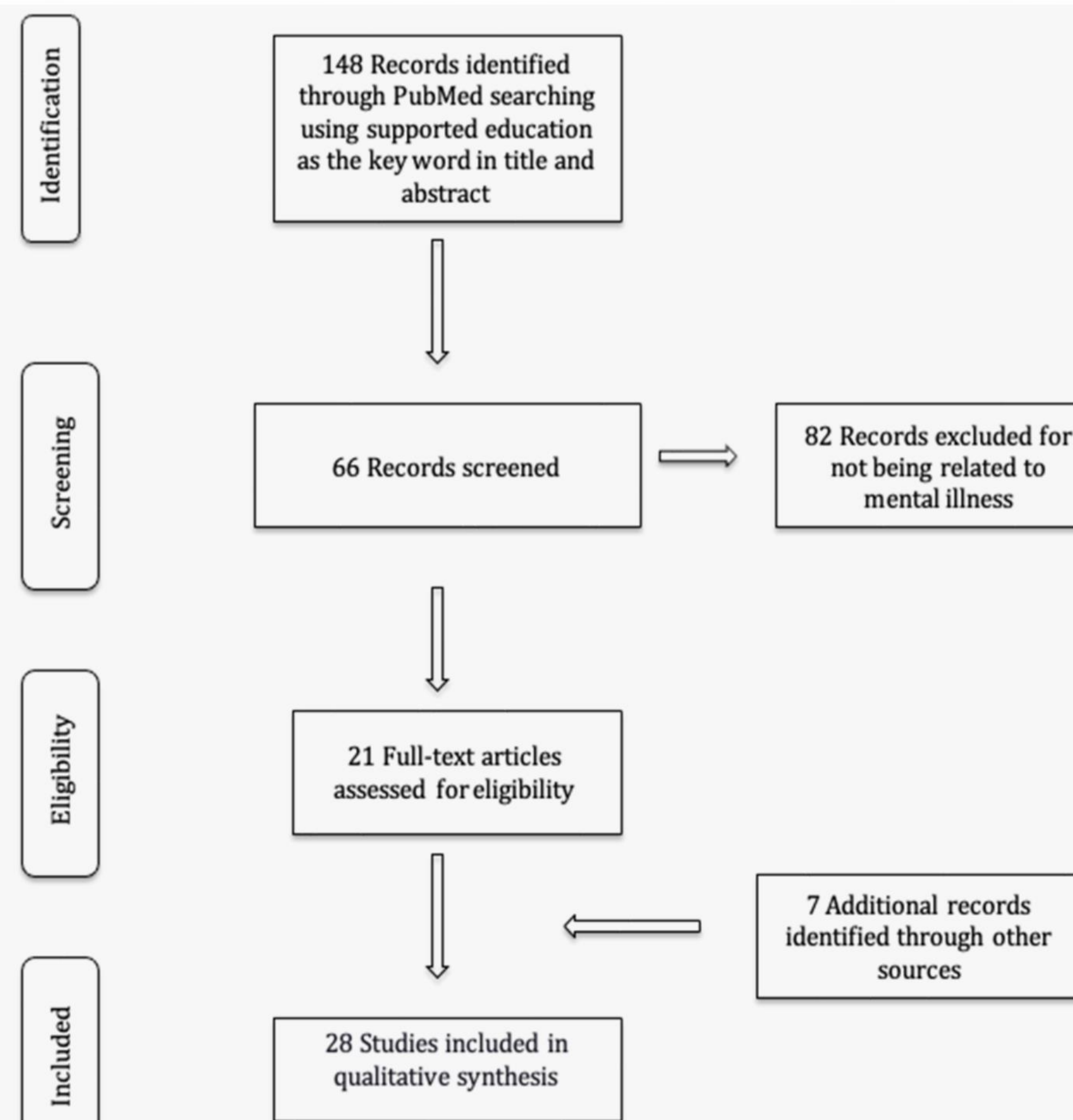
Introduction

Mental health conditions (MHCs) are a leading cause of disability in the United States (Collins et al., 2011; Elraz, 2018; NAMI, n.d.; NIMH, 2022). They can have a substantial impact on individuals, families and society. MHCs typically develop between the ages of 17 and 27, a time when young adults may wish or actively participate in higher education (Kessler, 2007; Otto et al., 2020). This review examines research on SEd interventions and transdiagnostic CBT to propose that the integration of SEd and transdiagnostic CBT can be beneficial in reducing symptomology and improving the educational and employment outcomes of post-secondary students with MHCs.

Findings

- ❖ SE'd models are composed of the following principles: providing access to an education with progress; eligibility based on personal choice; begins after the individual expressed interest; integrating with treatment; services offered as long as needed; client preferences guide services; strengths-based and promotes growth and hope; and recovery is ongoing.
- ❖ Supported Education programs are designed to help individuals with MHCs improve and reach their educational outcomes. Previous studies that examined variations of SEd programs support the benefits of such programs.
 - ❖ One study found that students with SMI who participated in SEd programs completed a higher proportion of courses they registered for (Gill et al., 2022).
- ❖ Transdiagnostic CBT programs target common psychological processes or core vulnerabilities that have been observed to contribute to the development and maintenance of class disorders (Gutner et al., 2016)
 - ❖ Meta-analyses on transdiagnostic CBT interventions, with a total of 8,592 participants, has have shown effectiveness in reducing anxiety and/or depression (Andersen et al., 2016; Carlucci et al. 2021; Newby et al., 2016; Pasarelu et al., 2017).

Method

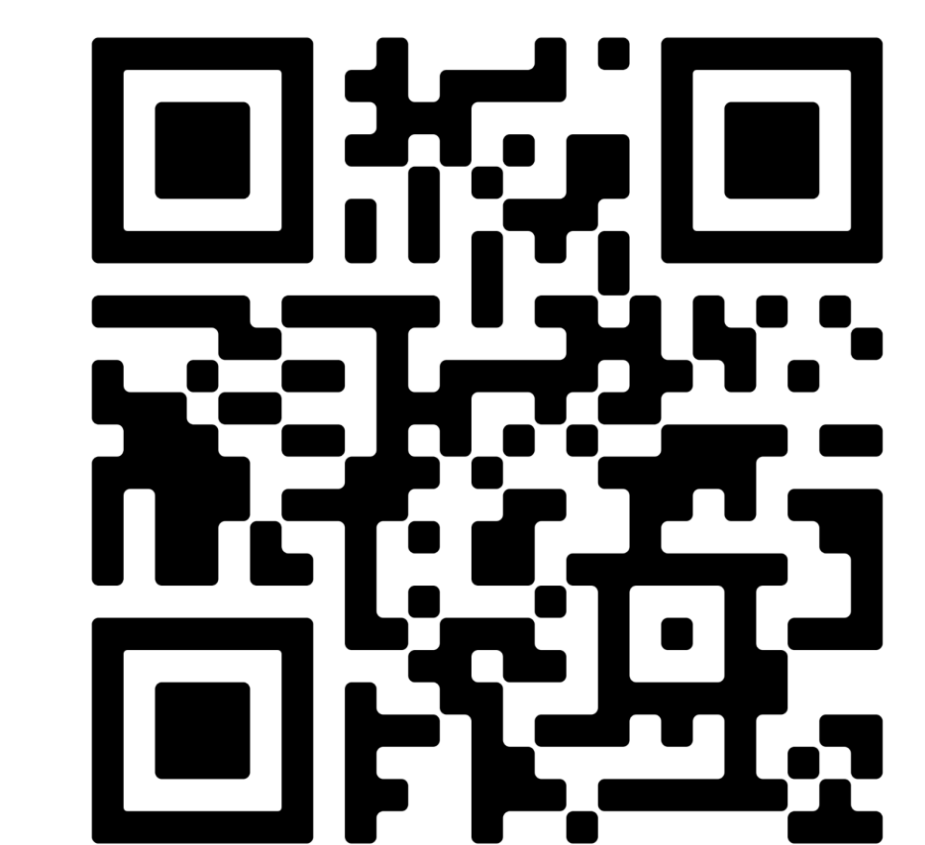


Discussion

- ❖ There is currently no literature to demonstrate the effectiveness of pairing CBT for symptom management with SEd services, but we hypothesize it would have a similar positive impact on educational outcomes as it did on symptom management (Kidd et al, 2008; King & Waghorn, 2018; Kukla et al., 2019).
- ❖ Integrating SEd and transdiagnostic CBT for students with MHCs via telehealth would facilitate positive educational outcomes by reducing symptoms and improving service access.
- ❖ SEd helps students successfully obtain postsecondary educational attainment, and the inclusion of Transdiagnostic CBT can help to alleviate symptoms to support the unique needs of students with MHCs.
- ❖ Qualitative studies and focus groups could be used to obtain a better understanding of post-secondary students' with MHCs barriers and services need.
- ❖ There is a need to integrate supported education with transdiagnostic CBT.

Selected References

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