

#

FITA 2015 -2016 Executive Summary

**

 john meissner, Ph.D. C. Psych

 Robert Konecki, M.Ed, CCC, RP

From Intention To Action (FIT: Action; FITA) is an intensive counselling program that was developed for students at Carleton University *who are at risk for academic failure and with distressed students who self-identify as overwhelmed*. FITA is currently on track to enter its sixth year of student support programming excellence after being successfully developed through Carleton’s Paul Menton Centre for Students with Disabilities (PMC) and supported by the Carleton University Office of the Vice-President (Students and Enrollment). In addition to these supports, a two-year grant from the Ministry of Training Colleges and Universities (MTCU)\* and a research extension from Mental Health Innovation Fund has helped us to assess the transferability and scalability of the FITA program model and expand this model to other colleges and universities. (\* Now the Ministry for Advanced Education and Skills Training).

FITA seeks to provide support for psychologically and academically overwhelmed students by improving their sense of stability, mental wellbeing and academic standing. Students are asked to commit to 12 consecutive weekly meetings with their assigned FITA coordinator, during which both academic and personal issues are addressed. Students are provided with an assessment battery consisting of psychological and learning-based tests that incorporate face-to-face and written feedback from a registered psychologist. FITA engages graduate level interns who have completed the first year of their program and are seeking practical counselling experience. Interns benefit from the guidance and wisdom of supervisors drawn from FITA’s project and team leaders. This year we saw 219 students who averaged 11 meetings each for a total of 2795 hours of service; FITA students ranged from first year to graduate level with a 1:3 male to female ratio.

**In the 2015-2016 academic year the FITA program effectively supported different student needs.**

Significant overall improvements were seen in pre-post *mental health scores that predicted significantly improved grades* in a regression analysis*. The differential subgroups of FITA student were: (1) at* ***academic risk*** *with average mental health scores, (2) at* **academic risk** with **below average mental health** scores*, and (3) with* **below average mental health** scores *and not at risk of suspension.*Groups within FITA had a differential impact on achievement and Mental Health Composite scores that indicate that FITA met students’ needs *in relation to the specific needs of each of the 3 above groups.*

(1) Students with a good level of psychological well-being who were on Academic Warning (AW) or in the “No Decision” category (with grades that would trigger an academic warning) demonstrated significantly improved grades in a pre-post evaluation.

2) Students who scored below the normal range on the SF-36 Mental Health Composite and who were also in academic jeopardy significantly (p<.00) improved grades (at a level allowing them to meet 3 year B.A. requirements when their earlier performance would not meet university degree standards) *and improved mental health scores* with a large effect size demonstrated. This double-jeopardy group made significant gains in all areas.

(3) Students who scored below the average range on measures of mental health (but had otherwise adequate grades) showed significant(P<.00) improvements in well-being (+ 1 s.d.) to the extent that a moderate effect size resulted. This group of psychologically vulnerable students *did not show a decline* in grades that would have been expected based on past research literature e.g., Eisenburg et al., (2009).

Pre-Post Health comparison (SF36) Mental Health Composite Scores were collected and paired t-test results showed strong, significant increases in MCS from pre-program to post-program (t(88)=7.813, *p* < .0005). At the post-program time-point, the average score increased by 9.60 points to 37.53, a score that falls in the low-average range of mental wellness. This change is supported by a large treatment effect size (*d* = .92). A summary table follows.

Similar to previous years, we separated our sample into three subgroups: AR (Academic warning, or students who are *at-risk academically* with a CGPA ≤ 5.0 and MCS > 36.0), OW (overwhelmed students, or students who present as significantly distressed with a MCS ≤ 36.0 and CGPA >5.0), and AO (Distress and academically at risk with a MCS ≤ 36.0 and CGPA ≤ 5.0). Regarding the MCS criteria, 36.0 is the cut-off score for the low-average range, with scores below this number falling in the borderline and impaired ranges. Results were similar to past findings. AR students did not change significantly in their MCS scores, as hypothesized. However, both OW and AO groups demonstrated significant changes over time. This is also consistent with our expectations. A summary table follows.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Mean 1 ± SD** | **Mean 2 ± SD** | **Sample (n)** | **Mean diff.** | **T-score (t)** | **Sig. (p)** | **Effect size (d)** |
| ALL | 27.928 ± 9.550 | 37.531 ± 11.330 | 89 | 9.603 | 7.813 | <.0005 | .92 (large) |
| AR | 40.816 ± 3.340 | 45.808 ± 10.228 | 9 | 4.992 | 1.450 | .185 | --- |
| **OW** | **25.601 ± 7.828** | **35.035 ± 10.979** | **36** | **9.434** | **4.804** | **<.0005** |  **.69 (medium)** |
| **AO** | **25.363 ± 7.296** | **36.860 ± 11.403** | **32** | **11.497** | **5.606** | **<.0005** | **1.20 (very large)** |

### How does this compare to non-FITA students?

This year, we recruited a comparison group using convenience sampling methods. Our team set up a table in the University Centre of Carleton University during the Fall exam period and solicited the participation of students in the area to completed the SF36 and provide their information for GPA and academic standing data collection from the Registrar’s office. These students were offered a $5 campus card to complete the first administration of the SF36, and were offered a $10 campus card during the Winter exam period to return to complete the follow up administration. As expected, this comparison group fell on average within the “average” MCS range, and did not change in their scores over time (t(51) =.539, p =.592,). Comparing the two groups (Comparison vs FITA) using a mixed-ANOVA, there was a significant interaction over time between MCS scores and the grouping, indicating significant differences in variance between these two groups (F(1,140) = 22.13, p > .0005).

FITA Students changed significantly in contrast\* to the Comparison, who stayed in the average range with no significant changes\*\* over time.

\*F(1,140) = 22.13, p > .0005

\*\* t(51) =.539, p =.592, d = .037

**Evaluation results demonstrate the robustness of the FITA model over 5 academic years.**

This program model has been offered with different supervisors and interns to different students across 3 separate departments in Carleton University since 2011. Over these years students have demonstrated:

* Significant improvements in GPA
* Improved study skills
* Improved mental health in students with below average mental health (SF-36) scores. The most severely distressed students assessed over the last 4 years made the greatest improvements
* Continuing success in supporting vulnerable incoming first year students referred by their guidance counselors over the last 3 years. All met GPA requirements for ‘good standing’ at the end of their 1st year

**FITA Initiatives:**

* Pilots of the FITA program were initiated last fall at the University of Toronto (St. George) and Humber College and in 2016-17 will continue into their second year of offering FITA.
* We are developing a province wide information and support consortium.
* We are updating and expanding our manual entitled *FITA Manual: Translating Institutional Mental Health Intention into Program Action* and will distribute this manual upon request and through (Ontario) Centre for Innovation in Campus Mental Health
* In the 2016-2017 academic year Brock University will begin a FITA pilot and we are actively seeking partners for the 2017-2018 academic year.
* We have published an article on the FITA program over2013-2015 in the Canadian Journal of School Psychology (DOI: 10.1177/0829573516644554) *The Effects of a Combined Academic and Personal Counselling Initiative for Post- Secondary Student Retention* by Cynthia Bilodeau and John Meissner

.

**

Submitted July 25, 2016 Dr. John A. Meissner, C.Psych