

“A Liability to the University”—Addressing Student Mental Health Needs on Campus

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Students at colleges and universities report high rates of mental disorders, including depression and anxiety, and frequent suicidal ideation. School policies toward such students, however, often have appeared punitive or aimed primarily at reducing the institution’s potential liability. A recent lawsuit against Yale University highlighted allegations of practices that violated several federal statutes by failing

to provide reasonable accommodations for students with psychiatric disabilities. The resolution of those claims in a sweeping settlement agreement can provide a model for the many other universities that need to align their policies with federal disability law.

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In December 2017, Nicolette Mantica, then a junior at Yale University with a 3.8 GPA, was reported to the dean of her residential college for engaging in nonsuicidal self-injury. The dean escorted her to the student health service, where Mantica had been seeing a therapist. From there, Mantica was transferred by ambulance to Yale New Haven Hospital. While she was still hospitalized, a university administrator visited Mantica to tell her that she would likely be involuntarily withdrawn from school. As he explained, “If anything were to happen to you, you would be a liability to the university.” Faced with that prospect, Mantica voluntarily withdrew (1).

On discharge from the hospital, Mantica was told that she had to remove her belongings from her dorm room immediately. She and her parents were escorted to her room by a Yale police officer, who waited in the hallway as they hurriedly packed Mantica’s possessions. Mantica was told that she would not be eligible for reinstatement until fall 2018, and in the meantime, she was not allowed to set foot on campus—which is open to the general public—without prior permission. Per Yale policy, before returning to the university, Mantica was required to complete two classroom courses at an accredited university with a grade of B or higher. Because the university closest to her hometown in rural Georgia was 2 hours away and the tuition at that university was unaffordable (she had a Yale scholarship), Mantica decided not to return to Yale. She enrolled instead at Northwestern University, which offered her disability-related accommodations, and graduated in spring 2020 (1).

The story of Nicolette Mantica and of other students with similar experiences reflects attitudes and practices that remain disturbingly prevalent on college campuses

today. However, a group of Yale students and alumni challenged the university’s questionable approaches to students’ needing mental health treatment by taking the issue to the courts, leading to a landmark settlement that could serve as a model for other campuses.

MENTAL HEALTH ON COLLEGE CAMPUSES

Understanding the situation at Yale begins with a recognition of the scope of mental health problems on campuses today. Prepandemic data, based on an online screening survey of a large sample of U.S. college students, suggest that one-third of respondents manifested significant symptoms of a mental disorder, such as depression or anxiety (2). Moreover, the prevalence of such issues was already increasing, with the proportion of students ever having received mental health services growing from 14.4% in 2009 to 18.7% in 2015. Remarkably, the percentages of students considering seeking help in the future rose from 67.1% to 73.7% over that same

HIGHLIGHTS

- Many colleges and universities have policies for dealing with student mental health problems that are in conflict with federal law.
- A recent lawsuit against Yale University highlighted a variety of problematic policies and practices.
- Yale’s agreement to settle the lawsuit by substantially altering its policies can provide a model for reform on other university campuses.

period (3). There are strong reasons to believe that the impact of the COVID-19 pandemic further increased rates of psychiatric symptomatology, especially anxiety and depression, which were already the two most prevalent mental health issues reported by students (4).

Given the high rates of depression and other disorders, suicidality is a major concern on U.S. college campuses. A recent survey reported that 12.6% of students experienced suicidal ideation over the previous year, with 5.7% having made a suicide plan and 1.3% attempting to end their lives (5). Suicide and attempted suicide on campus represent multifaceted sources of anxiety for college and university administrators, who may be concerned about adverse publicity and the possibility of contagion among students leading to suicide clusters (6). In addition, institutions of higher education have been held by the courts to have a responsibility to take reasonable steps to prevent suicide when they have an awareness of a student's risk (7). Indeed, concern about Yale's vulnerability to claims of negligence may have been exactly what the administrator who spoke to Nicolette Mantica was referring to when he described her as a potential "liability to the university."

SUING TO ALTER UNIVERSITY POLICIES

In November 2022, almost 5 years after Nicolette Mantica was effectively eased out of Yale, an organization of alumni and students called Elis for Rachael, along with two named plaintiffs, both Yale undergraduates, filed suit against the university in federal court. The group took its name in honor of Rachael Shaw-Rosenbaum, a first-year student at Yale who had ended her life by suicide in 2021 (<https://www.elisforrachael.org>). (Yale students and alumni are known as "Elis" after Elihu Yale, an early 18th-century benefactor of the nascent institution.) From the time of its founding, Elis for Rachael advocated for improved mental health services and changes in Yale's policies to reduce the risk for suicide on campus. As evidence mounted of the university's recalcitrance, however, the group decided it had no choice but to seek changes through the courts.

The 41-page complaint filed by the plaintiffs contained a litany of Yale's policies and practices that they claimed discriminated against students with mental disorders. Students with psychiatric symptoms, including suicidal ideation, could be pressured to agree to a "voluntary" withdrawal from the school to avoid an involuntary withdrawal, which could prejudice their readmission—precisely what happened to Nicolette Mantica. The complaint alleged that this practice deterred students from seeking mental health treatment for fear of being forced to leave the university. Students subjected to withdrawal, even when voluntary, were compelled to leave their dormitories within 24 hours and barred from setting foot on campus. After 30 days, their student health insurance would be terminated—just when they might need it most—resulting in the forfeiture of the fees they had paid for the rest of the semester. Indeed, students forced to

withdraw after the first 15 days of the term could also not expect a rebate on unused tuition, room, or board.

Nor was return to campus an easy matter. Withdrawn students were required to stay away for one or two full semesters after the term in which they left, even if their treating physicians believed that the students were ready to resume their education much sooner. During that time, which they were required to use productively, they had to complete two classroom courses at an accredited 4-year university with a grade of B or higher. After reinstatement, they were not permitted to fail any courses for two semesters, at risk for being forced to withdraw again, and almost always required to carry a full course load, even if a reduced load might have been a reasonable accommodation of their condition. Students had to complete their undergraduate degree in nine semesters at most, with the term in which they withdrew counted as one of the nine. The Yale Health Center, the plaintiffs alleged, had a policy of never writing notes in support of students' requests for reasonable accommodations, apparently because the clinicians in the center were concerned that students might not be telling the truth about their conditions.

The complaint offered examples of each of these policies being applied to students who had struggled with mental disorders, which they alleged constituted a violation of multiple federal laws (1). The plaintiffs requested to be appointed as representatives of a class of persons affected by Yale's policies, which they defined as "all Yale students who have, or have a record of, mental health disabilities. . . ." Among the statutes on which their claims rested was Title III of the Americans With Disabilities Act, which bars "places of public accommodation"—including universities—from denying people with disabilities "the full and equal enjoyment of the goods, services, facilities, privileges, advantages, or accommodations" they provide. They also invoked Section 504 of the Rehabilitation Act, which precludes similar behavior by entities receiving federal financial assistance; the Patient Protection and Affordable Care Act's provisions barring discrimination in access to health benefits; and the Fair Housing Act, because of the university's unwillingness to provide housing accommodations. The plaintiffs asked that Yale be enjoined from continuing its discriminatory policies and be required to develop new policies and procedures in accord with federal law.

YALE'S SETTLEMENT OF THE CLAIMS

Perhaps surprisingly, less than a year after the case was filed, Yale agreed to a settlement that included many of the changes that the plaintiffs sought (8). Among the changes the university agreed to was limiting the situations in which campus police would accompany a student who was moving out for a medical leave to those in which there was a risk for harm or disruption that could not be managed in any other way. The university also agreed to "have in place a system to ensure a robust and meaningful exploration of reasonable accommodations" for students' disabilities, with a public list

of examples of the accommodations available. Yale said it would clarify for its general medical and mental health staff that no policy was stopping them from providing opinions in support of students' requests for reasonable accommodations.

As part of the settlement, Yale stated that it would hire a psychiatric consultant with expertise in student mental health to train staff members in dealing with mental health crises and undertake a broader annual education process for faculty and staff on "disability law, mental health, reasonable accommodations, and best practices." In addition, substantial changes were made to policies related to medical leaves (no longer termed "withdrawals"). Leave duration now will be determined by a Yale Health Center clinician, taking into account the student's desires and input from the student's treating clinician. Involuntary withdrawals will be limited to "rare circumstances" of significant risk to the student or others, or disruptive behavior, that cannot be managed with accommodations. Only students who are away for four or more semesters will be required to take two classes before returning, and Yale summer session will be open to them to do that. Students on medical leave will be able to access the campus, retain e-mail and library privileges, hold student jobs, and enroll in Yale's health coverage for 1 year. They will no longer be expected to use their time on leave productively but are encouraged to "prioritize medical treatment." Students can request to return at any point, regardless of the anticipated duration of the leave.

A variety of other changes to Yale's policies were made as well. Reduced course loads will be available as a reasonable accommodation. Students who go on leave before the 12th week of a semester will receive a prorated rebate of tuition and room and board charges. However, fees for student health coverage still will be forfeited by students departing after the first 15 days of a term. Yale also agreed to pay the plaintiffs' legal costs and to have the court supervise the settlement agreement to ensure compliance for a 3-year period.

IMPLICATIONS FOR CAMPUS MENTAL HEALTH

Yale's rapid and nearly complete capitulation to the plaintiffs' demands can be read as an acknowledgment of the untenability of their previous practices in light of federal law (although the settlement agreement includes a provision stating that "nothing herein may be construed as [such] an admission by either Yale or Plaintiffs"). Other universities whose policies reflect either punitive attitudes toward students with psychiatric conditions or a desire to avoid potential liability can look to the settlement as a clear indication of where they need to move to avoid similar legal actions (9). In addition to highlighting the actions colleges and universities must avoid, the agreement between Yale and the plaintiffs underscores schools' affirmative

obligations to provide reasonable accommodations for students with disabilities related to mental disorders, including adjustments to course loads, options for housing, and flexibility in leave policies.

Just how far many institutions of higher education have to go was indicated by a 2018 report from the Ruderman Family Foundation (10), which explored policies for medical leaves among the eight schools in the Ivy League. It rated no school's policies higher than a D+; at that time, Yale received an F. The hope embodied in the Yale settlement was captured by Alicia Abramson, one of the named plaintiffs in the Yale case: "[A]t the end of the day, the question colleges should be asking is not 'How can we get rid of you?' but rather, 'What can we do to help you?'" (11).

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