Case Study

Promoting a Culture of Caring in Education

By Alison Badgett

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CASE STUDY
An inside look at one organization

Promoting a Culture of Caring in Education

For the past two decades, the Jed Foundation has led the fight to address the mental health crisis among American youth. Its story highlights the importance of addressing the cultural causes of the mental health crisis through systems change.

BY ALISON BADGETT

In October 2021, official alarm bells rang on a crisis decades in the making: “We have witnessed soaring rates of mental health challenges,” read the joint “Declaration of a National Emergency in Child and Adolescent Mental Health” by the American Academy of Pediatrics, Children’s Hospital Association, and American Academy of Child and Adolescent Psychiatry. This statement was followed by an alert from US Surgeon General Vivek Murthy that warned “the future of our country” depends on mitigating the youth mental health crisis. Both statements underscored the long-term trends behind the spike in mental health problems during the COVID-19 pandemic.

According to the national Healthy Minds Network survey, in 2013 just 17 percent of college students reported feeling anxiety. This number rose to 31 percent in 2018, while rates of reported depression grew 68 percent over the same period. At the high school level, one in three students reported persistent feelings of sadness and hopelessness.
in 2019, a 40 percent increase from 2009, and one in six students reported making a suicide plan, up 44 percent from 2009. Suicide rates also increased among 10- to 24-year-olds by 57 percent between 2007 and 2018.

These numbers are not the result of increased awareness or reporting alone, the surgeon general’s alert explained. In addition to academic stress, today’s students feel pressures from seemingly intractable societal problems, such as climate change, gun violence, racism, and income inequality. In addition, they are suffering the effects of social media, which Murthy singled out in a subsequent advisory as doubling the risk of mental health problems for the average teenager.

COVID simply exacerbated the ongoing mental health crisis and exposed the dynamics at play among youth. “The isolation and dislocation and suffering of young people may not have been a surprise to child and adolescent mental health clinicians,” says mental health advocate and former US Rep. Patrick Kennedy. “But for the rest of the public, COVID woke everybody up to all of these things.”

At the start of the pandemic in spring 2020, the Jed Foundation, America’s preeminent nonprofit supporting youth mental health, spoke with a funder about the crisis before them. “A lot of money is going to move into mental health now,” JED’s CEO, John MacPhee, recalls the funder saying, “not to shore up nonprofits fighting to survive, but those that are attempting to meet the moment. Are you going to meet the moment?” the funder asked. “Yes, we are,” MacPhee replied.

Over the next two years, JED doubled in size, from 40 staffers to 80, helping 450 colleges support mental health. The foundation also launched parallel programs for high schools, school districts, and community colleges, and a policy development arm. Buoyed by $15 million from MacKenzie Scott in 2022, JED now intends to triple the number of higher education students it reaches over the next several years, aiming to support more than 50 percent of colleges and universities.

College administrators consider mental health their number-one problem, says Kevin Kruger, president of NASPA, the association of student affairs administrators in higher education. “John [MacPhee] can pick up the phone and talk to any, I mean any, college president because they have that awareness and trust,” Kruger says. “There’s so much noise out there.” In the context of a market newly flooded with for-profit companies selling telehealth counseling and other services, “JED stands out,” Kruger says. “Because they’ve been around for 25 years, you know they’re not going away.”

JED’s track record positioned it to capitalize on the mandate that COVID provided schools to reimagine how and why they should support student mental health—not just through more counseling for students in crisis, but through creating a culture of caring and a system of prevention. Despite its reach, JED is in some ways still in the early stages of enshrining student well-being in education. For the foundation, complete success requires shifting the perspectives and practices of students, staff, faculty, and administrators campus by campus, as well as transforming the systems in which they are embedded.

Since its founding in 2000, JED has encouraged colleges to utilize a comprehensive set of research-based programming, policy, and public awareness strategies to protect the emotional health of students and prevent suicide. Over the course of two decades supporting such work, JED came to recognize that maximizing its impact required that it employ the same strategies itself, rather than through intermediaries, for the mental health of all youth. Today JED employs a holistic, systems change framework that can serve as a model for other organizations.

THE AIR FORCE MODEL

Donna and Phil Satow lost their son Jed to suicide in 1998, while he was home on winter break as a sophomore at the University of Arizona. “We did not think that suicide was in our lives, in our future,” Donna says. “So when this happened to us, we were devastated beyond belief.”

Raised in bucolic Princeton, New Jersey, Jed was the youngest of three children in a happy, close-knit family. He was smart, funny, and well-liked by his friends. During high school, he could sometimes be withdrawn, impulsive, and angry—but nothing out of the ordinary for a teenager, the Satows assumed. Jed also had a learning disability, which played a role in his choosing the University of Arizona, for its renowned academic support program for students with attention and learning challenges.

“Neither one of us had any knowledge, really, about suicide,” says Donna, even though Phil was working with psychiatrists as executive vice president of Forest Laboratories. “There was a lot of conversation about drugs and drug prevention on a very simple level. … But there wasn’t a lot of talk about suicide prevention and what depression might look like in adolescence.” In Jed’s case, it would have helped Donna and Phil to know depression’s link to learning challenges and how it often presents as anger in adolescence. “We began to think we weren’t alone. We couldn’t have been the only ones.”

The Satows researched the issue and discovered that suicide was the second leading cause of death among college students. “We had to know what happened,” Donna says. “How can we prevent this from happening? Because this is a preventable tragedy.”

The Satows looked to Jed’s life at the University of Arizona for answers. They learned that a number of people had been worried

The Satows discovered that suicide was the second leading cause of death among college students. “We had to know what happened,” Donna says. “Because this is a preventable tragedy.”
JED and MTVU launched the Half of Us campaign—an allusion to a survey that found that 50 percent of college students had anxiety and depression that disrupted their academic or personal lives.

about Jed, including his friends, teachers, and fraternity brothers. He might have been identified as an acute risk had those around him known what to look for and how to intervene. The Satows met with the university president, who was emotional as he spoke. “What would you have me do,” he said, “in a school of more than 30,000 students?” The Satows left the meeting intent upon answering his question.

They began by convening a group of experts on suicide in Washington, D.C. The team included Lanny Berman, executive director of the American Association of Suicidology; professor David Brent of the University of Pittsburgh, an expert in child and adolescent psychiatry; clinical psychologist Kay Redfield Jamison, author of the memoir An Unquiet Mind; and representatives of the Suicide Prevention Resource Center (SPRC). The group identified a promising model implemented by the US Air Force that had reduced suicides, as well as rates of homicide and domestic violence. The approach was comprehensive and employed integrated strategies, including training, education, prevention services, policies, and protocols, intended to create a culture of caring.

They encouraged the Satows to consider adapting the model to college campuses. Like the US Air Force, colleges and universities are circumscribed communities, with their own leadership structure, culture, policies, and constituencies. In this way, they offered a ready scaffolding to protect emotional health and prevent suicide.

**JED’S COMPREHENSIVE APPROACH**

TWO YEARS AFTER THEIR SON’S DEATH, the Satows founded the Jed Foundation, with a vision of codifying and promulgating a framework for suicide prevention on college campuses, grounded in the Air Force’s proven approach. From the start, the Satows were committed to scale; they had no interest in working with a handful of colleges but were resolute on shifting the culture and practice of all American colleges. In collaboration with the SPRC, they developed what became “JED’s Comprehensive Approach to Mental Health Promotion and Suicide Prevention for Colleges and Universities.” It includes seven core strategies, with dozens of associated tactics.

Two of these strategies focus on protecting emotional health: the first, developing life skills, the second, promoting social connectedness. Life skills such as resilience, grit, maintaining physical health, and the ability to regulate emotion are correlated with both mental health and academic success. Related tactics range from mindfulness training to encouraging exercise by making access to a fitness center free for all students. Research shows that loneliness and isolation increase risk for mental health problems. Equity and inclusion programs help promote social connectedness, along with training residential and academic advisors to reach out to isolated students.

Strategies three and four focus on promoting early intervention: identifying students at risk and increasing help-seeking behavior. The majority of students who commit suicide do not access treatment. Tactics to identify students at risk include training those who interact with students, such as academic advisors, faculty, and other students, to identify and refer students in need of support to counseling, as well as incorporating screening tools for mental health and substance abuse into primary health care. To increase help-seeking behavior, JED recommends communications campaigns to increase awareness of campus services and to destigmatize accessing help.

Successful intervention presupposes that adequate treatment is available. Accordingly, the fifth strategy of JED’s framework is providing mental health and substance misuse services. Related tactics might include expanding clinic hours and connecting students with long-term care options in the community. Schools must also make services available in the context of following crisis management procedures, JED’s sixth strategy. Crisis management tactics can relate to a single event, such as supporting students after a suicide, or to ongoing crisis support through, for example, a 24/7 crisis response line. The surest means to prevent suicide remains restricting the means for suicide, be it limiting access to rooftops, prescription drugs, or guns where state policies permit; this is the seventh strategy in JED’s comprehensive framework.

“It took some time for me to understand why a public-health approach is necessary to this issue,” says Hollie Chessman, director of research and practice for the American Council on Education (ACE). “Colleges and universities want the easy answer. They want to just put a program in place and call it a day ... but it’s not as easy as that. It’s systemic and very complex,” she says. “I think one of the great things about the JED model is it takes that complex thing that has to happen on a campus and makes it more digestible for people.”

“Sadly, the Jed Foundation was founded because Jed slipped through the cracks,” says Kruger of NASPA. “That happens all the time.” The comprehensiveness of JED’s model sets the foundation apart, Kruger says, as well as their dual focus on providing resources to both campus professionals and students.

“Campus administrators struggle with how to reach students,” Kruger says. “This has been a hallmark of my entire 45-year career.”

**MARKETING TO STUDENTS**

IN 2004, Jed’s fraternity brother Ron Gibori, who was engaged in JED’s founding, suggested an important idea for connecting with students in the foundation’s early days: MTVU, a cable station on college campuses, could be an ideal vehicle to reach students. MTV had just concluded its Rock the Vote campaign and clearly knew how to mobilize youth with an important
message. Gibori and Donna Satow set about trying to engage MTV and enlisted the help of a JED board member, Larry Lieberman, who had been vice president of marketing at MTV Music Service.

While their initial inquiry was met with interest by MTV, launching a national campaign would cost a lot of money for a new nonprofit whose expenses totaled $450,000 at the time. But the Satows had a powerful professional and personal network from Phil’s work in the pharmaceutical industry to draw on. In the Satows’ SoHo loft in Manhattan, where they moved after Jed’s death, they invited their friends and colleagues to hear prominent speakers on salient issues—people like journalist Bob Woodward and former US Representative and mental health advocate Patrick Kennedy. The night they hosted Fareed Zakaria, an attendee approached the Satows with a remarkable offer: They’d support the campaign with a $1 million donation.

In 2006, JED and MTVU launched the Half of Us campaign—an allusion to the results of a survey that found that 50 percent of college students had anxiety and depression that disrupted their academic or personal lives. Half of those surveyed also didn’t know where to get help on campus, and 70 percent said they were too embarrassed to ask. The campaign featured videos of students as well as celebrities such as singer Mary J. Blige and Pete Wentz of Fall Out Boy, who shared their personal struggles with mental health in an effort to destigmatize and normalize help-seeking behavior. The videos directed students to a website with screening tools and resources.

“We heard from fans how these stories literally saved their lives,” says Noopur Agarwal, who joined MTV in 2007 as vice president of social impact. “These are artists that seemed to have it all ... and yet they were also struggling to the point of suicide.” Half of Us netted a Peabody Award in 2008, along with an Emmy nomination. “It was really about culture change, really shifting the culture around how we think and talk about mental health ... infusing mental health themes into popular culture,” Agarwal says. “JED is truly unique in ... the way they prioritize culture change.”

JED went on to launch additional student-facing campaigns over the years, including “Love Is Louder” in 2010 with MTV, in response to online bullying, and “Seize the Awkward” in 2018, in partnership with the American Foundation for Suicide Prevention and the Ad Council. While nonprofits often cook up public awareness campaigns in conference rooms based largely on the assumptions of staff, JED conducted extensive market research to hone their message and marketing channels. In research for Seize the Awkward, for example, JED found that nearly every 16- to 24-year-old has a friend struggling with mental health, but they’re reluctant to share that information with those who might help, fearing that disclosure would betray the friendship. Seize the Awkward targets these potential help givers, empowering youth to help friends obtain the support they need. Impact tracking by the Ad Council in 2023 found that 50 percent of surveyed youth were aware of Seize the Awkward and were significantly more likely than those who were not familiar with it to talk to a friend about what they’re going through (80 percent versus 67 percent), to encourage a friend to seek help from a mental health professional (68 percent versus 50 percent), and to contact a crisis hotline to learn how to help a friend (47 percent versus 27 percent).

Despite the high profile that JED quickly established by 2010 as a preeminent nonprofit in its field only a decade after its founding, its operating budget was still just $1 million a year, with a staff of six. And while JED was a nimble, entrepreneurial organization, it was nowhere near achieving the Satows’ vision of all colleges implementing the foundation’s comprehensive approach. JED offered best-in-class, evidence-based resources to colleges, but implementation was up to them. While JED staff had a strong reputation with counseling offices, they had fewer relationships with college leadership—presidents and deans of student affairs, whose active engagement would prove critical to implementing campus-wide strategies. Furthermore, most of JED’s supporters, its board and funders, were associated with the Satows.
Phil and Donna began to think about JED’s future and how best to sustain and redouble its impact. Phil asked a former colleague, John MacPhee, to assess the situation. Satow had hired MacPhee in 1995 as vice president of marketing for Forest Laboratories, a pharmaceutical company. There, among other products, MacPhee oversaw the launch of depression and anxiety medications. When Satow contacted MacPhee about the Jed Foundation, he did so knowing that MacPhee was considering changing his career to public health.

Earlier in life, MacPhee had intended to pursue engineering, but he ran into trouble as an undergrad at Columbia University. One semester he skipped classes altogether and flunked out, unable to cope with what he now sees was anxiety and potentially depression. Eventually, caring adults at Columbia helped him get back on track. When MacPhee returned to school, a pharmaceutical company was willing to pay for it.

“I just put one foot in front of the other and worked hard ... to prove to myself that I could,” ascending the ranks over 20 years from pharmaceutical sales to leadership. “And then at a certain point, I was like, okay, whatever I was trying to prove, I feel like I proved.” He began to feel like his career “was about making money, and quarterly earnings, and maximizing profit,” he says, “and I felt like we were not working on making the health-care system better.”

MacPhee enrolled in Columbia University’s master’s in public-health program and began serving on nonprofit boards. When Satow asked him for input on JED’s future, MacPhee was eager to help. MacPhee saw JED as “a first mover” in the field of youth mental health—a pioneer that could continue to lead the field in new directions. “The space was wide open,” MacPhee said.

He was especially intrigued by a new initiative that the foundation intended to launch, a designation program that would assess and provide colleges with JED’s seal of approval for implementing their seven-part mental health framework. However, he also thought JED was far too small to have an impact at scale. He recommended the foundation commit to raising at least $10 million a year and offered to lead JED as CEO if the board could make the commitment. They did, and MacPhee became CEO in 2011.

Early in his tenure, MacPhee pushed to expand JED’s mission from serving just college students to teens and young adults in general, to reflect JED’s commitment to reach a broader audience. MacPhee thought a more inclusive mission was especially critical in light of data that shows that suicide rates among college students are lower than those of non-college students of the same age.

He also set about operationalizing the concept of a designation program. By 2013, they’d assessed 65 colleges for the JED seal of approval, using a rubric to establish fidelity to JED’s comprehensive framework. However, some of the schools that qualified—especially the more prestigious schools—didn’t want public acknowledgment. All schools that engaged JED wanted to better support their students, but mental health issues were still not widely discussed. Some feared that a JED designation might change their applicant mix by attracting more students seeking mental health support. So JED waited on announcing their seals of approval until it reached a critical mass of more than 30 qualifying schools.

**Becoming a Change Organization**

While pleased by the reach of their designation program, MacPhee saw a troubling pattern: Colleges that qualified were better resourced, skewing four-year residential Northeastern. “It felt like there was an equity issue around this seal of approval,” MacPhee says. “We hadn’t figured out what the programmatic interventions should be.”

MacPhee and his team had started talking with the Poses Family Foundation, a New York City-based philanthropy with a strong focus on learning disabilities and capacity building for nonprofits.

“Data is particularly helpful in the equity work,” Mullen says, “because it allows us to hear not just what people think is happening, but what seems to be, from the student’s perspective, working or not.”

Its founding president, Shelly London, challenged JED to think about whether they were a knowledge organization or a change organization. “Her thesis was, you can’t get schools to implement this the way you want without becoming a change organization,” MacPhee says.

Like MacPhee, London came to nonprofit work from a successful corporate career, hers focused on turnaround strategy and culture change. “This may not be a great analogy, but I saw them as a family business,” London says of her initial perception of the Jed Foundation. “I saw them as almost a sole proprietorship at a significant, critical juncture.”

Her due diligence centered on understanding the vision of JED’s leadership and how much they were willing to change in order to achieve it. “To me they were great because they were in curiosity mode,” London says, “I saw their growth mindset, the leadership willingness to experiment and work hard and get out of their comfort zone. They wanted the impact.”

This didn’t mean they didn’t disagree. “We had moments where we went back and forth a lot, and that’s good,” London says. While everyone on the JED board ultimately embraced adding what they call “boots on the ground” support, it took roughly a year of discussion to work through the details of what became JED Campus.

“There were concerns about expense and sustainability,” MacPhee says of the ambitious initiative. “Of course, it’s very helpful when you’re the ED or the CEO to have a funder with your
demographic information on students, enabling JED to evaluate how identity affects mental health, who accesses services, and who feels a part of campus life. An analysis of national Healthy Minds data found similar rates of mental health issues among students of different races but also that white students were far more likely to seek treatment. Students of color were also more likely to feel isolated at college.

“Data is particularly helpful in the equity work,” Mullen says, “because it allows us to hear not just what people think is happening, but what seems to be, from the student’s perspective, working or not.” JED partnered with the Steve Fund in 2017 to produce an Equity in Mental Health Framework, which offers colleges strategies for addressing racial disparities in mental health surfaced by their Healthy Minds survey, such as hiring counselors of color and providing culturally competent care.

From a baseline self-assessment of policy and practice, the student survey, and a site visit conducted by a campus advisor, JED rates colleges in each of its framework’s seven domains on a four-point scale. This evaluation, in turn, informs the development of a strategic plan with a progression of steps in each domain. The JED campus advisor uses the plan to guide implementation with help from JED’s subject matter experts and evaluates progress quarterly. Throughout the process, the campus advisor meets monthly with designated college co-leads for the work; they manage interdisciplinary teams responsible for developing and implementing

board if you’re trying to socialize an idea that feels really big,” MacPhee adds.

“We wanted to work with 4,000 schools,” recalls Phil Satow about their deliberations. “So we wanted a model that we were able to replicate without having to physically go school by school by school.” Ultimately they settled on an advisory approach, according to which JED assesses the state of campus policy and practice relative to their seven-part framework, provides targeted technical assistance to priority areas of improvement, and gives coaching support through a campus advisor over the course of four years.

JED Campus launched in 2014 with two campus advisors, growing steadily year over year, reaching 300 campuses by 2018. By then, colleges were publicly promoting their engagement with JED. MacPhee describes this progression as “a slow, steady build” at the same time that mental health challenges were becoming more acute on campus.

FROM PROMISING TO PROVEN

As demand for JED Campus grew, so too did JED’s funding, enabling the foundation to start subsidizing institutions with limited resources. By 2017, JED was a $5 million organization, and in 2018, its revenue jumped to $9 million, with the support of a multimillion-dollar grant from Pivotal Ventures to help JED scale through enhanced evaluation and related infrastructure.

“They said, ‘Listen,’” MacPhee recalls, “we’ve been studying the space, and JED Campus is a very promising program, but we don’t consider it a proven program. We want to help you get over the line to prove it, and to really collect data in a more rigorous way ... so that you’re then postured to scale after 2020.’”

“It was a very organic-type process,” Michelle Mullen says of the early JED Campus program. Mullen is JED’s chief design and impact officer. She joined JED in 2014 after the New York-based Poses Family Foundation recommended that JED hire such a position. “I recognized that different schools may have been getting very different things and calling it the same thing,” she says. “You could not actually scale.” Over time, JED standardized campus planning, support, and evaluation. This meant that previously optional elements, such as a campus-based mental health strategic plan and the Healthy Minds student survey, became requirements for participating colleges.

In addition to anxiety and depression, the Healthy Minds survey captures rates of suicidal ideation, loneliness, substance use, and service utilization, as well as student perception of stigma associated with mental health issues on campus. It also collects

Zainab Okolo, JED senior vice president of policy, advocacy, and government relations, addresses the inaugural JED Policy Summit on October 30, 2023, in Washington, D.C.
strategic priorities. These teams might include, for example, representatives from public safety and buildings and grounds, along with the provost’s and president’s offices.

Jen Jacobsen, executive director of the Laurie Hamre Center for Health and Wellness at Macalester College in St. Paul, Minnesota, says it was this interdisciplinary approach, what she describes as “a four-year framework and tools for building not just collaboration across campus, but coalition-building with campus partners,” that attracted Macalester to JED Campus. Jacobsen says a collaborative approach is critical to institutionalizing change, so it’s not dependent on any one individual or department.

Audrey Seligman, a Macalester graduate who now serves as the health promotion specialist for the college, led an interdisciplinary team to reduce the means for suicide on campus. She, together with the departments of residential life, operations and maintenance, and public safety, walked the campus, analyzing how to restrict the means for suicide at 45 different places. JED provided guidance on what to look for, which the team used as a springboard for developing a comprehensive plan. “It’s easy to come up with a lot of big ideas, but if we’re not careful, the implementation always falls back to the health and wellness team,” Jacobsen says. “A lot of the JED process work relies on the idea that mental health is part of everyone’s work on a college campus.”

Without such sustained, campus-wide engagement, colleges may struggle to implement their strategic plan goals. The University of Tennessee at Martin, a rural campus of the UT system, engaged JED in 2021 following a suicide on campus and in the local community. At the time, UT Martin was the only campus in the UT system that was not part of JED Campus. Jenifer Hart, clinical coordinator of Student Health and Counseling Services at UT Martin, serves as co-lead for the JED Campus work. UT Martin prioritized enhancing communication to the student body about available counseling resources and creating a formal crisis response and a 24/7 crisis response number. Both were critical steps forward, Hart says, but she’s disappointed that they haven’t made more progress on the other elements of their strategic plan. Hart looks to UT’s flagship campus in Knoxville and wishes she could implement some of their initiatives at Martin. “But they have a wealth of resources and staff. We don’t ... that’s our biggest downfall.”

Most of the action steps JED recommends are not financially expensive so much as time intensive. For this reason, Hart especially appreciates the dedicated support of the JED Campus advisor. But she feels that making more progress at UT Martin would require dedicating at least half of her time to driving systems change forward, when she’s already managing a counseling center at full capacity.

No JED campus completes the agenda for all seven domains during their four-year engagement. Macalester, for example, completed JED Campus in 2021 but is still working to educate the campus on the relationship between mental health and substance use in a state that recently legalized cannabis. “It’s a long game,” Jacobsen says. At the end of year three, colleges complete the self-assessment and student survey again, enabling JED to track changes in policy and practice and to analyze the relationship between systems-level changes and student outcomes at a college campus and across the portfolio of JED Campus affiliates.

Darcy Gruttadaro, chief innovation officer for the National Alliance on Mental Illness (NAMI), believes the broader field could benefit significantly from what JED has learned. Gruttadaro joined NAMI in 2000, the year JED was founded, as director of NAMI’s Child and Adolescent Action Center. “I would like to see them put out research focused on the impact of programs they offer,” she says, “letting the world know what works well and supporting other organizations ... in expanding that work.”

In 2020, JED released a comprehensive evaluation of systems-level changes at JED Campus colleges and is set to release a follow-up report on student outcomes. According to Mullen, preliminary analysis of this data shows that the more progress a campus makes on their strategic plan strategies, the more student outcomes improve. Statistically significant impacts on students include greater knowledge of mental health resources; lower levels of shame related to seeking help; and reduced rates of anxiety, depression, suicidal ideation, and suicide attempts.

In analyzing the data, Mullen was surprised to find that no one change disproportionately impacts student outcomes. “It’s the accumulated effect that changes the student body,” she explains. Student graduation and retention rates also improve with implementation of a JED Campus plan. “If students feel better, they do better,” Mullen says.

Facility trained as academics may feel especially ill-equipped to support students, but they chose to work with students in a college environment—not, for example, at a think tank.

DATA SHOWING THE relationship between mental health and educational and institutional success is particularly important to share with faculty and staff who may see their educational mission as distinct from mental health objectives, rather than interdependent. Jacobsen used Healthy Minds survey data to help Macalester’s teaching and learning center understand the relationship. For example, Macalester’s survey revealed a correlation between students with financial challenges and the...
number of days that emotional stress impacted their academic performance. Such data indicate the importance of faculty getting to know students, Jacobsen says, in order to guide them to appropriate resources. “The answer might not always be referred to counseling,” she says.

“Let’s be real,” says Chessman of ACE, “you could have one-on-one [counselors] for all of your students in crisis; that’s never going to fix your problem, because it’s systemic.” Chessman believes “the real change at these colleges and universities isn’t going to happen until you get the academic side of the house on board.” For this reason, Chessman thinks a priority for JED going forward ought to be “honing their message” for faculty, provosts—“the academic side of the house.”

“If you work on a college campus … everybody’s on the front line of the mental health crisis,” Kruger of NASPA says. “Nobody came into this field thinking that they were going to be necessarily in that position, but more and more, that’s the job.” Faculty trained as academics may feel especially ill-equipped to support students, but they chose to work with students in a college environment—not, for example, at a think tank, says Kruger. “People don’t realize the positive impact they can have by a simple conversation.” Kruger points to JED’s “Faculty Guide to Supporting Student Mental Health” as a valuable resource. Jacobsen also helped develop recommendations for “low effort” ways that faculty can support student well-being. An example she offers is setting 9:00 p.m. deadlines to discourage all-nighters. “It cannot feel like one additional course prep to care for student well-being,” she says. Faculty “don’t want to, nor are they qualified to, nor do we want them to, act in any kind of counseling role.” But “community-level challenges” require “community responses,” she says.

Jacobsen recalls Macalester’s medical director once saying to her, “What if college … were expected to be a well-being additive experience? What if you went to college and expected that you would thrive and … add to your understanding of your own well-being?” Jacobsen says, “I just thought … we can’t individually counsel our way to that. … But we can, on college campuses, have enormous influence over the culture our students live in.” That requires faculty, staff, and administrators alike to prioritize student well-being.

Kruger appreciates that JED is focused not just on aiding students in crisis, but on what he calls “a well-being upstream approach” for all students, which he defines as “helping adolescents in that coming-of-age part of their life manage the life that is in front of them, which includes social media and exams and stress and all kinds of things.”

EXPANDING TO K-12 AND POLICY MAKERS

THE ART OF JED’S “well-being upstream approach” entails reaching students before they enter college. In 2021, JED launched a parallel program for high schools after five years of contemplating the move. As with JED Campus, early interest in JED High School skewed to exclusive private schools. But unlike their 2013 program launch, in 2021 JED not only was intent on engaging public schools from the start but also now had the fundraising and marketing capacity to make it possible. JED received grants from several funders to implement JED High School in diverse locations, from Montana to Colorado to Texas.

With 24,000 high schools, JED quickly recognized that scale demanded a different approach. Engaging schools one by one would take too long, and besides, high school principals simply don’t have the authority of a college president. JED would have to work at the district level to succeed.

In 2023, JED announced a collaboration with AASA, The School Superintendents Association, to launch a “District Comprehensive Approach.” Where a decade prior, it took several years to develop the infrastructure to systematically evaluate and improve upon impact at the college level, JED approached proving out its district model with rigor from the start. Through a request for proposal (RFP) process, JED selected 16 K-12 districts in rural, urban, and suburban areas of 14 states to participate in a four-year pilot, the results of which will position the district program for scale.

In addition, with the surge in mental problems during the pandemic and the awareness it generated of long-standing trends, states began to make significant investments in mental health, with implications for both K-12 districts and higher education. Zainab Okolo, who joined JED in 2023 as senior vice president of policy, advocacy, and government relations, is acutely aware of how important it is to use this funding wisely and prove the impact, in order to sustain funding. Too often, she knows, policy is passed and implemented poorly.

“When it comes to mental health and suicide prevention, that simply cannot be,” Okolo says, “data will continue to shame us if it is.” With its programmatic and evaluative infrastructure, the Jed Foundation may be uniquely well positioned to facilitate a positive feedback loop between policy development, implementation, evaluation of impact, and advocacy.

To that end, in August 2023, JED launched a learning collaborative with the State Higher Education Executive Officers Association (SHEEO). Through an RFP process, JED and SHEEO selected five states to participate in a 15-month project to develop...
Kennedy. “JED has a much more holistic approach. They are part of a team.”

JED participates in the Alignment for Progress, launched by Kennedy in 2023 to unite diverse stakeholders—mental health and substance abuse practitioners, advocates, business leaders, insurance companies, government agencies, and politicians—around a “90-90-90 in 10 years” strategy: getting 90 percent of Americans screened for mental health issues, 90 percent of those in need into treatment, with 90 percent of them living full lives.

“Kids today basically say some version of, ‘I’m completely stressed out. I’m angry, I’m depressed, I’m on edge because of school shootings, climate change, loss of reproductive rights, police violence, racism, microaggressions, etc.,’” MacPhee says. “And while I don’t feel okay, I feel that my response is appropriate. The world’s on fire.” JED can help students cope with the emotional toll of their reality, but the organization must rely on others to help students gain agency over it. JED’s future success depends in part on their school and university partners imparting a civic commitment to students to meet the moment we’re in.

Some psychologists argue that the negative impact of social media on youth anxiety and depression dwarfs other factors; here too, the answer is not only to change the practice of students and social media companies, but also to educate ethical future tech leaders, rather than having to regulate ourselves out of preventable crises. Schools can build on the foundation that JED has laid in helping students reflect on and enhance their well-being, by inspiring and preparing students to enhance the well-being of others well beyond the confines of campus. The two are mutually reinforcing agendas. As US Surgeon General Murthy reminded us last year in yet another alert, this one about the “epidemic of loneliness” extending to American adulthood, “There is nothing more fundamental to the health and well-being of people in our country than ensuring that we are building a moral and spiritual foundation that guides how we interact with each other. Toward that goal, service is one of the greatest antidotes to loneliness.”

Surveys show that trust in higher education is at an all-time low. In some ways, higher education is facing the same question posed to the Jed Foundation 15 years ago: Are you a knowledge organization or a change organization? Universities might do well to pursue a comprehensive model of public service education, recognizing from the start what JED had to learn along the way: Knowing and espousing what change requires will not alter student outcomes, but a systems approach to change will.

and implement state-based student mental health policy, sharing out findings and recommendations for other states to learn from. JED’s engagement in policy advocacy was not a foregone conclusion. Until recently, they felt they were simply too small to make an impact. Ultimately, MacPhee drove the decision, says Mike Satow, who in 2023 became board chair, taking over the role from his father. With the board’s limited experience in the advocacy realm, Satow says, its support of the move was “once again in the spirit of, ‘Let’s give it a try and see how well it works and what the response is’ … but the results, you know, have been really positive.” In addition to state-level policy, JED is engaged in federal policy discussions, collaborating with the US Centers for Disease Control and Prevention, the White House Domestic Policy Council, the Substance Abuse and Mental Health Services Administration (SAMHSA), and the RAND Corporation, among others. They’re also advocating for select federal bills, like the Kids Online Safety Act, and legislation that would encourage schools to implement comprehensive mental health planning akin to JED Campus.

PART OF A BROADER AGENDA

Even if JED scales to every high school and every university, key drivers of the mental health crisis may remain intact and well beyond JED’s control. “A lot of mental health organizations are there for the care and feeding of their members,” says former US Representative Patrick Kennedy. “JED has a much more holistic approach. They are part of a team.”

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PHOTO COURTESY OF THE JED FOUNDATION

JED CEO John MacPhee (center) and Vice President of Social Impact at MTV Entertainment Noopur Agarwal (right) speak at the 2014 Clinton Foundation Health Matters Summit.

Photo courtesy of the JED Foundation

ALISON BADGETT is associate dean for public service and director of the Priscilla King Gray Public Service Center at MIT.