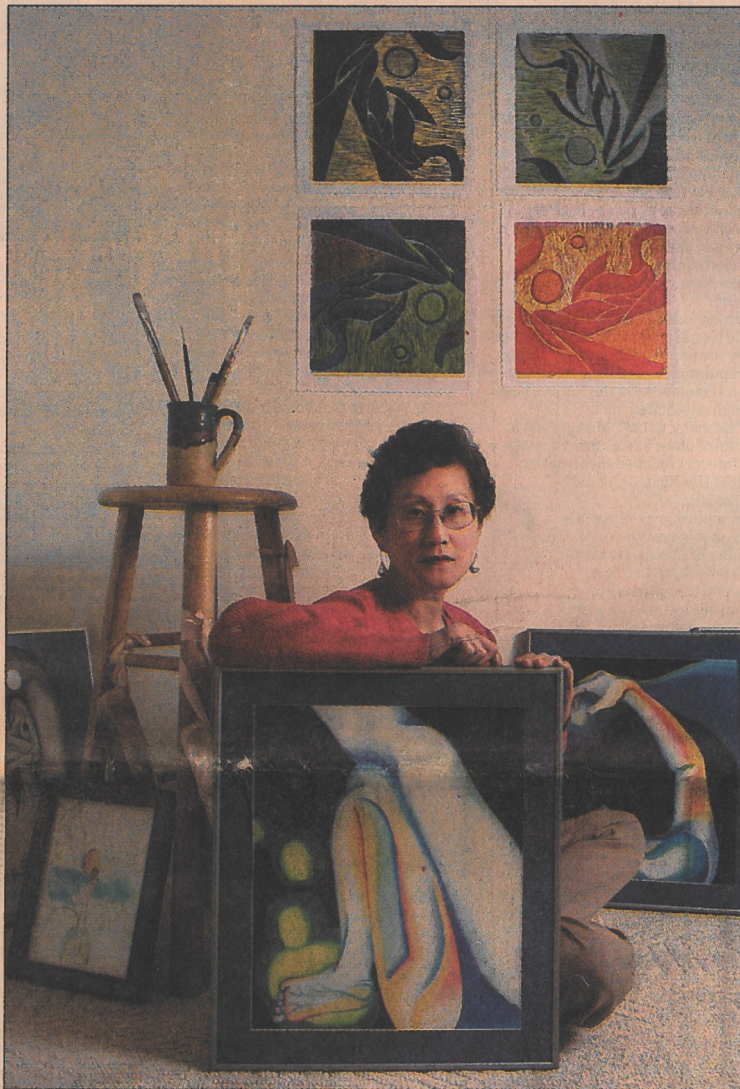




Candy Wei killed herself Jan. 16 in her U-M dorm.

ANGUISH ON CAMPUS

A talented U-M student kills herself, and her mother wonders if universities are able to handle mental health crises



WALT UNKS/Special to the Free Press

Jing Wang is surrounded with artwork by her daughter, Candy Wei, a University of Michigan student who killed herself by suffocation. The wood block prints examine the theme of rebirth.

By ERIK LORDS
FREE PRESS EDUCATION WRITER

On a January afternoon while most students at the University of Michigan studied, socialized or attended class, Candy Wei, a sophomore art and design major from Durham, N.C., sat in her dorm room alone — contemplating suicide.

She lay on her side and curled into the fetal position on the floor in Mosher-Jordan Hall before pulling a plastic bag over her head and face. She placed a rope around the bag and clasped it around her neck. Minutes later, she suffocated.

For years she had lived with schizoaffective disorder — a combination of schizophrenia and a mood disorder characterized by hallucinations, a lost sense of reality and alternating feelings

of euphoria and depression. Candy, 20, an outstanding student who aspired to be an art director for a national magazine, was first diagnosed with the illness at age 15 and responded to treatment to become a top student. She relapsed in November and returned home to North Carolina. After treatment, she returned to U-M and two months later, on Jan. 16, she killed herself.

In the wake of her death, Wei's mother, Jing Wang, is questioning whether colleges are adequately serving clinically depressed and other mentally ill students who need help.

Wang, a professor of Chinese cultural studies at Duke University in Durham, N.C., is outraged she had to play what she saw as a frustrating game of cat and mouse with U-M counselors

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► Suicide warning signs; where to find help.

► Michigan's largest universities don't come close to recommended staffing levels for mental health services for students.

COMING TUESDAY

The Free Press examines how Michigan is addressing the crisis in care for young children with mental illness.

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and private, off-campus psychiatrists when trying to get help for her daughter. She said many of her telephone calls and e-mail messages weren't returned, and that doctors canceled or pushed back appointments with her daughter.

The concerns come at a time when more and more students are flocking to campus health centers seeking psychiatric care.

In a Free Press survey, officials at U-M, Wayne State University, Eastern Michigan University and Michigan State University all reported large increases in the number of students they've seen with serious mental problems in recent years. Meanwhile, some mental health staffs aren't growing to handle the new demand.

"We are definitely seeing more and more students with severe mental pathology than we've seen in the past," said Eleanor Bossi, a psychologist at the MSU Counseling Center.

Reasons for the rush to the counseling centers include heightened academic pressure, a greater need for students to juggle school and outside jobs because of higher tuition, unraveling of the traditional family structure, and earlier detection of mental illness in teens.

Wang has written U-M officials urging them to make measurable improvements to the school's Counseling and Psychological Services center, commonly known as CAPS.

Todd Sevig, director of CAPS at U-M, declined to comment on the specifics of Wei's case for this article, citing university confidentiality rules.

But in a letter to Wang last month, university officials said they will form a 4-person task force to examine how her daughter's case was handled.

The letter was short on specifics, Wang said.

"I'd like to see more concrete plans and also a timetable," Wang said, adding that she is talking with lawyers. "I'd like to see real institutional changes; I don't want to just see people get together for a brief time and then nothing happens."

The responsibility question

Embedded in the discussion is the question of whether universities or parents are ultimately responsible for overseeing a student's health care.

"As people who work at universities, our responsibility is to provide services" and make service available, Sevig said. "But ultimately we cannot force a student to get help or continue getting help."

Still, Michigan law holds licensed health care professionals to a reasonable standard of care, which could leave individuals at universities liable for negligence, according to Elizabeth Gleicher, a Detroit attorney specializing in tort law.

Thanks largely to improved medication, many students with some mental illnesses can thrive in college in ways they couldn't 25 years ago.

But not all students can cope.

Wei, who had a 3.8 grade point average, was the second U-M student to commit suicide during the 2000-2001 school year. Area universities say they don't keep statistics on the number of suicides each year, but a recent study by the University of Chicago shows that at Big Ten universities, one out of 15,000 students on campus typically commits suicide per year.

While there is no evidence that says college students are at a greater risk for suicide than others in their age group, students and experts say college life brings a unique cluster of stressors that can exacerbate mental health problems.

Academic competition, intense peer pressure and experimentation with sex, drugs or alcohol come at a time when students are away from the stabilizing effects of home.

"Much of the pressure comes from parents, but much of it is from the students themselves," said Ralph Rickgarn, a former University of Minnesota residential life administrator who wrote the 1994 book, "Perspectives on College Student Suicide." "Many tell themselves 'I must get the A's or I won't get the job.' For many, B's are not good, and C's can be tragic."

Rebecca Messing, a U-M senior engineering major from Haslett, lived with an anxiety disorder for years and said she was suicidal during her freshman year.

"I laid in bed every night just wanting to die," she said.

An off-campus psychiatrist in Ann Arbor helped with medication and therapy, and "I've never

WHERE TO FIND HELP

- Ingham Community Mental Health, 517-346-8460, 24 hours.
- Listening Ear (Ingham, Clinton and Eaton counties) 517-337-1717, 24 hours.
- Macomb County Crisis Center, 810-307-9100, 24 hours.
- Michigan Self-Help Clearinghouse: Statewide referrals, 817-484-7373, 24 hours.
- RAP LINE: Statewide crisis line for those 17 and under, 800-292-4517, 24 hours.
- Tricounty Community Mental Health: (Ingham, Clinton and Eaton counties) 800-372-8460, 24 hours.
- Wayne County Community Mental Health Emergency Service: 313-224-7000, 24 hours.
- Online resources on depression and suicide: <http://www.emufarm.org/~cmhbell/depress/deplink.html>

been more mentally healthy than I am now," Messing said recently.

Supply and demand

University mental health centers have struggled to keep up with a growing demand for services and growing seriousness of the cases they treat.

Sevig said since 1994 the annual number of students visiting the center has nearly doubled to as many as 100 each day, a figure he said is consistent with trends at most universities around the state and nation.

Structured primarily for short-term care, U-M's CAPS has between 70 and 100 student visits a day, or as many as 14,000 per academic year, Sevig said. Some students are seen on a repeat basis for individual sessions with a counselor, and some are referred to private doctors.

Some students say understaffing and overcrowding at mental health centers make visiting a hassle. "CAPS actually did more harm than good" Messing said.

"CAPS got rid of me after a few visits, I didn't feel like we were making that much progress."

Sevig denied that CAPS pushes students away, noting that unlike many colleges, U-M does not limit the number of counseling sessions.

But Wang said when her daughter visited CAPS by herself, she was told she'd have to wait a week for an appointment, even after indicating that she needed immediate help. "There was no sense of urgency," Wang said. The next time, when Wang flew from Durham to accompany her, she said Candy was seen immediately.

Although she described symptoms of her illness, "Candy was given a form to fill out, but all the questions dealt with eating disorders and alcohol problems," said Wei's boyfriend Don DeSander, a recent U-M mechanical engineering graduate from Saginaw. "She felt like it wasn't a place designed to help her."

Sevig sees it differently.

IN MEMORIAM

Candy Wei's family has created a Web site http://www.humanecomp.org/candy_wel/ and started a scholarship fund. To give to the Candy R. Wei Memorial Endowment/Scholarship Fund, make checks payable to: The Candy R. Wei Memorial Fund, the School of Art & Design, the University of Michigan, 2000 Bonisteel Blvd., Ann Arbor, 48109-2069. If you have any questions concerning this fund, call Betty Smith at 734-336-1350 weekdays from 9 a.m. to 5 p.m. or e-mail her at bmshaw@umich.edu.

"When they come in, they are under no obligation to fill out forms, but we do ask that to make an in-depth assessment of what's going on," he said.

Wang finally opted to go off-campus for help. Ultimately, though, the off-campus psychiatrists may also have let her down.

Wang said that at about noon the day she died, Candy called to confirm an appointment with an off-campus psychiatrist based in Ann Arbor. The doctor returned the call, and left a message on Candy's machine saying the appointment had to be pushed back to a later time. Candy died around 2:40 p.m.

Said Wang: "We won't ever know whether or not Candy got that message."

Or what its effect might have been.

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