

2016 Strategic Plan Key Question Committee – Final Report

Question(s):

- What are the top mental health impediments to student success for ISU students? How do ISU students compare nationally?
- How frequently do ISU students, who leave prior to graduation, cite mental health concerns as a reason for departure? What is the retention rate for students who use mental health services (on or off campus)?
- What resources are currently available to assist students in addressing mental health concerns? Are those resources meeting the needs of ISU students?

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Summary:

Use this section to give a one-paragraph summation of your work and findings.

Key Findings Summary

Use this section to provide a brief list of the key findings from the detailed section in the document below.

Key Finding 1	Availability of mental health providers on campus in the Counseling Center at ISU is below national standards and is not meeting the needs of ISU students
Key Finding 2	In addition to additional providers, there needs to be more emphasis on bringing in diverse mental health providers who have a greater awareness of multicultural concerns
Key Finding 3	Research consistently shows that students who use counseling services graduate at higher rates than students who do not use counseling services

Recommended Actions Summary

Use this section to provide a brief list of the recommended actions from the detailed section in the document below.

Recommended Action 1	Expand the number of licensed providers in the ISU Student Counseling Center
Recommended Action 2	Expand basic mental health awareness and training to the entire ISU community through Mental Health First Aid, QPR Training, or other evidence-based programs

Recommended Action 3	Conduct a more thorough assessment of ISU's student population through the NCHA to get data that is directly comparable to other institutions
Recommended Action 4	Review services for disabled students to address any gaps in communication and collaboration across campus, which will provide better services to these students

Background:

Use this section to discuss what has happened historically in this area. This could be happenings, situations, or the environment at our institution, perhaps regionally or national –and then how this has affected us here and what the institution has done or not done in this area. This section does not need to be more than a page.

Historically, college and university counseling centers were recognized as campus mental health settings that served students with lower to moderate level personal or mental health concerns that were related to their development as emerging adults. Many of these concerns centered on issues such as adjustment to college, mild depression, information and referral, anxiety, and relationship concerns. However, in recent years counseling centers have been forced to transition into addressing more severe and intense presenting concerns; now making many counseling centers very similar to community mental health providers. As a result of cultural changes associated with this generation and the increased severity of issues, the demand for services at college counseling centers has skyrocketed nationally, leaving many centers overwhelmed and unable to fully meet the needs of their respective student bodies.

Data suggests that approximately 1 in 4 young adults between the ages of 18 and 25 have a diagnosable mental health condition; and it is estimated that approximately 30 percent of students entering colleges and universities at this time have had prior experience in counseling or have been on some form of psychotropic medication before even stepping foot on a college campus. Because students are increasingly arriving at college and university campuses with greater mental health concerns and there is a reduced stigma to seek treatment due to prior experiences, they are seeking mental health services in record numbers.

According to the American College Health Association's National College Health Assessment, the top three health impediments to academic performance are mental health related: stress, anxiety, and sleep difficulties, with depression following closely at number 5 after cold/flu/sore throat (ACHA). Additionally, results of the most recent National College Health Assessment (2014), which is conducted yearly by the ACHA, showed that within the past year approximately 86% of college students reported feeling overwhelmed by all they had to do; 54 percent reported experiencing overwhelming anxiety; 62 percent reported feeling very sad with 32 percent indicating that they were depressed to the point that it was difficult to function; and 37 percent reported feeling overwhelming anger. Please note that these findings are fairly consistent over the past 5 years.

As it relates to retention and graduation rates, research has shown that students who use counseling services tend to graduate at higher rates and are retained in higher numbers. Wilson, Mason, & Ewing (1997) found a 14 percent “retention advantage” for students in counseling versus those in a control group who were wait-listed for future counseling or never attended an appointment. A follow up study at Southern Illinois University found a similar result when their replicated study showed that students who attended counseling had a 25 percent advantage in graduation rate versus students who did not attend. A similar study here at ISU in 2010 found that the 6 year graduation rate for students who used counseling services ranged between 68 and 72 percent, whereas the overall student body graduation rate at that time was between 48 and 42 percent. In addition to graduation rates and retention, studies have also shown that students who use counseling tend to have higher GPAs and display fewer behavioral concerns.

As ISU goes into the next Strategic Plan Cycle, it is important to consider the impact of mental health services on retention and graduation rates as well as to the overall atmosphere of the University. As it relates to counseling on the ISU campus, the Student Counseling Center (SCC) is the department responsible for providing the majority of services to ISU students, while the two other clinics are more open to the community. Please note that the other clinics, the Psychology Clinic in Root Hall and the Grossjean Clinic, are training clinics for the doctoral and master’s graduate programs in psychology and do not work with the level of pathology or crisis situations seen at the SCC. As will be highlighted in subsequent sections, the SCC has seen similar trends as those mentioned earlier in overall usage and severity of symptoms. Many of these trends are also evident in the recent increases in behavioral incidents on campus, as indicated by the Office of Student Conduct and Integrity. As part of our commitment to graduating students in a timely manner and our responsibility to the ISU community, these issues related to mental health need to be evaluated and addressed.

References

American College Health Association (2015). National College Health Assessment, Retrieved from http://www.acha-ncha.org/docs/NCHA-II_WEB_SPRING_2015_UNDERGRADUATE_REFERENCE_GROUP_EXECUTIVE_SUMMARY.pdf

Analysis Methods:

Use this section to discuss your methodology by which you collected data and information and the sources from which you collected it. This does not need to be a detailed bibliography but rather a discussion of how you got your information, where you got it, and why you chose to get it there. This section does not need to be more than a page or two.

The committee reviewed national data from:

- American College Health Association’s (ACHA) National College Health Assessment (NCHA)
- Articles from peer-reviewed journals

- Association for University and College Counseling Center Directors (AUCCCD)
- Available data from Indiana State University.

It is important to note that there is little information available about ISU students and the mental health impediments to academic performance they may be experiencing. This Committee reached out to both the Psychology Clinic in Root Hall and the Grosjean Clinic in the Bayh College of Education, both of which see very few ISU students and are not prepared to handle the severity or level of diagnosis of some students needing services.

The ACHA is the leading organization for college health professionals providing college health professionals with, collaboration networking, data, knowledge, and support that can guide and support policy, practice, and health service to students. The AUCCCD is the leading organization for college and university counseling directors. AUCCCD works to assist directors in providing effective leadership and management of their campus centers. These two organizations have the pulse of students and professionals as it relates to mental health.

The Committee reviewed the information indicated above including anecdotal information from committee members and their experiences as ISU employees.

Key Findings:

Use this section to discuss what you learned. This section, along with recommended actions, should make up the bulk of your report.

The committee determined the following to be the top three key findings following our work:

- **The availability of mental health providers on campus in the Student Counseling Center at ISU is below national standards and is not meeting the needs of students.**
 - According to the International Association of Counseling Services (IACS), which is the governing body for accrediting college and university counseling centers, “Every effort should be made to maintain minimum staffing ratios in the range of one F.T.E. professional staff member (excluding trainees) to every 1,000 to 1,500 students, depending on services offered and other campus mental health agencies.” As it currently stands, ISU has a staff to student ratio of 1 to approximately 2,250 students, which not only limits the ability of counseling staff to meet the current demand, but there are other adverse impacts as well, including limitations to the kinds of services that can be offered and high staff burnout. Based on Counseling Center data, it can take over two weeks for a first appointment during the busiest times of the year, with follow up after first appointment sometimes taking up to 6 weeks. Please note that this has the potential to become a major liability issue, especially with the number of crisis appointments and hospitalizations that have been reported over the past few years, with the current year currently setting a record pace for both.
 - There are two training clinics on campus, in addition to the Student Counseling Center; however, those clinics are staffed by graduate students and are primarily used by the local community.

- **In addition to additional providers, there needs to be more emphasis on bringing in diverse providers who have a greater awareness of multicultural concerns.**
 - As a whole, the ISU Student Counseling Center does a good job providing services to students from diverse backgrounds; and our African American and LGBT populations use the services at a rate higher than their reported percentage at the University. Nevertheless, the SCC would benefit greatly from adding additional counselors/psychologists from diverse backgrounds who can bring a greater level of cultural sensitivity and awareness to their work with ISU students. This would additionally allow for greater outreach and prevention opportunities and further reduce the stigmas that certain groups have about seeking mental health services.
- **Research consistently shows that students who use counseling services graduate at higher rates than students who do not.**
 - A study at Southern Illinois University found that students who attend counseling had a 25 percent advantage in graduation rate versus students who did not attend. A study here at ISU in 2010 found that the 6-year graduation rate for students who used counseling services ranged between 68 and 72 percent, whereas the overall student body graduation rate at that time was between 48 and 42 percent. In addition to graduation rates and retention, studies have also shown that students who use counseling services tend to have higher GPAs and display fewer behavioral concerns.
 - Research going back over the past 30-40 years has consistently shown that counseling services positively impact graduation rates of students who seek out those services. When combined with the fact that more recent data suggests that students are attending colleges and universities more and more having had prior experience with counseling or psychotropic medications, this is an area of service that needs to be considered strongly to meet the needs of ISU students. Not only does the provision of services assist in graduation and retention rates, but counseling has been shown to reduce related behavior concerns, disruption to the academic environment, and overall dissatisfaction with the collegiate experience, which in turn makes the university community more conducive to both academic and personal growth.

Recommended Actions:

Use this section to discuss what actions your committee believes the University should undertake given your findings and our current situation and environment. Recall that this should not be a call for more study.

1. Expand the number of licensed providers in the ISU Student Counseling Center.
 - a. This expansion should include an emphasis on adding staff from diverse backgrounds.
 - b. Bring the current pay scale more in line with both local and regional salary levels for mental health providers.
 - c. Bring in providers who can expand services in the areas of substance abuse, men's issues, and psychological testing/assessment.

2. Expand basic mental health awareness and training to the entire ISU community through Mental Health First Aid, QPR Training, or other evidence-based programs.
3. Conduct a more thorough assessment of ISU's student population through the NCHA to get data that is directly comparable to other institutions.
4. Review of services for disabled students to address any gaps in communication and collaboration across campus, which will provide better services to students.
5. Over the next 3 years, work toward having the ISU Student Counseling Center obtain accreditation.
6. Expand outreach and prevention services to focus more on targeting underserved student groups such as International Students and Veterans.
7. With proper staff, expand collaborative efforts with Student Conduct and Integrity, Residential Life, the Center for Global Engagement, and Disabled Student Services.

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