

INTRODUCTION

College Counseling Services: Meeting Today's Demands

Michi Fu
Alliant International University

Alice W. Cheng
Bridgewater State University

One editor's career trajectory has been intimately shaped by college counseling work. First, as a practicum student at University of California, Irvine's Counseling Center, where culturally relevant individual- and group-therapy skills were developed as the foundation for future work. Second, from an intern to licensed staff at the University of Hawaii's Counseling and Student Development Center, where multicultural training encouraged culturally appropriate outreach and intervention methods, including a 1-week intensive backpacking wilderness retreat to help clients better relate with themselves and others through connecting with the outdoors. Finally, as interim director of counseling services of California State Polytechnic University, Pomona, where the challenges of responding to the growing demand for services necessitated creativity, workforce burnout prevention, and advocacy. Such experiences led to a curiosity as to whether there are exemplars to highlight some of the good work being implemented across the country, thus resulting in this special issue of *Psychological Services* highlighting college counseling services as integral agents in public service delivery.

Among several challenges as interim director of counseling services, the editor has attempted to balance the growing demands of service provision with staff burnout, particularly in a climate of unionized and tenured faculty counselors who had experienced instability of staffing, including leadership. Questions quickly emerged as priorities to respond to, questions such as how other college counseling services handle the following issues:

- increase direct counseling services when administration had established a new direct service expectation that was potentially incongruent with union contracts (e.g., How would they address administration's expectations resulting in an increase in percentage of time spent seeing students?);

- decrease the number of students on wait lists, given that the severity of those presenting for intake were beginning to reflect the demands of society in general (e.g., How would they address the higher number of intake clients who had endorsed ever having contemplated or attempted suicide?);
- convince staff to attend regular staff meetings and in-service trainings when they had become accustomed to working independently (e.g., What if none of their staff had a memory of a regular training schedule?);
- update and consolidate various outdated versions of the policy and procedures manual (e.g., What if there were at least three different versions that needed to be consolidated and vetted by the staff?);
- create spaces that are hospitable and healing (e.g., How might they develop a comfortable waiting area or additional rooms for group meetings, art therapy, or prayer-meditation?) when office spaces are scarce on campus;
- conduct team building and recognize staff when the department culture might have been contributing to a potentially toxic work environment (e.g., How would they address nontenured–nonunionized counselors being tearful during their one-on-one meetings that others would eat their food without permission from the locked department breakroom?);
- prioritize public relations to develop and maintain more positive relationships with campus partners (e.g., How would they consult with their campus's Title IX coordinator to combat sexual assault?);
- provide staff with relevant in-service trainings to help improve services to specific populations based on concerns shared during meet and greets (e.g., How would they address complaints of inadequate lesbian, gay, bisexual, transgender (LGBT) awareness sensitivity?);
- convince administration to make the safety and comfort of staff and students a priority (e.g., How might they convince administration to install cameras in waiting areas or purchase more ergonomically friendly furnishings for the clients?);
- harness technology for smoother service delivery and crisis intervention (e.g., How might they incorporate of iPads to assist with intake processes and crisis fieldwork?);
- advocate for increased staffing to better meet the minimum staffing recommendations of the International Accreditation of Counseling Services (e.g., How might they

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Michi Fu, California School of Professional Psychology, Alliant International University; Alice W. Cheng, Department of Psychology, Bridgewater State University.

Correspondence concerning this article should be addressed to Michi Fu, California School of Professional Psychology, Alliant International University, 1000 South Fremont Avenue, Unit 5, Alhambra, CA 91803. E-mail: drmichifu@gmail.com

track data and advocate with administration the need for more positions to better meet the needs of the volume and intensity of services being delivered?);

- create liaisons with other departments on campus when the administration values direct service provision more than outreach and prevention efforts (e.g., How might they help to strengthen bridges with campus partners such as the LGBT center, athletics, housing, etc.?);
- respond to campuswide crises (e.g., How might they handle hostage crises in the campus apartments, fraternity members' death by suicide, and other similar tragedies?); and
- collaborate with other campus partners to respond to national tragedies (e.g., How did they help their campus community process crises such as the Charleston shootings, Orlando Pulse nightclub shootings, etc.?).

The collective wisdom of colleagues from the Association of University College Counseling Center Directors' and the Organization of Counseling Center Directors in Higher Education's 2016 Listservs and phone consultations were critical in offering generous advisement regarding "best practices" (a debatable term because context prevents such possibilities from remaining static). Hence, a call for a special package regarding college counseling services resulted in an overwhelming number of submissions—some of which have been compiled into the special issue before you now.

The college counseling services special issue of the *Psychological Services* journal proudly presents 14 peer-reviewed articles focusing on various topics from national trends to staff burnout prevention. The next sections present a synopsis of what to expect from the various articles submitted.

1. "Are We in Crisis? National Mental Health and Treatment Trends in College Counseling Centers"

College students today report higher rates of mental health problems and symptom severity in comparison to students from past decades, yet counseling resources have remained stagnant. The authors (Xiao et al., 2017) examine whether this trend indicates a potential "crisis" in college campuses across the nation resulting in a situation in which students' mental health needs are unmet. Results indicated a crossover effect of mental health problems, with a small overall increase across a 5-year spend. Data observed that depression, generalized anxiety, social anxiety, general distress, self-harm, and suicidality increased whereas substance use disorders decreased over time. However, students sought services with greater frequency, which indicates that there is a problematic disparity between supply and demand. As more resources are allocated to reduce mental health stigma, which could potentially result in a greater number of students' seeking services, an equal effort should be made to provide proper support for mental health services.

2. "Presenting Concerns in Counseling Centers: The View From Clinicians on the Ground"

This study (Pérez-Rojas et al., 2017) explores clinician-identified presenting problems across demographic groups among students seeking services in college counseling centers. The three highest presenting problems identified by clinicians were anxiety, depression, and stress, each representing approximately 50% of the concerns for which students sought treatment. Prevalent external factors that

caused students to seek services were family and academic performance issues, which represented about 33% of all clients. Although suicidality represented about 10% of prevalent problems, it is noteworthy that a greater number of freshman as well as students representing minority group memberships reported such problems. The results identified the most prevailing problems seen in college campuses across the country and also highlighted certain groups for being at risk for suicide. Both findings can help guide counseling centers in allocating future resources to best meet the needs of the populations they serve.

3. "Meeting the Mental Health Needs of Today's College Student: Reinventing Services Through Stepped Care 2.0"

This article (Cornish et al., 2017) outlines an online treatment model (Stepped Care 2.0) in detail and illustrates implementation experiences at three universities in Canada and the United States. Stepped Care 2.0 utilizes both patient and provider feedback either to step up or step down on the program intensity depending on level of client need. The article proposes an alternative to the traditional face-to-face counseling approach in delivering services in order to better meet the growing demands of student mental health needs. The proposed model has the potential to balance demand and resources and to more effectively implement today's technologies when thinking about future care.

4. "Collaboration, Confidentiality, and Care"

The article (Moss, 2017) presents case studies to illustrate that using collaborative approaches can ameliorate the increasing mental health demands of college students'. Case studies of collaboration between college counseling center and housing and residence life were used to demonstrate how interdepartmental work can be done without compromising various confidentiality regulations imposed on college campuses when working with students with mental health needs. Ethical and legal aspects of privacy (e.g., HIPAA, FERPA, limits to confidentiality, use of consent) as well as recommendations in using a collaborative approach are discussed in attempting to provide a better standard of care to the student body.

5. "Outreach as Intervention: The Evolution of Outreach and Preventive Programming on College Campuses"

College counseling centers primarily provide counseling services but are also increasingly providing service activities that are more in line with a community mental health model. Thus, outreach and prevention programs have become more central to the mission of college counseling centers. The current article (Golightly et al., 2017) outlines and provides examples that describe the development of outreach in college counseling, which has included changes in outreach activities and leadership roles, as well as the emergence of the Association for University and College Counseling Center Outreach. The authors rely on anecdotal experiences and events to illustrate the important changes that have taken place over the past decade. The article encourages persons involved in outreach activities to gather empirical data to demonstrate the effectiveness of outreach as an effective strategy to attend to the mental health needs of the student population.

6. "The Relationship Between Students' Counseling Center Contact and Long-Term Educational Outcomes"

The authors (Scofield et al., 2017) explore the relationship between treatment and academic outcomes among college students who received services from college counseling centers over a 6-year period. As expected, students who received mental health

services graduated at a lower rate compared to their peers who did not seek mental health services. Among the students who received counseling services, those who had longer treatment were more likely to not graduate on time. Findings suggest greater need for academic support for students who receive services from counseling centers, especially those who need longer services.

7. *“University Counseling Service for Improving Students’ Mental Health”*

The present study (Vescovelli, Melani, Ruini, Ricci Bitti, & Monti, 2017) examines the efficacy of cognitive-behavioral therapy and psychodynamic therapy using a sample collected from an Italian university. Additionally, the study gathered an initial profile of the students seeking therapy services from the counseling center. Results indicated that the majority of students who sought services were female; were likely to major in philosophy, arts and communications, and medical sciences; and were most frequently diagnosed with anxiety and mood disorders. The two interventions did not significantly differ in efficacy, and both were effective in reducing distress and clinical symptoms, as well as in improving levels of well-being compared to pretreatment.

8. *“Using Online Interventions to Deliver College Student Mental Health Resources”*

Due to barriers to receiving mental health services on college campus, Internet-based interventions have the potential to increase services due to lower stigmatization and easier access. The present study (Nguyen-Feng, Greer, & Frazier, 2017) evaluates the efficacy of Internet-based stress-management programs by comparing three interventions while controlling for history of interpersonal trauma (IPT) as a moderator. Participants in all three groups reported significant decreases on all primary outcomes. Although all three interventions were effective, students who had an IPT history who used mindfulness plus present control and stress management conditions showed more improvement than did those who used the mindfulness-only intervention. Results suggest that Internet-based interventions are a viable way of providing treatment for college students and point to the need to tailor interventions based on student background and history.

9. *“Stigma, Mental Health, and Counseling Service Use: A Person-Centered Approach to Mental Health Stigma Profiles”*

The objective of the study (Wu et al., 2017) was to identify types of mental health stigma, mental health functioning, and mental health service used across different demographic groups. Profiles reflecting demographic characteristics as well as varying levels of stigma and mental health functioning were created from an examination of national archival data. The study found that Whites have a higher tendency to belong to the low self- and public-stigma group and have a higher likelihood of seeking mental health service when in distress. Average self- and public-stigma groups are more likely to be female or Black. Identifying as man or an Asian predicted greater likelihood of belonging to the high self- and public-stigma group and less likelihood of seeking services compared to identifying as a female or White; they consisted of 17.8% of the sample. This study points to the fact that it is important that college counseling centers tailor their outreach plans to students with low mental health seeking tendencies.

10. *“University Students’ Perceived Need for Mental Health Services: A Study of Variables Related to Not Seeking Help”*

The authors (Nash, Sixbey, An, & Puig, 2017) examine demographic and behavioral variables related to avoidance of psychol-

ogy services among college students using large-scale archival data. The study is timely because of the increasing rates of mental health concerns among college populations as well as the lack of help-seeking behavior among the majority of students who need services. The study bridges a gap in the literature by exploring a subgroup of students who perceived the need for mental health services but did not seek treatment. Results indicated these students are more likely to be female, Non-White, of lower socioeconomic status, have financial difficulties, less engaged academically, have sleep difficulties, and experience heightened emotional distress. These findings suggest that college counseling centers need to tailor their outreach plans to students with higher needs for mental health services.

11. *“The Role of Personality Traits and Barriers to Mental Health Treatment Seeking Among College Students”*

The authors (Jennings et al., 2017) examine whether in relation to actual help-seeking behaviors there exists an association between commonly explored barriers to treatment-seeking factors (e.g., stigma, negative attitude to therapy) and the five-factor model of personality characteristics. Consistent with results of other research, all factors of barrier to treatment significantly reduced treatment-seeking behavior. Among the factors of the five-factor model of personality, Neuroticism was a significant personality trait that positively predicted help-seeking behavior. Although unrelated to help seeking, both the Extroversion and Agreeableness personality traits were associated with lower perceived stigma toward mental health problems. In addition, Agreeableness was also associated with lower negative attitudes about treatment, whereas Conscientiousness was associated with lower perception of practical barriers to treatment. The study illustrates the importance of considering personality characteristics in help-seeking studies.

12. *“The Role of Therapy Fears, Ethnic Identity, and Spirituality on Access to Mental Health Treatment Among Latino College Students”*

Because Latinos are one of the fastest growing ethnic groups in the United States, the underutilization of mental health services among this group is of increasing concern. Other than structural barriers to treatment, examining cultural factors can contribute to the understanding of treatment disparity among ethnic minority groups. The present study (Turner & Llamas, 2017) explores the effect of therapy fears, ethnicity identity, and spirituality on the use of mental health services among Latino college students. These findings suggest that the less students’ views about mental health services are influenced by their religious affiliation the more likely they are to seek services. Furthermore, a lower level of spirituality was linked to a higher inclination to seek mental health services. Results also found that stigma toward mental health treatment, a common barrier to treatment seeking, did not influence the use of mental health in the past among Latino students. This further illustrates the importance of looking at cultural variables when examining disparity research among minority groups. Especially, studies have shown ethnic minority groups tend to have elevated mental health needs compared to their majority counterparts.

13. *“Mental Health Treatment-Related Stigma and Professional Help Seeking Among Student Veterans”*

Veterans have endorsed high rates of mental health diagnoses, but their treatment utilization rates have not matched the level of needs. The present study (Currier, McDermott, & McCormick,

2017) explores stigma, help-seeking attitudes, and mental health-seeking behavior between veterans and nonveteran students. Results indicated veteran students endorsed less stigma and higher help-seeking behavior than did nonveteran students. However, veteran students also endorsed higher negative views of treatment outcome than did nonveteran students. In addition, veterans who endorsed more negative beliefs about treatment were less likely to seek help mental health professionals, but this did not deter their intention to seek help from physicians. Results indicated the need to improve treatment efficacy and build trust in the veteran population among mental health professionals.

14. "Evidence-Based Practice as a Potential Solution to Burnout in University Counseling Center Clinicians"

Burnout remains a significant problem among mental health professionals. The study (Wilkinson, Infantolino, & Wacha-Montes, 2017) explores workload, symptom severity, and the use of evidence-based practice (EBT) in relation to burnout among clinicians in college counseling. Results found that the number of years working in a counseling center and perceived increase of symptom severity in the treatment clientele were positively correlated with burnout. Clinicians' self-report indicated a positive correlation to burnout if their approach to treatment deviated from evidence-based practices. Results of the study support the use of EBT in counseling centers, because it prevents clinicians from experiencing burnout and provides better treatment efficacy to the students.

The editors wish to extend gratitude to colleagues in past professional settings who have been an integral part of their professional development. It is due to their guidance and mentoring that they have been able to successfully contribute to the field in service, supervision, consultation, and publication opportunities. The editors hope that readers across varied environments will enjoy learning of samples of the creative work being implemented across counseling centers to the benefit of all those who are served in public service settings.

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