

VII. STANDING COMMITTEES

A. Academic and Student Affairs Committee

Current Trends in College Student Mental Health – 2013 Update

For information only.

BACKGROUNDOn a national level

Steady increase in demand for services has continued:

- Greater numbers of students are seeking counseling support
- Greater complexity of presenting issues
- Increasing numbers of students arriving on campus with history of medication
- Increasing expectations among parents and the public
- National concern about the apparent increase in violence on campuses

American College Health Association Survey [Spring, 2012 (n=90,666 at 141 colleges and universities)]

Students Report:

“Diagnosed or treated by professional in last 12 months”:

Anxiety	12%
Depression	11%
Panic attacks	6%
Bipolar	2%

Factors negatively affecting academic performance:

Stress	29%
Sleep difficulties	21%
Anxiety	20%
Respiratory infection	16%
Work	14%
Internet use/computer games	13%
Depression	12%
Concern for a troubled family member or friend	11%

Reported that at least once in the past 12 months:

Felt “overwhelming anxiety”	51%
Felt “overwhelming anger”	37%
Felt “so depressed it was difficult to function”	31%
Seriously considered suicide	7%

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What do we mean when we talk about “Developmental Concerns” among college students?

- Identity Development: Who am I? Who do I want to become?
- Career Development concerns: What do I want to do with my life? How will I contribute?
- Relationship Issues: With whom do I want to spend my time? How do I find love and connection? How do I take care of myself when I feel lonely?
- Family Concerns: How do I stay connected with my family even if they don't approve of me? How do I learn to let go of old resentments and move forward? How do I balance my own needs with the expectations of my parents?
- Making Meaning: What is the meaning and purpose of life? How do I live in a way that is congruent with my values? What matters most to me?
- Academic Concerns: Why am I not more successful? How do I manage my time more effectively? How do I motivate myself to focus on school?
- Self-Care and Mood Management: How do I manage stress and anxiety? What helps when I'm feeling blue? Why am I not happy when I know I have so much going for me?
- Financial Concerns: How will I pay for college? How do I keep up with my studies when I must work two jobs?

Relationship between Counseling, Retention, and Academic Success

The retention rate for students who received psychological counseling is 11- 14% higher than it is for students who do not.

High levels of psychological distress among college students are significantly related to academic performance: Students with higher levels of psychological distress are characterized by:

- Higher test anxiety,
- Lower academic self-efficacy, and
- Less effective time management and use of study resources.

University of Washington

Two primary vehicles for assessing risk and managing complex cases crossing departmental boundaries:

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- Consultation and Assessment Team (CAT) focuses primarily on students of concern and evaluates cases involving possible risk to self or others, as well as cases involving conduct and disruption to the learning environment. Representatives from Health & Wellness, Counseling Center, Community Standards & Student Conduct, SafeCampus, UWPD, Residential Life, and others attend twice weekly meetings.
- Violence Prevention Assessment Team (VPAT) focuses primarily on student, staff, or faculty situations that may represent threat to one or more members of the university community. Members of these two teams are overlapping due to expertise and the need to effectively “connect the dots;” however, attendance at VPAT meetings, in particular, is determined by the content and scope of the particular case.

Counseling Center:

- Primary presenting issues: Anxiety, Depression, Relationship Issues
- Steady increase in Consultation as well as demand for Counseling Services
- Funds from Services and Activities Fee as well as Provost Reinvestment funds have allowed for increase of 2.4 FTE; will track usage data with increased capacity
- Outreach, Education, “Post-vention” are important components of a comprehensive college mental health program.

University of Washington Counseling Center Service Delivery Trends

	2009-10	2010-11	2011-12	Fall 2011	Fall 2012	2012-13 (Projected)
Students Seen for Counseling	1,483	1,454	1,451	518	562	1,561
Appointments	7,077	6,749	6,428	1,733	1,863	6,900
Crisis Consult with Student*	301	434	488	138	192	686
Consult with Non-Student**	276	235	256	61	70	292

* Includes all walk-in contacts with students whose concerns are urgent

** Includes one-time and ongoing consultations with parents, faculty, staff, and others with concern about a UW student’s well-being

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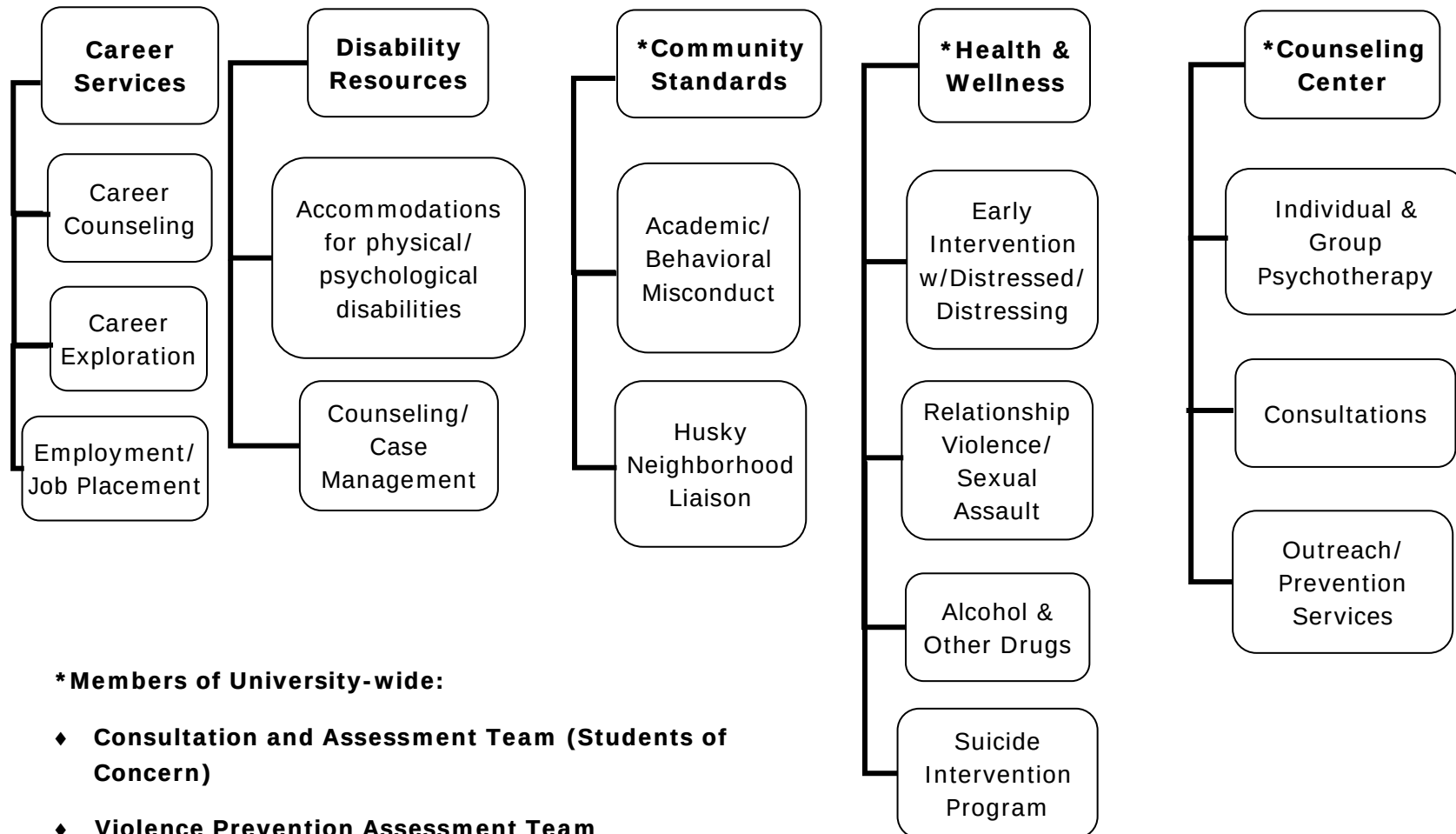
In 2011-12, Students seen at Counseling Center:

- 8% International Students
- 21% First-generation college students
- 30% currently or formerly on medication for emotional problems
- 22% report history of self-injurious behavior
- 28% report suicidal thoughts
- 6% report past suicide attempt
- 6% report thoughts of harming others
- 33% report current finances are often or always stressful

Attachment

Student Care/Welfare Organization Chart

Student Care / Welfare Division of Student Life



January 2013