

Where can college students turn for counseling?

By G. Jeffrey MacDonald, Special for USA TODAY

For the better part of two decades, a growing pool of college students has been arriving on campus with a range of mental-health problems, high stress levels and new medications enabling young adults to cope.

Now students aren't the only ones stressing out. Thinly stretched campus counseling centers routinely depend on overworked psychologists, off-campus therapists and waiting lists as long as three weeks to handle the crunch, says Rick Hanson, president of the Association for University and College Counseling Center Directors.

"We have more people needing services and more people willing to seek services," Hanson says. "It used to be that it was the really large universities that were more likely to have waiting lists. But I'm hearing that waiting lists are quite common now" at schools of all sizes and types.

On campuses across the country, mental health has become a challenge:

- 92% of college counseling directors believe the number of students with severe psychological problems has increased in recent years, according to the 2006 National Survey for Counseling Center Directors.
- In the same survey, 63% of center directors say their primary concern is a growing demand for services without a corresponding increase in resources.
- 37% of college students say they have felt during the past school year "so depressed it was difficult to function," spring 2006 data from the National College Health Assessment reported.

Some schools are taking steps to address the problem. For instance, this year the University of California-Davis, which saw demand for mental-health services jump 61% from 2000 to 2005, is filling new positions for four full-time psychologists and a half-time psychiatrist. Two factors have helped build support for Davis' expanded offerings: a 2006 report on mental-health needs across the University of California system and the killings of 32 people in April by a disturbed student at Virginia Tech in Blacksburg, Va.

"After the terrible events at Virginia Tech, more faculty were calling us, expressing concerns about students and how they should respond to particular student situations," says Emil Rodolfa, director of counseling and psychological services at UC-Davis. "They wanted consultation, and they saw the value in our service."

'No putting them on a waiting list'

Other schools, however, are still feeling pinched. Kansas State University, which saw a threefold

increase in depression and anxiety disorders from 1990 to 2003, has seen severe cases become even more common over the past four years. Clinical depression is now the most frequent diagnosis, afflicting 60% of KSU students who receive mental health counseling. Yet staff cuts under budgetary pressures have made it necessary for counselors to work overtime, often putting in 55 to 60 hours a week, says Sherry Benton, assistant director of KSU Counseling Services.

"By the end of last year, as a staff we felt the most overwhelmed and exhausted we have ever felt," she says. "But if you're dealing with a kid with major depression, there's no putting them on a waiting list. If you do that, they may not survive the semester."

As schools grasp for solutions, treatment sometimes falls through the cracks. University of Arizona senior Laura Schenk says outreach efforts were so limited during her first years on campus that despite her obvious symptoms of depression, no one at the university directed her to counseling.

When she finally sought help, campus counseling at one point referred her to an off-campus therapist, but she didn't have a car and often failed to make appointments.

"I just had my bike," says Schenk, who now relies on a combination of on- and off-campus services. "Then, I had to figure out the sliding scale for insurance. And when students are depressed, they're less likely to go to all that trouble."

Another problem plagues rural schools in particular: Mental-health specialists can be scarce in some areas. Hanson says this raises questions with legal implications.

"Counselors often find liability issues when they ask, 'Do I treat this person, who is kind of stretching my areas of competence?'" Hanson says. "I don't have a lot of training in that area, but I'm the most trained person in town. If don't do it, nobody is going to do it.'... It's a challenge that people in rural colleges come up against regularly."

Despite difficulties, schools are reporting progress. For instance, primary-care physicians at Cornell University in Ithaca, N.Y., began screening patients last fall for mental-health problems and referring cases to campus counseling.

Making it OK to get help

Student initiatives to de-stigmatize mental illness also have gained momentum across the country as chapters of Active Minds on Campus, a peer-to-peer outreach group, have taken root at 72 colleges and universities since 2002.

Mental-health advocates still see room for improvement. Schools need to "create a culture where it's OK to seek help," says Ken Duckworth, medical director for the National Alliance on Mental Illness, an advocacy group. But on the whole, he says, they're making headway in an environment of heightened awareness since the Virginia Tech shootings.

"I do feel like the colleges are waking up," Duckworth says. "My colleagues who do college mental health have felt burdened and under-resourced. Now when I talk to them, the provost wants to know what they're doing. The key players in universities now feel like mental health ... is something they feel accountable for."