

# Opt-Out Intake Counseling: A Preventative Approach to Mental Health at the University of Illinois at Chicago

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## THESIS

To address rising demand by students for mental health care services, the University of Illinois at Chicago (UIC) should implement mandatory opt-out intake sessions with counselors allocated to each college of the university.

## BACKGROUND & ANALYSIS

An alarming number of UIC student who believe that they have mental health issues are not seeking help from the university counseling center. Out of the 453 UIC students surveyed, 67 percent report “often” experiencing symptoms of depression or other mood disorders, and 51 percent have experienced suicidal ideations. Yet, 55 percent of UIC students have never received therapy that would address their mental health.<sup>1</sup>

Although associated stigma around mental-health treatment could account for these statistics,<sup>2</sup> a stronger explanation is the decrease in on-campus mental health resources. Rising demand for mental health services at UIC have not been matched with adequate resources. From 2013 to 2017, the number of students visiting the UIC counseling center increased by 19 percent, from 1,189 to 1,465 students, while the number of full-time employees at the center increased by only 15 percent, from 13 to 15.<sup>3</sup> This reality parallels national trends, which shows that students who visit counseling centers are increasingly likely to have severe psychological issues,<sup>4</sup> even though, on average, long-term treatment services have decreased.<sup>5</sup> The International Association of Counseling Services (IASC), which is the accreditation association for university, four-year college, and two-year community college counseling services, recommends that universities have one professional counselor for every 1,000 to 1,500 students.<sup>6</sup> Were this policy to be in place at UIC, there would be a minimum of 21 counselors for the 31,683 students currently enrolled.

The dearth of counselors is reflected in an average wait time of 14–21 days for counseling services. The counseling center is increasingly advising students to seek help at community clinics, campus hotlines, and group therapy to handle the growing demand for services. However, these stop-gap alternatives are not adequate solutions, especially considering that more than half of Chicago’s mental health clinics have closed in recent years.<sup>7</sup>

Students exhibiting mental health distress who do not receive care are at higher risk of dropping out.<sup>8</sup> Among those identified as experiencing symptoms of depression, just 30 percent strongly agreed that they would ultimately graduate.<sup>9</sup> Minority students, in particular, face additional systemic barriers to accessing mental health treatment and are more likely than white students to delay or fail to seek mental health treatment.<sup>10</sup>

## TALKING POINTS

- A majority of students at UIC claim to experience symptoms of depression, anxiety, or other mood disorders at some point during their college career.<sup>1</sup>
- As the counseling center attempts to meet rising demand for services, students who have not yet reached “crisis level” risk slipping through the cracks because of long wait times. The counseling center at UIC needs to dramatically increase services to resolve this disparity.
- The opt-out policy de-stigmatizes mental health by normalizing the concept of counseling and treatment while also providing first-line preventative care to reduce the risk of crises down the line.

## THE POLICY IDEA

UIC should provide an opt-out counseling intake program in which all enrolled students participate in mental health counseling with a certified counselor at least once during their undergraduate career. This system would follow the existing model of academic advising that all degree-seeking undergraduates are expected to complete while attending UIC. Counselors, embedded within each college of the university, would familiarize themselves with each college's academic culture. Necessary increases in operating costs would derive from a nominal increase of the Health Service Fee already imposed on all enrolled students.

## POLICY ANALYSIS

The policy proposal models the existing system of academic advising students now participate in at UIC. Current university policy mandates that degree-seeking undergraduates see an assigned academic adviser at least once per semester to address any academic concerns and ensure that students stay on track for graduation. However, these academic advisers are unqualified to deal with issues relating to mental health. By recommending that all students see a wellness counselor during their first year to assess and address any underlying mental health or emotional needs, the university could enable the counseling center to take a more preventative and holistic approach to supporting students' health. Moreover, the policy would decrease the knowledge gap of available health care resources on campus, reduce the stigma that surrounds mental health among young adults, and mitigate the possibility of students falling through the cracks—especially students at risk of developing mental illness.

The “opt-out” option would allow students to waive an intake assessment. Hiring counseling staff to work within the colleges would lower the counselor-to-student ratio to meet the IACS benchmark. A nominal monetary increase to the existing UIC-mandated Health Service Fee<sup>11</sup> alongside an increase in the counseling center's budget would fund these additional counselors.

## NEXT STEPS

We will implement a pilot program for one incoming class of the university by working with the director of the counseling center and dean of the college. We will embed counselors within the colleges so that the ratio of students to psychologists is no more than 1,000 students per psychologist. To do this, we will identify funding opportunities within the student fee structure to realign more funding for counselors; for example, the university could increase the \$92 student health services fee or lobby the state government for increased funding. We will design and distribute an internal survey to a statistically significant sample of the student body to gather insight on a hypothetical increase in student fees. Should students respond positively to such a proposal, we will work to put the proposition on the ballot during student body elections. Contingent on student approval, we will work closely with the Undergraduate Student Government (USG) as well as the UIC Senate in developing a resolution focused on appropriating additional funds for the Counseling Center.

Should the pilot program be funded and implemented, we will advise the university to analyze the effectiveness of the model by noting the numbers and types of students utilizing the intake sessions, those continuing with mental health care, and those seeking care outside of the university counseling center. If the pilot program is effective and sustainable for two years, the university should expand it to all students.

## EDITOR'S NOTE

We created a policy to enact a temporary \$10 Mental Health Fee earmarked for hiring new counselors, which is backed by undergraduate and graduate student governments and has student approval, receiving a 66% vote of support in an undergraduate student government election referendum. Recently, the UIC Senate voted to pass a resolution backing the proposal.

## KEY FACTS

- Recommended staffing guidelines are 1,000 to 1,500 students for every psychologist, but UIC has 7,337 students for every psychologist.<sup>12</sup>
- Demand for services at the counseling center is reflected in a 19 percent increase, from 1,189 to 1,465 students. Yet the center added the equivalent of only one full-time counselor between 2013 and 2017.
- Nationally, 63.4 percent of university students reported feeling overwhelming by anxiety, 12.1 percent seriously considered suicide, and 41.9 percent felt so depressed that they struggled to function.<sup>13, 14</sup>

## ENDNOTES

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13. Hermes, “Campus Conversation #3.”
14. Healthy Minds Network. Data Point of the Month.