

Perceptions of On-Campus Counseling Services Among Diverse Student Groups

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Introduction

Problem Addressed

The purpose of this research project was to determine student perceptions of counseling services at Western Kentucky University and whether these perceptions vary among different demographic groups. This topic is important to the campus community and to college students across the U.S., especially during this period in time. Because this study was conducted in fall 2020, the COVID-19 pandemic has had a large impact on institutions of higher education and how they function. Mental health concerns are essential during times of change and isolation from the community. The Center for Disease Control (CDC) released a report that U.S. adults have reported more adverse mental health concerns this year compared to previous years due to the effect of the pandemic on society (Czeisler, Lane, & Petrosky, 2020). The goal of this study was to determine how students perceive counseling services at WKU and whether these perceptions vary among different demographic groups. The researchers hope that the data collected from this study can better inform the on-campus counseling services about barriers students perceive in accessing and obtaining the best mental health services for them.

Literature Review

Research on mental health demonstrates that many college students do not seek out assistance for psychological distress, despite relatively high levels of difficulties. For example, Gruttadero and Crudo (2012) found in a study of the status of mental health in college students, sponsored by the National Alliance on Mental Illness (NAMI), that 73% of the participants experienced a mental health crisis while in college. In this same study, 55% of participants reported that they had accessed mental health services on campus, while 40% had not.

Additionally, stigma was the leading barrier for college students accessing mental health services.

Like the study conducted by Gruttadaro and Crudo (2012), a study conducted by the Department of Health and Human Service (2001), also found stigma to be a leading barrier for all populations in the United States, majority and minority groups alike, from seeking out mental health services. The study also supported the concept that culture influences many aspects of mental illness, including how patients from a given culture express and manifest their symptoms, their style of coping, their family and community supports, and their willingness to seek treatment. Other notable findings from the study are that within the United States, overall rates of mental disorders for most minority groups are largely similar to those for whites; however, within these groups, mistrust of mental health services is an important reason deterring minorities from seeking treatment. Their concerns are reinforced by evidence, both direct and indirect, of clinician bias and stereotyping.

Ethical and Cultural Considerations

Some of the ethical and cultural considerations of this study included considering how individuals may define aspects of mental illness differently than others; some groups may define symptoms of mental illness as more or less severe than they actually are. In Laidlaw, McLellan, and Ozakinci's study conducted with college students in the United Kingdom they found "the majority of participants considered mental health as distinctly different from, and more clinical than, mental well-being. Participants with this perception commonly referred to mental health as 'serious', 'psychiatric', whereas mental well-being was described as 'feeling happy, confident, able to function/cope, feeling secure'." Other related cultural considerations are differences in

cultural values of persistence, self-responsibility, struggle, and other aspects related to mental health.

It's also necessary to consider the nature of the traumas students may have faced when participating in the study. These can vary greatly among different students, and their effect on their mental health may also differ. The concept of stigma has also been noted as another factor when considering how participants may engage in a study about mental health services.

Research Question

Because of barriers that college students may perceive accessing on-campus mental health or mental health services in general in addition to barriers or differences among different demographic groups, the primary research question for this study is: to examine perceptions of on-campus counseling services, with an emphasis on how perceptions vary between different demographic groups.

Methodology

Site and Population

The site for this research project was Western Kentucky University in Bowling Green, Kentucky. It is a medium-sized institution in the Southeastern region of the U.S. with approximately 18,000 students enrolled, according to the 2020 WKU Fact Book (Helbig et al., 2020).

How Participants Were Chosen

The participants in this student were from a random sample. A mass email was sent to all students enrolled at WKU during the fall semester of 2020. The email contained a link to an online survey.

Project Design

The research design was descriptive. The researchers wanted to examine the perceptions of on-campus/remote counseling services for students attending WKU during the fall semester of 2020. The survey was created through Qualtrics and consisted of 26 questions. The survey was primarily quantitative, asking demographic questions, concerns for personal mental health, past experience/satisfaction with counseling services at the institution or elsewhere, and perceptions of university support for mental health concerns. Many of the questions asked participants to respond using a five-point Likert scale. One qualitative question was included in the survey, which asked, “What barriers would keep you from seeking out help from the Counseling and Testing Center?”

Data Collection

Qualtrics served as the basis for the collection of data. The program is able to store all of the responses from participants, and each researcher could log into Qualtrics to view the responses in real time. The survey went live on November 11, 2020, and was closed on November 22, 2020.

Results and Discussion

Data Obtained

There were 230 responses in total: 57 respondents identified as freshmen, 36 as sophomores, 29 as juniors, 51 as seniors, and 42 as graduate students. While this split is not divided evenly, there is a large enough sample from each classification level to provide meaningful data. In regard to race, 81% of the participants identified as white or caucasian; 11.3% identified as Black or African American; 3.2% identified as Asian; 2.7% identified as biracial/multiracial; and less than 1% of the participants identified in the category of American

Indian or Alaskan Native and the category of Native Hawaiian or Other Pacific Islander. One thing to note in regard to the racial demographic data is that the exact racial categories of those who identify in the biracial/multiracial category is unclear. Additionally, these racial categories are not evenly split among all participants; however, they are close in value to the percentage of the institution's population in each racial category with 79% of all students identifying as White and 8.3% as Black during the fall 2019 semester, according to the 2020 WKU Fact Book (Helbig et al., 2020).

Other important demographic data includes the gender and sexuality demographics of the participants: 74.8% of the participants identified as female; 20.5% identified as male; 2.33% identified as gender non-conforming; less than 1% identified in the category of transgender male; and less than 1% identified in unlisted gender categories and/or preferred not to answer. In response to sexuality, 68.9% of participants identified as heterosexual, 25% as bisexual or pansexual, and 6.1% as gay or lesbian.

Based on these demographics and the questions asked throughout the survey, the researchers were able to analyze several student perceptions of on-campus counseling services and how some of these perceptions differed or remained consistent across several demographic groups.

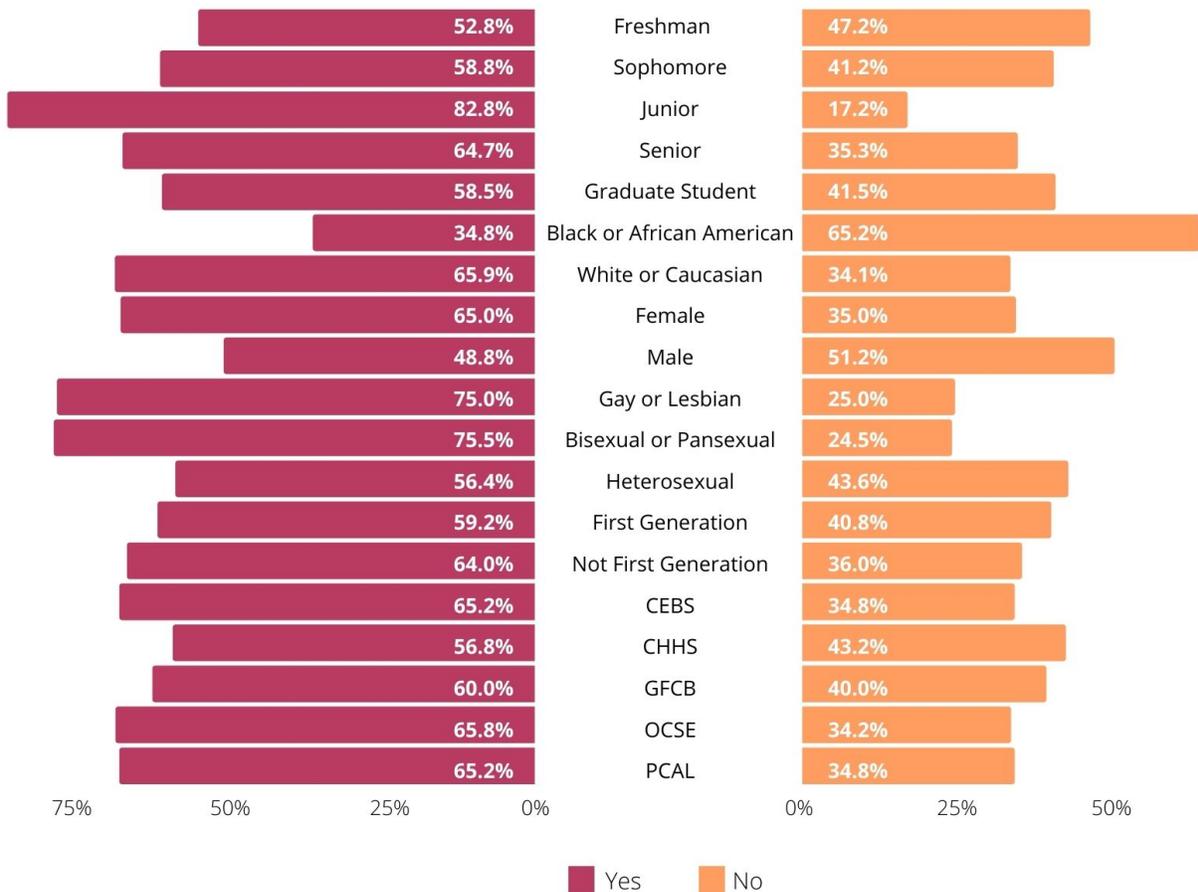
Previous Experiences

The majority of students surveyed expressed that they have experienced a mental health crisis during their time in college with 61.4% saying they had experienced a mental health crisis, and 38.6% saying they had not. Juniors were most likely to say they had experienced a crisis, with 82.8% saying they had experienced such a moment. Black or African American students

were least likely to have experienced a mental health crisis while in college with only 34.8% saying they had. Rates of crisis in additional demographic groups can be seen in Figure 1.

Figure 1

Have you Experienced a Mental Health Crisis While in College?

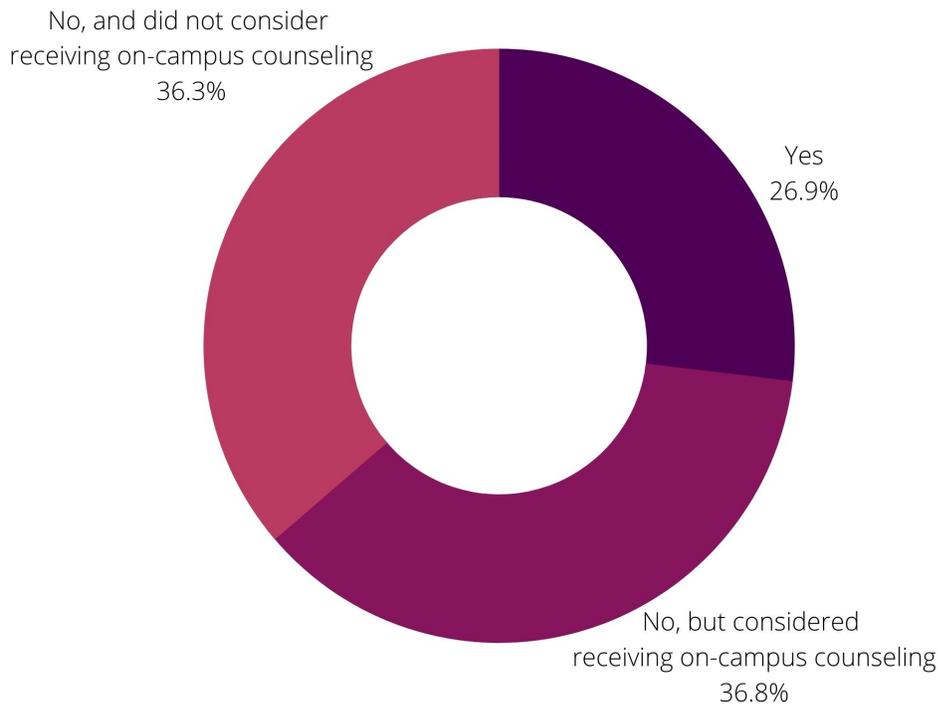


Another question on the survey was “Have you ever received counseling through WKU’s Counseling and Testing Center?” As seen in Figure 2, 26.9% of the participants who responded to the question, responded “yes,” while 36.8% of the participants responded “no, but considered receiving on-campus counseling,” and 36.3% of the participants responded “no, and did not

consider receiving on-campus counseling.” This means that less than one-third of the participants have accessed on-campus counseling services, despite nearly twice as many students noting they had experienced a mental health crisis on another question. Relatedly, 52% noted that they were not familiar at all or only slightly familiar with the on-campus counseling services; 21% of participants reported being somewhat familiar, and only 27% of participants reported being moderately or extremely familiar with the on-campus counseling services.

Figure 2

Have you Ever Received Counseling Through WKU’s Counseling and Testing Center?

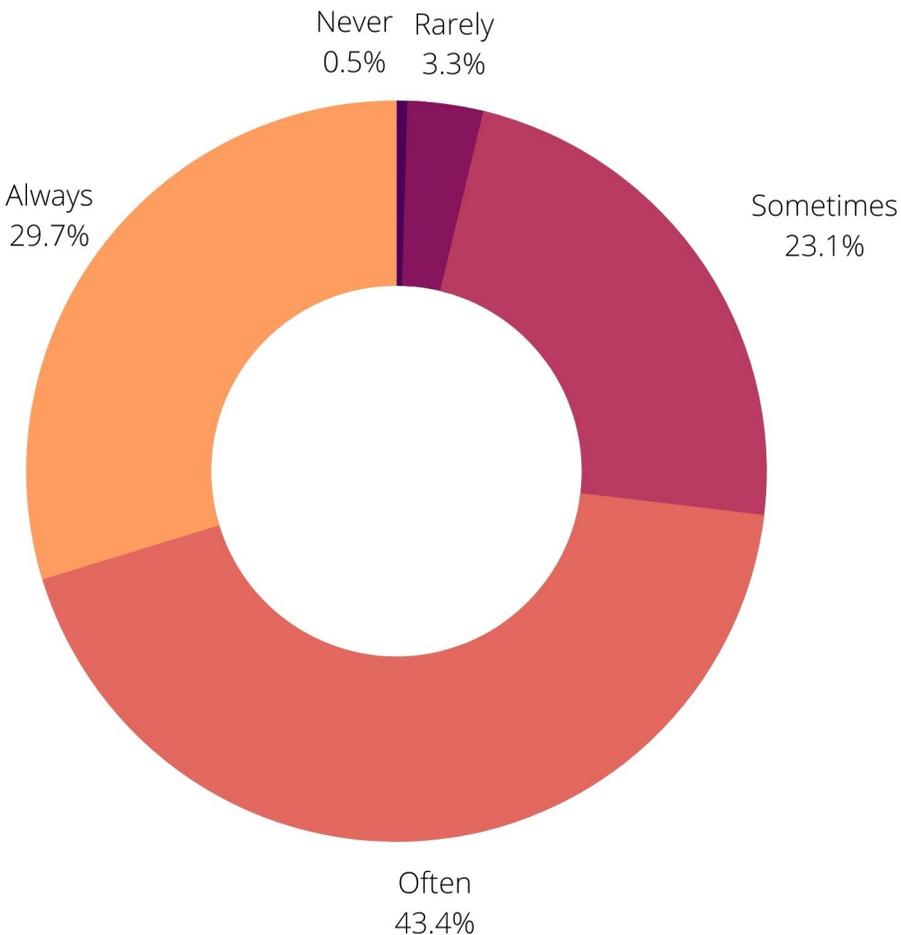


Students were also asked how much of a problem mental health concerns are in their daily life with 17.9% saying they are a “serious problem;” 43.4% saying they are a “moderate problem;” 30.7% saying they are a “minor problem,” and 8% saying they are “not at all a problem.” Additionally, students were questioned about how often stress impacts their daily life.

The most common answer was “often” which was selected by 43.4% of respondents, as seen in Figure 3.

Figure 3

How Often Does Stress Impact Your Daily Life?

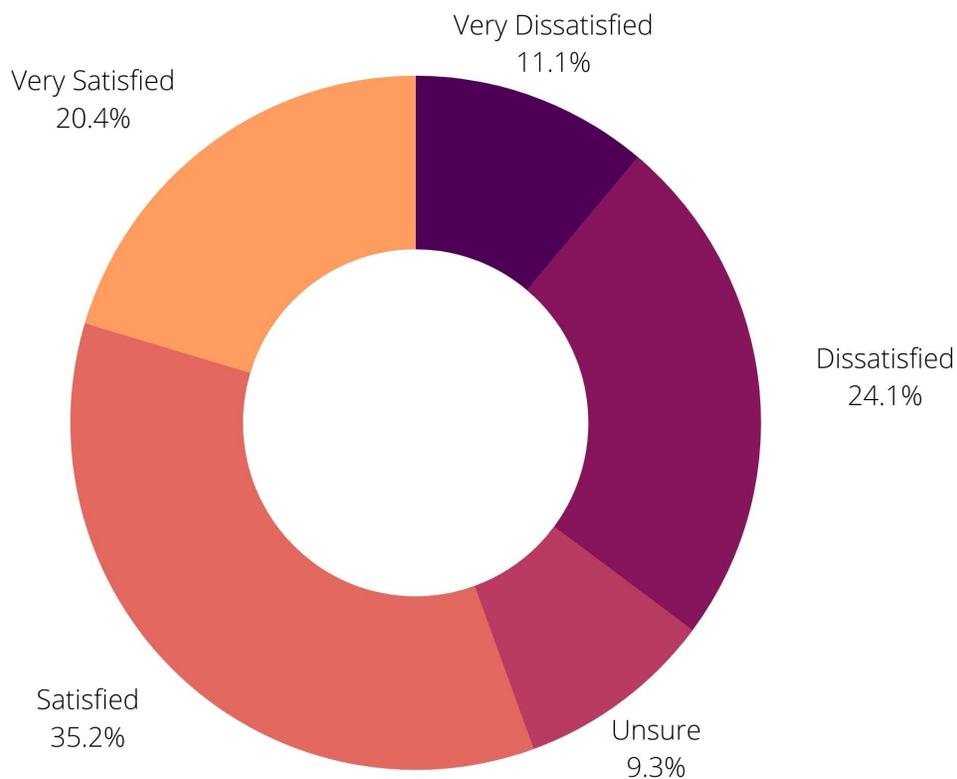


Those who answered “yes” to receiving counseling services from WKU were then asked to determine their satisfaction with the services they received. This question demonstrated high rates of dissatisfaction with on-campus counseling services. As depicted in Figure 4, over one-third of participants who had accessed on-campus counseling services were dissatisfied at some

level with their services. There were no notable demographic differences among this dissatisfaction when analyzing the data.

Figure 4

How Satisfied Were you With the Counseling you Received Through the Counseling and Testing Center?



Some of the negative perceptions thus far in the data collection may also relate to the recent use of telehealth counseling services on campus. Due to the COVID-19 pandemic, the on-campus counseling services only offer telehealth counseling rather than in-person counseling services. Because of this, the researchers also collected data related to the student perceptions of this type of counseling services and found that 10% of the participants had received

telecounseling over a video conference or a video call through WKU's counseling services, 19% had received telecounseling over a video conference or a video call from somewhere else, and 71% had not received telecounseling over a video conference or a video call. Among all of the participants, 59% noted that they believed counseling over a video conference or telephone call would be much worse or somewhat worse than in-person services, while 37% believed it to be about the same. Among the 21 respondents who said they had received telecounseling through WKU's Counseling and Testing Center, 57.1% believed the experience was about the same as in-person counseling while 38.1% believed telecounseling was worse, and 4.8% thought it was better than in-person counseling.

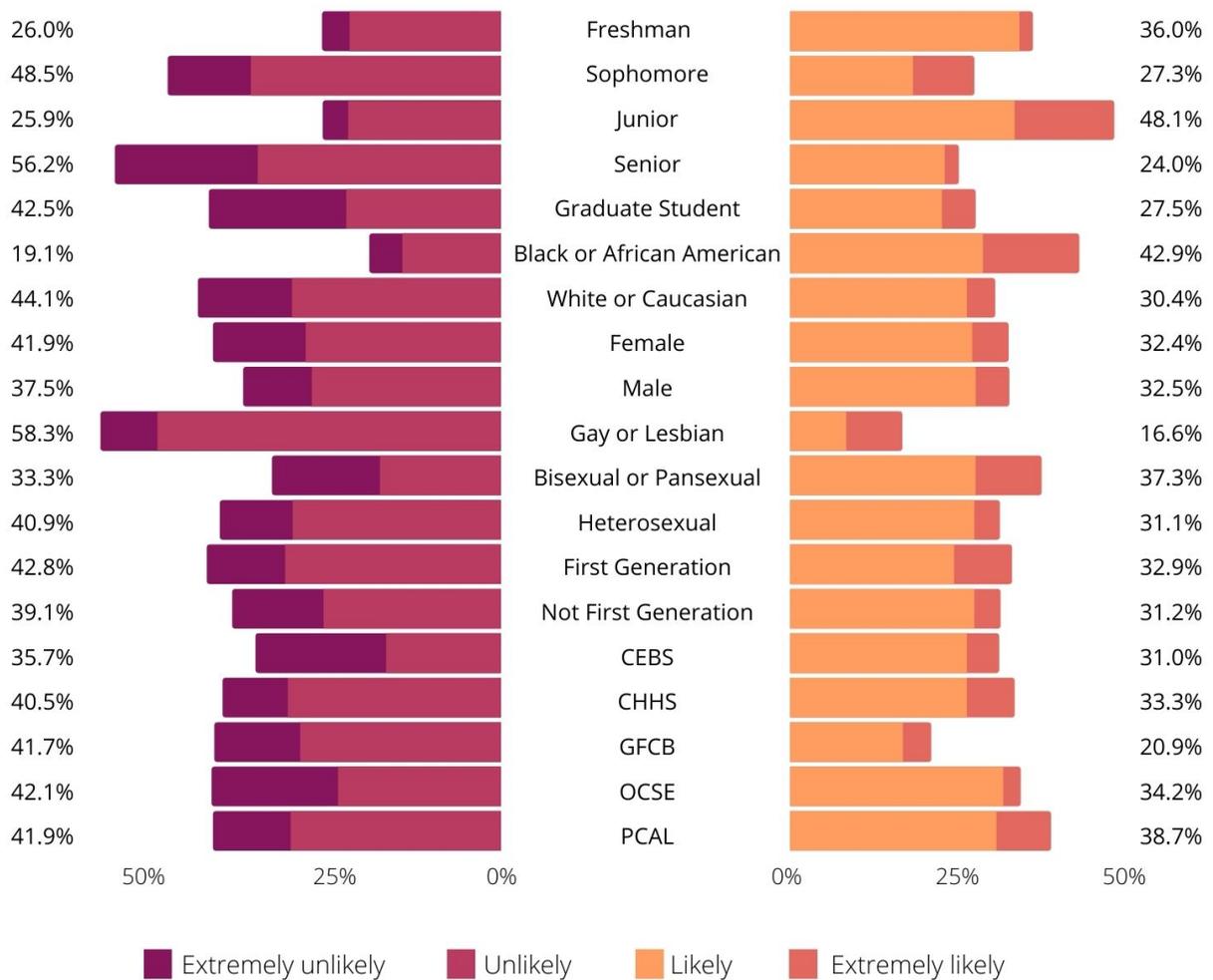
Likelihood of Using the Counseling Center

A series of four questions asked students about their likelihood of using the on-campus counseling services. The first question asked students to rate how likely they are to utilize the Counseling and Testing Center if they experience mild or moderate mental health issues. Results can be seen in Figure 5. Among the respondents, 32.2% said they were either "likely" or "extremely likely" to use the center for such issues, and 40.2% expressed that they were either "unlikely" or "extremely unlikely" to do so. Next, students were asked how likely they are to utilize the Counseling and Testing Center if they experience a mental health crisis. The number of students who said they were "likely" or "extremely likely" to use the center increased to 44.7%, and the number who said they were "unlikely" or "extremely unlikely" dropped slightly to 30.7%. Respondents were also asked how likely they are to refer a friend who expresses they are experiencing a mental health crisis to the Counseling and Testing Center. Students were much more likely to suggest a friend in crisis use the center than they were to use the center themselves, with 66.8% saying they were "likely" or "extremely likely" to recommend a friend

use the center, and 16.6% saying they were “unlikely” or “extremely” unlikely to do so. Finally, students were asked whether they would consider seeking out counseling from WKU’s Counseling and Testing Center in the future. Of the 199 students who responded to the question, 29.2% said they “would definitely consider” using the center; 53.8% said they “might or might not consider” using the center, and 17.1% said they “would not consider” doing so.

Figure 5

How Likely are you to Utilize the Counseling and Testing Center if you Experience Mild or Moderate Mental Health Issues?

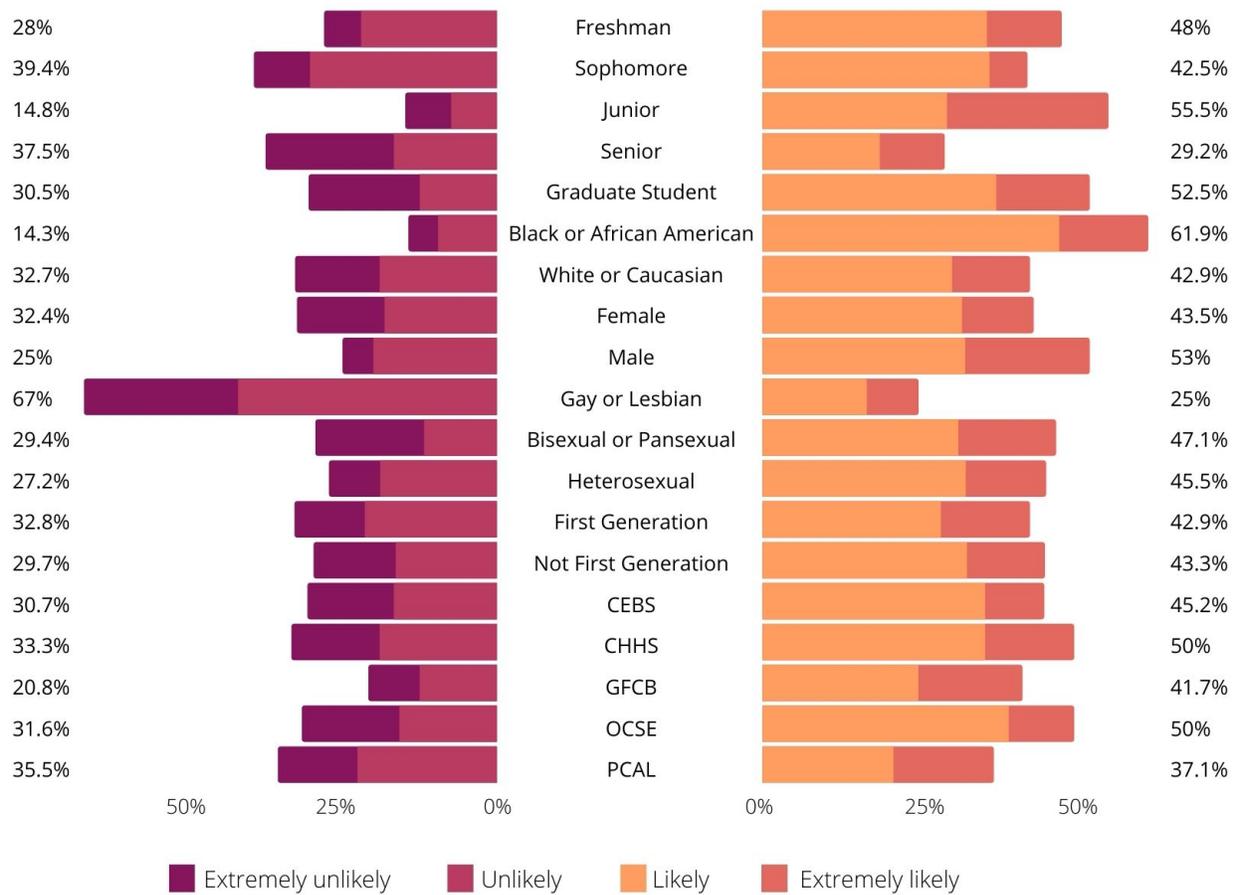


Analyzing the same questions through demographic crosstabs reveal key differences between demographic groups. When experiencing mild or moderate mental health issues, gay or lesbian students and seniors are least likely to turn to the Counseling and Testing Center. Among gay or lesbian respondents, 58.3% said they were “unlikely” or “extremely unlikely” to use the center in such a situation, and 56.2% of seniors said the same. Juniors and Black or African American students are most likely to turn to the center for a mild or moderate mental health issue. Among juniors, 48.1% said they were “likely” or “extremely likely” to do so, while 42.9% of Black or African American respondents said the same. Additional demographic breakdowns for the question can be seen in Figure 5.

Similar results emerged when students were asked their likelihood of using the center if they experience a mental health crisis, as seen in Figure 6. Juniors and Black or African American students were again most likely to utilize the center, albeit at a higher rate than for a mild or moderate mental health issue. Black or African American students were most likely to use the center in such a situation, with 61.9% answering that they were “likely” or “extremely likely” to use the center if experiencing a mental health crisis, and 55.5% of juniors answered the same. Gay or Lesbian students were, by far, least likely to use the center if they experience a mental health crisis, with 67% saying that they are “unlikely” or “extremely unlikely” to do so. For nearly every other demographic group, the percentage of students who expressed they were “unlikely” or “extremely unlikely” to use the center decreased if experiencing a mental health crisis, as opposed to a mild or moderate issue. However, the rate rose from 58.3% to 67% for gay or lesbian students. The rate also increased for freshmen but by only 2%.

Figure 6

How Likely are you to Utilize the Counseling and Testing Center if you Experience a Mental Health Crisis?

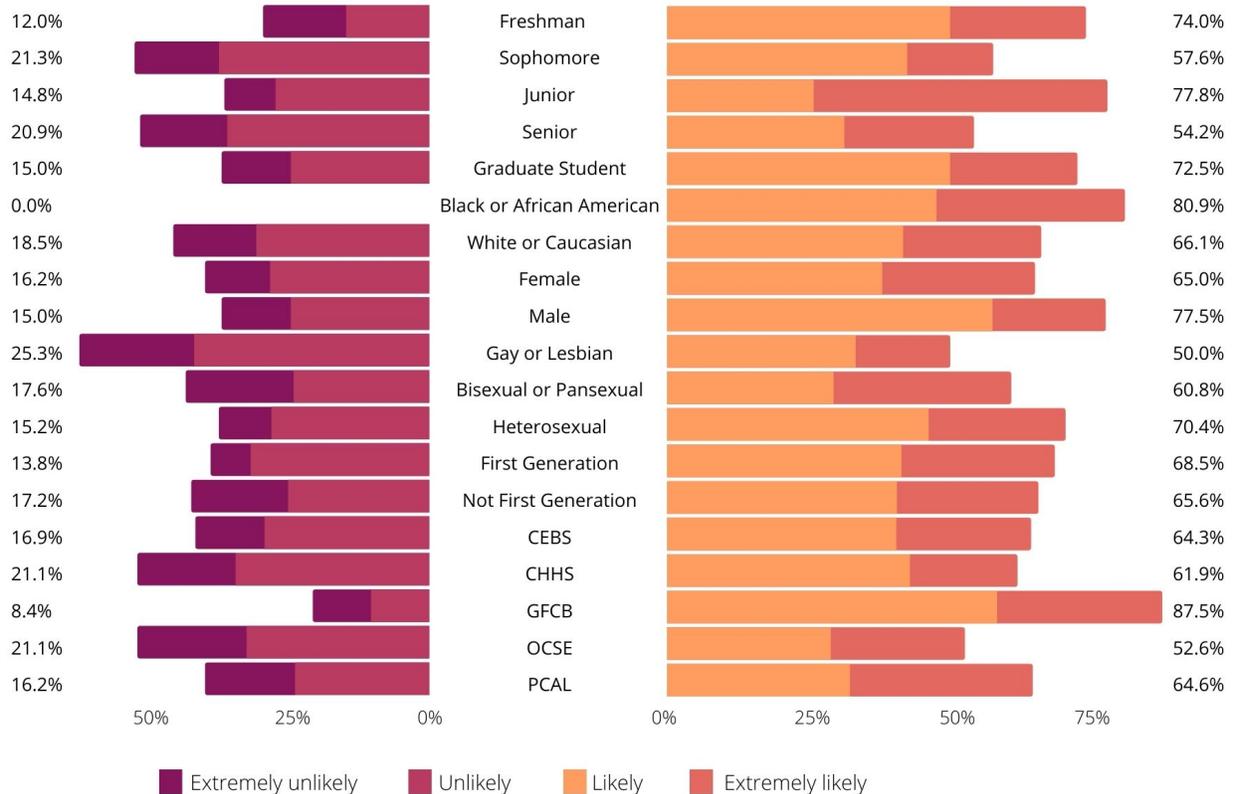


When looking at which demographic groups are most likely to recommend a friend experiencing a mental health crisis utilize the counseling center, a few other demographic groups stand out, as seen in Figure 7. Students from the Gordon Ford College of Business are most likely to refer a friend, with 87.5% responding “likely” or “extremely likely” even though those students were below the mean on their own likelihood of using the center in a mental health crisis. They were followed by Black or African American students as the second most likely

group to refer a friend in crisis, with 80.9% responding “likely” or “extremely likely,” and no Black or African American respondents said they were “unlikely” or “extremely unlikely” to recommend a friend in crisis use the counseling center. Similar to previous questions, Gay or Lesbian students are most unlikely to refer a friend in crisis, with 25.3% answering “unlikely” or “extremely unlikely,” although they are, nonetheless, less unlikely to refer a friend than they are to turn to the center themselves.

Figure 7

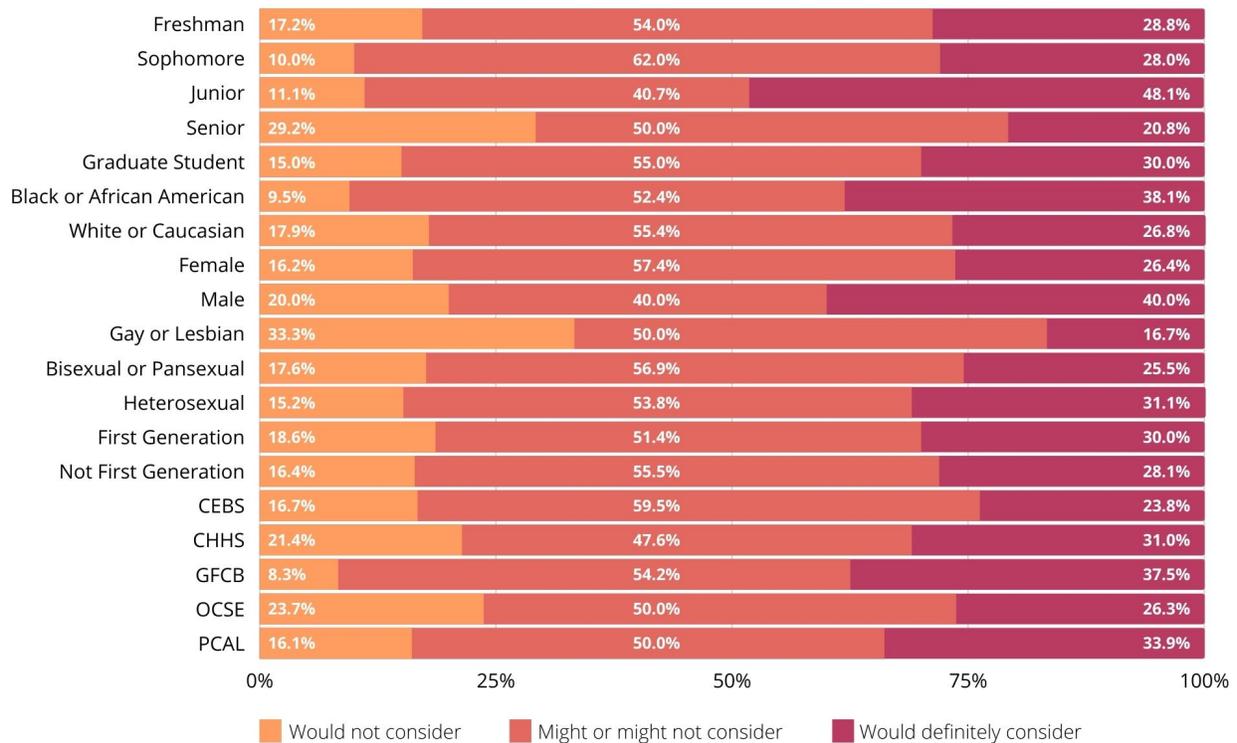
If a Friend Expresses They are Experiencing a Mental Health Crisis, how Likely are you to Recommend They Utilize the Counseling and Testing Center?



Finally, when asked whether they would consider seeking out counseling from WKU’s Counseling and Testing Center in the future, gay or lesbian students and seniors expressed that they were least likely to do so. One-third of gay or lesbian students said they would not consider doing so, and 29.2% of seniors said the same. Conversely, juniors are most likely to seek out counseling from the center in the future with 48.1% saying they would definitely consider doing so. They were followed by male students at 40%, Black or African American students at 38.1%, and Gordon Ford College of Business students at 37.5%. Additional demographic breakdowns can be seen in Figure 8.

Figure 8

Would you Consider Seeking Future Counseling From WKU’s Counseling and Testing Center?



Barriers to Seeking Help

The leading barrier students cite as keeping them from seeking help from the Counseling and Testing Center, as noted in Table 1, is a negative previous experience with the center or word of mouth from peers with a negative experience, with 27 students mentioning that as a barrier — that makes up 11.7% of all respondents or 18.4% of the 147 respondents who typed an answer to this question. One student who previously used the on-campus counseling service said, “Last time I was told I was just a stressed out college student. Made me feel very invalid about my feelings.” Another said “I have been before and they do not help with common stresses of a college student only big events that cause a mental crisis.” A student who tried to use the counseling center said, “I called to make an appointment, and they said they would call me back with an appointment but then never did. So if I can’t even make an appointment, there’s no point in trying to seek help from the counseling center.” A student who did use the service said, “I did not feel validated or listened to by my therapist.” Another student mentioned negative comments from peers, “I have had many friends say the counselors were rude and did not seem to care about how they felt.” Another student had also heard negative word of mouth, “Everyone says the service is horrible, and I don’t let others play games with my mental health.”

The second most cited barrier was a busy schedule, with 24 students saying their schedule keeps them from using the Counseling and Testing Center. One student said they “Never take the time even though I should.”

The third most cited barrier was anxiety, with 16 students saying their anxiety or nerves keeps them from seeking out help. Two of those students mentioned anxiety over calling people and one of those expressed a desire for an online scheduling option. Three students said they were worried they wouldn’t be understood. One student expressing anxiety said, “I know I need

help, but it is difficult for me to break my routine to start something new like counseling. I have wanted to get help for years.”

Table 1

Stated Barriers to Seeking Help From the Counseling & Testing Center

Stated Barrier	Times Cited
Previous experience or word of mouth	27
Busy schedule	24
Anxiety	16
Lack of information	14
Cost	13
Stigma	12
Location	12
Receive counseling elsewhere	9
Limitations of the center	6
Don't need counseling	5
Dislike telecounseling	2

Lack of information was the fourth most cited barrier to seeking help from the Counseling and Testing Center. Three students were uncertain whether information they discussed with a counselor would remain confidential. Three other students mentioned COVID-19 as a barrier, seemingly unaware that the center is offering all sessions via teleconference. One student wrote several questions, “I am a nontraditional, regional campus only student. Would this even apply to me? How much is it? Can we Zoom? Was (sic) virtual visits an option before COVID? How private are the matters that we discuss going to remain between you and I?”

Closely related to the lack of information cited by some students was the fifth most cited barrier — cost, which was mentioned by 13 students. However, according to the center’s website, a fee is not currently being collected for services. It is not clear from the website whether that is a permanent change or a temporary change due to the COVID-19 pandemic. Nonetheless, when a one-time fee was previously charged, there were also fee waivers available.

The stigma of counseling was cited as a barrier by 12 students, saying they were embarrassed, prideful or feared judgment. One student wrote that it is “not my personality to ask for help.” Another student said their “family would be against it.”

Twelve students mentioned the counseling center’s location as a barrier. They included students who are not on campus, taking classes online and/or live outside of Bowling Green.

Six students mentioned limitations specific to the Counseling and Testing Center as barriers to seeking help. One respondent mentioned not being able to receive a prescription for anxiety medicine through the center and another mentioned a “lack of in-depth individualized services.” Another student mentioned that there aren’t office hours during school breaks in the winter or summer. Two students mentioned wait times due to a large volume of students needing help.

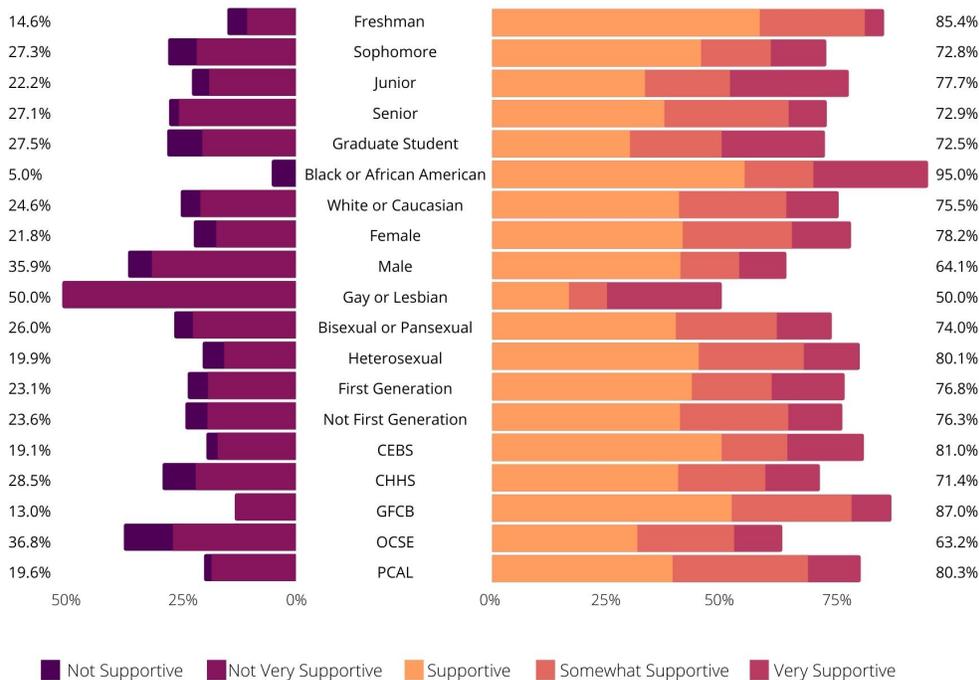
University Support

Among all respondents, 76.6% said that Western Kentucky University is “supportive,” “somewhat supportive.” or “very supportive” on mental health issues, as shown in Figure 9. Conversely, 23.4% said that WKU is “not very supportive” or “not supportive.” When the data is broken out into demographic groups, several outliers are revealed. Nine demographic groups expressed that WKU is supportive at some level at a rate higher than the mean response: freshmen, juniors, Black or African American students, female students, heterosexual students,

first generation students, students from the College of Education and Behavioral Sciences, students from the Gordon Ford College of Business, and students from Potter College of Arts and Letters. The greatest outlier was Black or African American students, 95% of whom expressed that WKU is “supportive,” “somewhat supportive,” or “very supportive” on mental health issues. The other ten demographic groups expressed that WKU is unsupportive at some level higher than the mean response: sophomores, seniors, graduate students, White or Caucasian students, male students, gay or lesbian students, bisexual or pansexual students, non-first generation students students from the College of Health and Human Services, and students from Ogden College of Science and Engineering. The greatest outlier was gay or lesbian students, 50% of whom said that WKU is “not very supportive” on mental health issues.

Figure 9

How Supportive is Western Kentucky University on Mental Health Issues?



Type of Analysis Employed

Qualtrics was used to analyze all data with a focus on determining the mean for each response both overall and when looking at demographic groups in crosstabs. Additionally, for the single qualitative question, one researcher coded the responses by hand.

Discussion

This study was conducted in fall 2020, in the middle of the COVID-19 pandemic. The mental health statuses of many students were probably different than they would have been otherwise, and the way campus was functioning during the time of this study was very different than that of semesters past. The students who participated in this study may have responded based on their experiences with the counseling services before or after the effects of the pandemic on campus life.

The research team also discussed the need for better-defining some of the terms used throughout the survey provided to students. For example, the term ‘mental health crisis’ may be perceived very differently from one student to another based on their background, experience, or other factors. A clearer definition may have provided more accurate data; however, an argument can also be made that a mental health crisis is how an individual defines it for oneself. This ambiguity may have been avoided by asking about specific scenarios, rather than just vague categories.

The questions about a student’s likelihood or unlikelihood to use the counseling center, when taken together, showed several trends with various demographic groups. Gay or lesbian students expressed that they are unlikely to use the center at an alarming rate. However, only 12 gay or lesbian students responded to the survey. Gay or lesbian students and bisexual or pansexual students indicated they had experienced a mental health crisis at about the same rate

— 75% for the former and 75.5% for the latter — but gay or lesbian students were much less likely to use the counseling center. Those groups of students are often placed together under the umbrella of LGBTQIA+, but it is clear there are differing needs and perceptions among various subgroups of that umbrella term. Furthermore, demographic crosstabs revealed that seniors are less likely to use the counseling center than their peers, and juniors are both more likely to use the center and more likely to have experienced a mental health crisis while in college. That seems unlikely to be the case in the long term, as juniors eventually become seniors. However, juniors may have a different perspective on what they consider a crisis compared to seniors who, with more experience, may take some incidents in stride in a way that younger students may not. On the other hand, Black or African American students are below the mean on experiencing a mental health crisis but are also more likely to use the counseling center than many of their peers.

Asking about barriers to seeking help from the counseling center revealed that a lack of information is a key hindrance. Several of the answer categories were on topics that simply indicated students do not fully understand how on-campus counseling works.

Conclusions

Some recommendations that can be made based on the results from this study include continuing research on perceptions of the counseling services held by gay and lesbian students, creating a more organized website and improved marketing strategies, scheduling counseling during non-traditional hours, providing more in-person counseling options that follow the COVID-19 guidelines, and considering diversity and inclusion as essential features to counseling services.

One major data point from this study was that 52% of the participants noted that they were not familiar at all or only slightly familiar with the on-campus counseling services. In order to decrease this number, increased marketing strategies could be implemented to inform students of the services provided. One successful marketing campaign from on-campus counseling services was conducted in a study by Drachenberg, Mattson, and Hines (2019). This study found that students who watched a video about the services offered from university counseling had more positive feelings towards seeking professional help and held less self-stigmatizing behaviors pro-counseling after viewing the video than they did before. The marketing should begin with reorganizing the center's website to make key information more clear. There is a wealth of information on the website, but the amount of information can be overwhelming. Many students indicated that they did not know the answers to questions that could be answered by looking at the website. Some of the barriers to seeking help that were cited by students should inform decisions for what information is front and center on the site. Having a well-organized website will be a valuable resource in conjunction with other marketing efforts so that students have a place to turn for additional information once they become aware of what the center provides. The website could also include a platform to schedule an appointment online, which would help students who have anxiety over contacting the center, as well as students with a busy schedule who find it difficult to find a time to call the center during office hours.

Additionally, because of the perceptions held by students in this study of the effectiveness of telecounseling, the counseling services may consider offering in-person services that adhere to the COVID-19 social distancing guidelines in order to accommodate student needs and provide the best services for their mental health. Perhaps the majority of sessions could still be held virtually with only a limited number of in-person appointments available. Alternatively,

it might be possible to schedule a student's first appointment in-person then transition to virtual visits for subsequent appointments once the student is more comfortable with their counselor. Perhaps there is a conference room or other mid-size room available that would allow for social distancing. On the other hand, the center should also continue to offer telecounseling as an option after the pandemic for students who are not taking classes in Bowling Green and are unable to visit the center in person.

The center should also consider offering some appointment times during non-traditional hours. Many students expressed that a busy schedule keeps them from seeking counseling, so offering some appointments during the evening might make counseling more accessible for those students. While counselors shouldn't be asked to work additional hours, perhaps some would be willing to start work later, working an afternoon and evening shift, even just on certain days of the week. However, it's likely that counselors' schedules are already full at most times, so it would be best if additional counselors could be hired to add to the number of available appointment times.

Limitations

Some of the limitations of this study included the size of the demographic subgroups, clarifying definitions of terminology throughout the survey, mining through the amount of data that this survey provided, and cultural biases.

This study focuses on a broad range of perceptions among different demographic groups across this campus. There was a large amount of data provided because of the number of demographic subgroups analyzed along with the general pool of participants. This made it difficult to analyze all of the possible data points and draw meaningful conclusions in some areas. In future studies, researchers could hone in on more specific demographic groups to study

patterns that began to emerge from this overarching survey by reaching out to those groups specifically, perhaps with a qualitative approach to better understand their thinking.

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