Counseling and Psychological Services (CAPS)

“Similarities and Differences among Students Utilizing Mental Health Services at CPP, other CSUs and Across the Nation”
Data Benchmarking Report

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Assessment Type: Operational Assessment

Date of Assessment Implementation: Fall Quarter 2008

Date of Report: August 2009

Purpose of Assessment
For the first time, data on students utilizing mental health services at colleges and universities were collected and analyzed on a national scale through the Center for the Study of Collegiate Mental Health (CSCMH). CSCMH is “an emerging multi-disciplinary research center focused on providing … information about the mental health of today’s college students in order to serve the needs of mental health providers, administrators, researchers, and the public” (from the CSCMH website at http://www.sa.psu.edu/caps/research_center.shtml). CSCMH represents a collaborative network of over 135 college and university counseling centers and Titanium Software, Inc. developer of the counseling center management software Titanium Schedule. CSCMH published its first results, based on a pilot project conducted during Fall 2008, in its CSCMH 2009 Pilot Study Executive Summary. Over half of the 23 campuses in the CSU system use Titanium Schedule software in their mental health counseling or psychological services centers. Cal Poly Pomona was one of only three Cal State campuses to participate in the CSCMH pilot study. The purpose of this analysis is to compare Cal Poly Pomona’s counseling center clients to those at two other CSU campuses and to the national population, and report relevant similarities and differences which inform decision-making and support continuous quality improvement.

Assessment Methodology
Demographic and psychological symptom data were collected for over 28,000 students utilizing mental health services during the Fall 2008 semester/quarter at 66 participating CSCMH centers (26 from the Southern United States, 15 from the Midwest, 13 from the Northeast, and 12 from the West). Three CSU campus centers participated: Sacramento State, San Jose State, and Cal Poly Pomona. Instruments used in the pilot study included the Standardized Data Set (SDS) and Counseling Center Assessment of Psychological Symptoms (CCAPS). The SDS captures mostly demographic as well as some clinical information. For example, some information included: age, ethnicity, sexual orientation, relationship status, housing situation, generational status, counseling experience, financial distress, and history of harm to self or others. The CCAPS is a 70-item assessment with nine subscales designed to measure mental health symptoms in the college population. Its subscales include Academic Distress, Social Anxiety, Depression, General Anxiety, Family Distress, Hostility, Eating Concerns, Substance Use, and Spirituality. The Spirituality subscale is not included in this report because it was later removed from the CCAPS due to problems with its validity. During Fall 2008, all new clients at Cal Poly Pomona’s CAPS (n = 345) were given the SDS and CCAPS. An individualized report was provided by CSCMH for each participating campus. In addition, a national summary was also provided for comparison.

Results and Data Analysis
Most institutions participating in the pilot study were similar in size and nature to Cal Poly Pomona, public four-year universities enrolling between 20,000 and 30,000 students. Cal Poly Pomona has a higher percentage of male students seeking counseling than other CSUs or campuses across the nation, which is not surprising given the higher percentage of males (56%) enrolled at Cal Poly Pomona (Sacramento State’s enrollment, for example, is 58% female). All three CSU campus centers see more first generation (API, Latino, and multiracial students), and fewer White students than do other centers nationally. Cal Poly Pomona CAPS also serves more Latino (26.6% vs. 14.4% and 18.2%) and multiracial (11% vs. 6.3% and 5.6%) students than the other CSU campuses, while San Jose State sees more API students (26% vs. 16.9% at CPP and 10.2% at Sac). Other findings were that Cal Poly Pomona’s counseling center serves more on-campus resident clients than the other CSUs (26% vs. 21% at San Jose and 10% at Sac), but all three CSU’s have more clients living off-campus
(63% vs. 60%) than the national population. Additionally, counseling center clients at Cal Poly Pomona and San Jose report experiencing more financial stress than the national population (often/always 45.5% vs. 39.5%). Among students coming to the counseling center at Cal Poly Pomona, significantly fewer have had prior counseling experience or used medication to treat a mental disorder than those using services at the other CSU campuses or nationally.

Both Cal Poly Pomona and Sac State counseling center clients had higher scores on the Academic Distress, Social Anxiety, and General Anxiety subscales and lower scores on the Eating Concerns and Substance Use subscales than the national population. Scores for the Depression, Family Distress, and Hostility subscales were nearly the same across all groups. San Jose did not distribute the CCAPS to its clients. Mitigating factors may have influenced the relatively low distress scores on the Eating Concerns and Substance Use subscales. Eating disorders, although beginning to affect men and ethnic minority populations, continue to be primarily found among White females and substance use is likely less of a problem due to Cal Poly Pomona being a “dry campus” and having relatively fewer residential students.

**Conclusion**

Cal Poly Pomona has a higher percentage of male students seeking counseling than other CSUs or campuses across the nation, and CAPS serves more API, Latino, and multiracial students, and fewer White students than do other centers nationally. Cal Poly Pomona students visiting the counseling center are more likely to be first generation college students experiencing a significant degree of financial distress. Cal Poly Pomona’s counseling center also serves more on-campus resident clients than two other CSUs, but less than the national population. Subscale scores for symptoms of Depression, Family Distress, and Hostility among CAPS clients at Cal Poly Pomona are similar to other CSUs and university counseling centers across the country. On the other hand, CCAPS subscale scores for symptoms of Academic Distress, Social Anxiety, and General Anxiety are notably higher and subscale scores for symptoms of Eating Concerns and Substance Use are somewhat lower.

**Implications for Practice**

The highest average score of distress for Cal Poly Pomona students was on the Academic Distress subscale whereas, for the national population this subscale ranked sixth out of eight subscales. This may be attributed to the lack of academic support Cal Poly Pomona students receive given their parents are likely to have never attended college. Another possible contributing factor is that many Cal Poly Pomona students have to work while attending school at the same time pursuing academically rigorous degrees in science and engineering. Men are less likely, in general, to seek counseling than women and are more likely to underreport psychological symptoms. Individuals from ethnic minority backgrounds are also less likely to seek counseling than White students. Due to their demographic make-up, relative unfamiliarity with higher education and greater chance of facing financial stressors, Cal Poly Pomona students are likely to experience more academic distress and overall anxiety.

It is vital that CAPS reach out to Cal Poly Pomona’s unique populations (males, first generation, ethnic minority and multiracial students) by addressing their reported needs (academic distress and social and general anxiety). It is likewise important for those outside of CAPS to sensitize themselves to the particular needs of these students who may not receive the academic guidance and financial support afforded to students from more privileged backgrounds. CAPS must address the unique needs of male and ethnic minority students as well as expect that when these individuals come to therapy it will be the first time they are seeking treatment. Having never before sought out or received treatment, Cal Poly Pomona students may also be less open to asking for help with mental health concerns and less likely to utilize services. Additionally, Cal Poly Pomona students may have failed to receive proper treatment for mental health concerns prior to attending college. Thus, clients coming to CAPS are likely seeking treatment for the first time. Therefore, their symptoms may be more severe and may require timely intervention and critical support.