



# Counseling and Psychological Services

## November 2007

### INTRODUCTION

The focus of this survey is to assess the University Park student body's impression of Counseling and Psychological Services (CAPS) and to obtain a measure of students' mental health. Included in the survey are questions concerning students' awareness of services provided by CAPS, their sources of support for mental health concerns, their understanding and views of CAPS services, and their own mental health.

In total, 1,323 students responded to the survey for a 30.8% response rate. By phone, 604 participated; 719 participated by Web. The confidence interval for the total sample is +/-2.65%.

Of the respondents, 54.5% are between 18 and 20 years of age, 52.3% are female, 80.6% are White/Caucasian, 37.2% live on campus, and 82.8% are undergraduate students. For additional information on the Pulse methodology, please visit: <http://www.sa.psu.edu/sara/qa.shtml>.

### FINDINGS

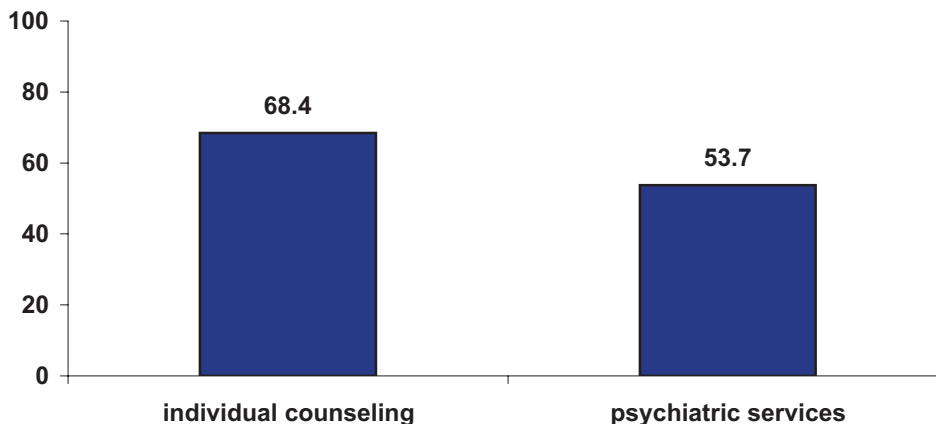
#### Awareness of CAPS

Students were asked if they were aware of the services provided at CAPS.

- Among all students, 68.4% indicated they were aware that CAPS provides individual counseling and 53.7%, psychiatric services (see Chart 1).
- In addition, 44.9% were aware CAPS provides workshops and outreach, and 42.2% were aware CAPS provides group counseling (data not shown).
- Moreover, of students who were aware of CAPS services, 96.7% rated CAPS as "somewhat" or "very positively" (data not shown).

**Students' impression of CAPS and their overall mental health**

Chart 1. Knowledge of CAPS Services (by percent)



For more information please visit Student Affairs Research and Assessment at <http://www.sa.psu.edu/sara>



Penn State Pulse is a project of Student Affairs Research and Assessment.  
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## **CAPS Fees and Wait Times**

Students were asked how much they thought students should pay for CAPS services as well as how quickly students should be able to get an appointment at CAPS.

- Sixty percent of students felt that students should pay for a counseling appointment or a group therapy session (see Table 1). On average, students supported a charge of approximately \$13 (data not shown).
- At least 75% supported a charge for an appointment with a psychiatric provider (an average of \$25) and for not showing up to an appointment (an average of \$13) (data not shown).
- Overall, students were more supportive of charges for services in 2007 than they were in 2004 (data not shown).
- In 2007, 57.0% responded that they would support a mental health fee of \$10 per semester rather than asking each student to pay a fee for an appointment; in 2004, 53.8% responded similarly (data not shown).
- Approximately 92% indicated that a student who is not in a state of crisis should be able to get an appointment at CAPS within at least a week (data not shown).

**Table 1: Amount Students Felt Individuals Should Pay for CAPS Services<sup>1</sup>**

<b>By percent</b>	<b>zero</b>	<b>\$1-\$10</b>	<b>\$11-\$20</b>	<b>\$21 or more</b>
Individual counseling appointment	40.3	19.4	21.7	18.6
Group therapy session	40.1	27.2	17.4	15.3
Appointment with a psychiatric provider	25.1	12.9	23.7	38.2
No-show fee	22.1	41.1	20.8	16.0

## **Perceptions of Counseling**

When asked about perceptions of counseling services, students reported the following:

- 51.4% agreed that counseling services are primarily for students who need to talk with someone about normal life events; and
- 61.9% agreed that counseling services are primarily for students with serious and chronic mental health problems (see Table 2).

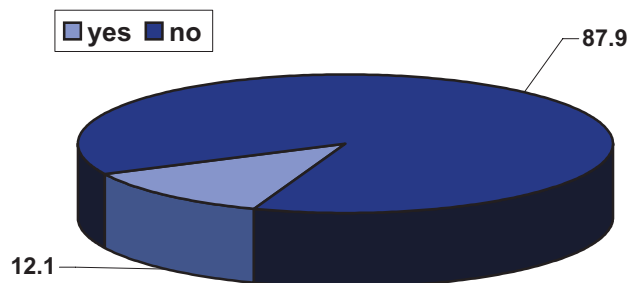
**Table 2: Perceptions of Counseling**

<b>Students who agree:</b>	<b>Percent</b>
Counseling services are primarily for students who need to talk with someone about normal life events.	51.4
Counseling services are primarily for students with serious and chronic mental health problems.	61.9

In addition, students were asked if their close friends and their family would view them negatively if they were to use CAPS or other counseling services.

- Twelve percent thought their friends would view them negatively if they were to receive counseling services (see Chart 2).
- Seven percent believed their family would view them negatively if they were to receive counseling services (data not shown).

**Chart 2. Percent who Think Close Friends Would View Them Negatively if They Used CAPS or other Counseling Services**



<sup>1</sup> In addition to these percentages, over 200 students responded they did not know how much students should pay.

## Sources of Support or Assistance

Students were asked, if they were struggling with a mental health issue that upset them to the point that it interfered with their daily functioning, if they were likely to seek support or assistance from several sources (see Table 3).

- Close to 60% indicated they were “somewhat” or “very likely” to turn to their health care provider (59.0%) or to CAPS (58.3%) for support.
- Only 29.8% indicated they were “somewhat” or “very likely” to seek assistance from a pastor or clergy member.

**Table 3: Likelihood of Seeking Support or Assistance if Struggling with a Mental Health Issue that Interfered with Daily Functioning**

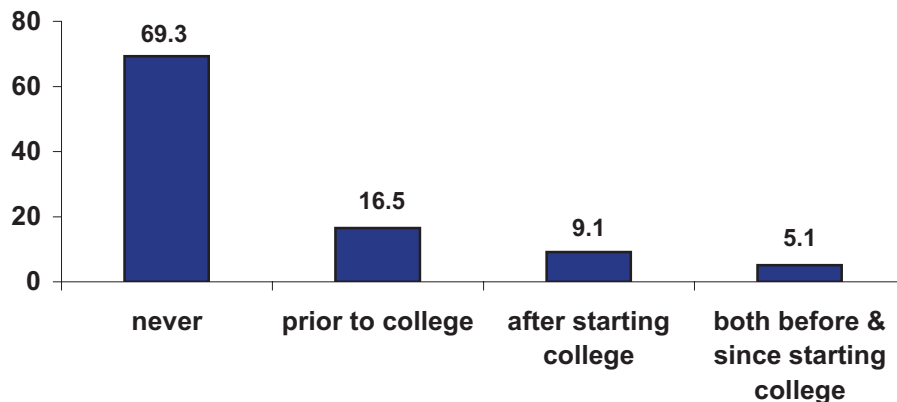
Sources of Support	Percent likely
Their health care provider	59.0
CAPS	58.3
Off-campus counselor or therapist	40.3
Off-campus psychiatric provider	33.0
Pastor or clergy member	29.8

## Previous Experiences Related to Mental Health Concerns

When students were asked about experiences related to mental health concerns, they reported the following:

- 30.7% had received counseling prior to college, after starting college, or both (see Chart 3);
- 11.8% reported having had unwanted sexual contact(s) or experience(s) prior to college, after starting college, or both (see Table 4);
- 10.1% indicated they had been prescribed medication for mental health concerns prior to college, after starting college, or both (see Table 4); and
- 7.1% reported having seriously considered attempting suicide prior to college, after starting college, or both (see Table 4).
- In addition, 41.3% reported having experienced, witnessed, or learned of a traumatic event that involved actual or threatened death or serious injury, or a threat to the physical integrity of themselves or others. Of those 41.3%, 46.7% indicated the traumatic event caused them to feel intense fear, helplessness, or horror (data not shown).

**Chart 3: Percent who Have Received Counseling**



**Table 4: Previous Experiences Related to Mental Health Concerns**

By percent	Never	Prior to college	After starting college	Both before & after starting college
Had unwanted sexual contact(s) or experience(s)	88.2	4.7	5.0	2.1
Been prescribed medication for mental health concerns	89.9	3.9	4.3	1.9
Seriously considered attempting suicide	92.9	4.1	1.6	1.4
Received treatment for alcohol or drug use	96.1	0.8	2.7	0.4
Been hospitalized for mental health concerns	97.9	1.1	1.0	0.0

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## **Mental Health Issues**

Lastly, students were asked about their experiences with mental health issues that interfered with their ability to function within the last 12 months.

- Approximately 46% indicated anxiety and/or stress interfered with their ability to function (see Table 5).
- Nineteen percent reported that depression had interfered with their ability to function within the last 12 months (see Table 5).
- Among the 13.8% who reported other mental health concerns interfered with their ability to function, these concerns included relationship issues, body image and eating disorders, poor self-esteem, and combinations of mental health issues (data not shown).

**Table 5: Students who Experienced Mental Health Concerns that Interfered with their Ability to Function within the Last 12 Months**

Type of Concern	Percent
Anxiety and/or stress	45.9
Depression	18.7
Other mental health concerns	13.8
Alcohol or other drug use	9.4

- Of the 50% who reported having at least one mental health concern that interfered with their ability to function within the last 12 months, 12.3% indicated they were receiving professional treatment for the issues they were experiencing (data not shown).