

Truman State University
COUNSELING SERVICES

Annual Report

July 2006 – May 2007

Prepared by

Brian Krylowicz, Ph.D.

Licensed Psychologist & Director





100 E. Normal
 Kirksville, MO 63501
 660/785-4014; 660/785-7444 (fax)
<http://ucs.truman.edu>

Truman State University COUNSELING SERVICES Annual Report 2006-07

Goals for 2006/07

Planning for student affairs is tied to “The Out-of-Class Planning Map”. The Planning Map is designed to help students make informed and intentional decisions about their out-of-class activities while at Truman State University. The Planning Map consists of four quadrants that represent areas students can use to set goals regarding their out-of-class activities thereby maximizing the benefits of their Truman educational experience. The quadrants are based on values and principles espoused in the Truman State University Mission Statement, skills and knowledge of value to future employers and graduate schools, and needs and attributes of college-aged students identified by various theories of development. (For more info on “The Out-of-Class Planning Map” go to http://saffairs.truman.edu/planning_map/purpose.htm).

The goals set for UCS for 2006/07 are in bold with a brief summary of the results following the goal:

- **First Year students will increase their knowledge on issues of diversity and adjustment issues. (Quadrant 1)** The production of “Choices” and a follow up conversation after the performance was done for all first year students and results from a survey showed we were successful in increasing their knowledge of diversity and adjustment issues.
- **Increase intellectual knowledge of the impact of alcohol on an individual and influence behavioral change involving alcohol usage. (Quadrant 2)** Evaluations of the alcohol education group seemed to support that we were successful in having participants reflect on the impact of alcohol and alter future behavior.
- **Students will show significant decrease in negative symptoms by attending counseling sessions. (Quadrant 3)** Various data showed that for the students that came for counseling, a very large percentage of them improved their functioning and had less negative symptoms impacting their life.
- **Have a suicide risk reduction plan for the Truman campus. (Quadrant 3)** While small improvements in this area was done, no official plan and/or policy was created for the campus in 2006/07.
- **Update and revise UCS Policy & Procedure manual. (Non-Quadrant Goal)** No update of the policy and procedure manual was done in 2006/07.
- **Increase usefulness and utilization of website by students. (Non-Quadrant Goal)** A major redesign of the UCS website was done and most numbers reflect an increase of utilization.

- **Incorporate the Out of Classroom Planning Map concepts within the context of UCS operations. (Non-Quadrant Goal)** More discussion of the map was done and we incorporated it into the website.
- **Integrate Titanium scheduling and data management software into UCS. (Non-Quadrant Goal)** UCS completely operates all counselors schedule and all data on Titanium.

2006/07 ACTIVITY DETAIL

Direct Counseling Service

UCS provided face-to-face counseling services to 433 students this year, which represents 7.5% of the student body. This number only includes students who officially completed an intake and does not include any direct services provided like crisis intervention, outreach services or consultation for students who did not complete an intake.

Totals - individuals served and contact hours

YEAR	Individuals	Contact hours
2006/07*	433	3158.5
2005/06	416	2671
2004/05	370	2215
2003/04	335	2130.5
Ave. (1992-2007)	330.9	2392.9
% change (1 yr)	+4%	+18%
% change (Ave)	+31%	+32%

*To assist in completing the annual report, UCS transitioned into a June 1st-May 31st reporting year in 2006-2007. Therefore the 2006-2007 is actually only an 11 month year going from July 1st-May 31st.

In keeping with national trends on college/university campuses, the table above shows how counseling service usage continues to rise at Truman, with this year showing a slight increase in the number of individuals we served in counseling (4% increase) and a major increase in the contact hours we provided (18% increase). **We were able to manage this increased service demand thanks to the Student Health Fee and the financial resources it provided to increase our professional staff.** This increase in professional staff was however offset by the loss of intern and practicum students with the end of the Counselor Preparation Program at Truman.

Individual/Couples Counseling. Face-to-face counseling continues to be the core of our daily professional activity. As the table below summarizes, **both the number of students receiving counseling and the number of sessions attended increased this year setting new UCS utilization records for a second year in a row.** Average session attendance also increased.



100 E. Normal
 Kirksville, MO 63501
 660/785-4014; 660/785-7444 (fax)
<http://ucs.truman.edu>

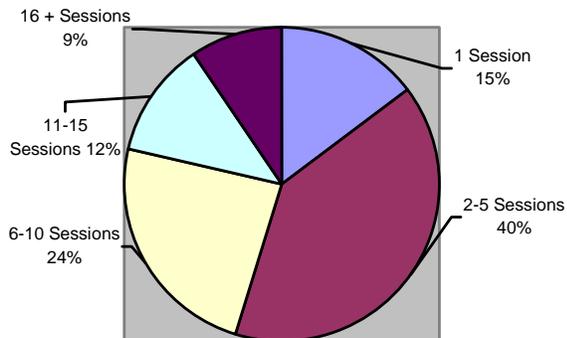
Truman State University COUNSELING SERVICES Annual Report 2006-07

Counseling clients & number of sessions

YEAR	Individuals	Sessions	Session avg.
2006/07	433	2672	6.17
2005/06	416	2386	5.74
2004/05	370	2018	5.45
2003/04	335	1776	5.30
1 yr chng.	+4%	+12%	+7%

Demographic & Usage data. The graph below summarizes the range of counseling sessions individuals attended. In keeping with our time-limited model of service delivery, the average number of counseling visits (including intake) per student was 6.17, and **approximately 81% of clients were seen for 10 or fewer sessions.** The range was from 1-60 sessions. It should be noted that some clients were attending summer classes and/or in severe psychological crisis and these factors inflated this number. The highest number of sessions for a client not attending summer school or in severe psychological crisis was 30.

Session Utilization



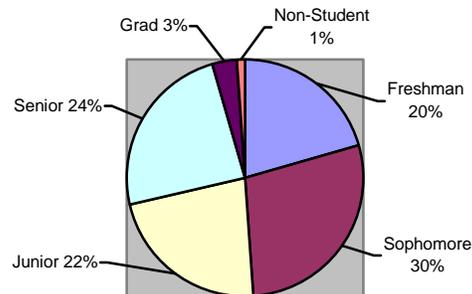
Gender. As is true in most counseling/mental health settings, **more women (73%) than men (27%) utilized counseling.** This 46% imbalance is quite large but not as extreme when you take out the 18% imbalance that is attributed to the demographics of the entire student body at Truman. In 2006-2007, the gender distributions was 59% women and 41% men at Truman.

Minority/International. This year marked a slight increase in the proportion of students seeking counseling from diverse backgrounds, with **those identifying as minority or international students increasing from 12% in 2005-2006 to 13% in 2006-2007.** This percentage is exactly the same as the minority/international enrollment at Truman, which was approximately 13% of the student body in 2006 according to the fall enrollment report.

Year in school. As the graph below illustrates, we had a higher percentage of sophomore students utilizing counseling services this year than any other class designation, which is an unusual finding because UCS historically has had the freshman class

with the highest utilization rates. **The freshman class was substantially underrepresented compared to their presence in the student body as a whole (which was 28%) while the sophomore class was substantially overrepresented compared to their presence in the student body as a whole (which was 21%).** Juniors, seniors, and graduate students were all appropriately represented compared to their numbers on campus. It should be noted that UCS asks students to self-report their class status and many first year students at Truman come with college credit and they may be self-classifying themselves as sophomores when they may actually be counted as freshman by the university. UCS also made a word change in this year's intake paperwork replacing first year student with the term freshman. This is another rationale why students might have made the switch to considering themselves sophomores even when they were in their first year at Truman.

Counseling Clients by School Status



Age. The age of counseling clients ranged from 18-39, with almost all clients (97%) falling into the 18-23 year-old age range.

Academic standing. Our counseling clients reported being very strong in terms of their academics, with **66% reporting cumulative GPAs above 3.0.**

Most of clients were full-time students (93%). This number may be an underestimation because we ask for the number of credits a student is enrolled in and did not account fully for students who sought services during the summer who may have been enrolled in a typical number of summer credits that would be much lower than a student in the fall or spring semester.

Majors. **Students from 28 of Truman's 31 majors utilized counseling.** The majors with the highest utilization rates are listed below (as % of total counseling clients in bold followed by the comparison % of the overall student population in each major as of Fall 2006). Each of the majors listed below had 20 or more students attend counseling during the year.

- 1) English (**10.3%**; 7.9%)
- 2) Communications (**8.4%**; 6.6%)



100 E. Normal
 Kirksville, MO 63501
 660/785-4014; 660/785-7444 (fax)
<http://ucs.truman.edu>

Truman State University COUNSELING SERVICES Annual Report 2006-07

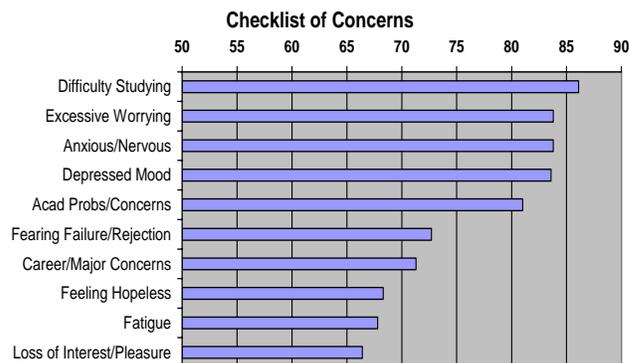
- 3) Psychology (8.3%; 6.9%)
- 4) Biology (8.1%; 9.1%)
- 5) Music (5.0%; 2.7%)
- 6) Undeclared (5.0%; 8.5%)
- 7) Business (4.6%; 10.4%)

The two areas where UCS utilization has the largest discrepancy is with the business and undeclared students. Business is the largest major at Truman but is the 7th most frequent major using UCS. There seems to be no good reason for the large discrepancy but will be monitored next year to look for trends. As for undeclared students, UCS asks clients to self-identify their major. It is likely that students that are officially undeclared with Truman may put down a major that they are leaning towards on our paperwork, hence the lower utilization numbers.

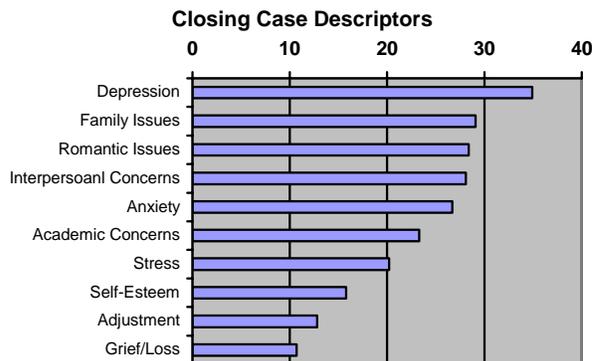
Client problems. National trends suggest that more students are coming to college with a history of counseling/mental health treatment, and that the types of issues they bring with them are becoming more serious in nature. Local data that speak to these trends include:

- More than half (52%) of our clients reported receiving counseling in the past (53% last year).
- In regards to severity of issues, 18.5% (22% in 2005/06) reported current thoughts/intentions of suicide, 15.7% (15% in 2005/06) reported issues of self-injury/cutting and 12% (14% in 2005/06) reported current thoughts/intentions of violence.
- Slightly over 15% of time when the Outcomes Questionnaire – 30.1 (OQ), an assessment given every session that is designed to detect treatment effectiveness, is administered the client/student responds that they have had thoughts of ending their life over the last week.
- Clients that are deemed to be of high risk are “tracked”, a method to make sure that all UCS professional staff are aware of client concerns in case of emergency. In 2006/07, over 12% of UCS clients were tracked.

The graph below displays the top ten categories of concerns students self-reported in their intake. These are not mutually exclusive categories (i.e., students can be represented in more than one category). **Of particular note is that the top 5 were common psychological issues (anxiety and depression) and typical issues related to stressors of the academic life (problems studying, worrying and academics problems).**



The graph below displays the top ten categories of issues that the clinicians at UCS determined were addressed in counseling after counseling was complete. The list contains both developmental issues and common mental-health problems. These are not mutually exclusive categories (i.e., students can be represented in more than one category). **Of particular note is that the top 5 were common psychological issues (anxiety and depression) and issues involving relationships (family, friends and romantic issues).**



Overall, the graphs and data show that UCS addresses a range of issues that are similar in some ways to other mental health settings, yet also distinct in ways that match the developmental characteristics of traditional-age college students and their common academic endeavors.

Crisis Service. We strive to be available for students and those that support students in times of personal crisis. **UCS again provided 24/7 coverage during the fall and spring semesters and had 31 after hours recorded contacts with a total of 75 recorded crisis contacts in 2006/07.** This number is probably an understatement of the crisis services we offer because many of the times we interacted with current clients, the crisis contacts might not be recorded as a crisis using the coding system and were recorded as a regular appointment.



100 E. Normal
 Kirksville, MO 63501
 660/785-4014; 660/785-7444 (fax)
<http://ucs.truman.edu>

Truman State University COUNSELING SERVICES Annual Report 2006-07

Groups. In 2006/07, UCS had its most successful group program in many years with a total of 5 general psychotherapy groups (2 in the fall semester and 3 in the spring semester) actively serving a total of 25 students. Groups focused on body image issues and grief and loss issues had some interest and almost got started. A support group for cancer was also run throughout the year on a monthly basis with sporadic attendance.

As noted in previous years, college-student participation in standard counseling groups has declined in recent decades. Reasons are not fully understood, but have been hypothesized to include busier co-curricular schedules and a trend toward client and counselor preference for individualized services. But in the last year the staff focused a great deal on getting groups organized and getting those who would benefit from group therapy into the groups. The high demand in services also seemed to inspire the office to make psychotherapy groups a priority.

In 2007/08, there are preliminary plans to continue the general psychotherapy groups and offer a new group focused on body issues. It is hoped that the cancer support group will go onto Facebook.com and be more of a free-flowing group that will be there for the students to help each other than the traditional support group format.

Assessment/Quality Improvement. There are a number of ways in which we evaluate both the quality and effectiveness of counseling services.

Client satisfaction. At the end of counseling, we ask the student/client to complete an anonymous satisfaction survey. This year we received 165 completed surveys. Results indicated that clients were overwhelmingly satisfied with the counseling they received.

The table below summarizes several UCS and counselor characteristics that were rated by student clients. It is clear that clients experienced their counselors and their counseling experience in a very positive light. **The best evidence of this was the percentage of student clients that reported that they either strongly agreed or agreed that “their coping in daily life improved as a result of counseling” (91%), “they were satisfied by the service they received from UCS” (98%), “they would call on UCS if they needed help in the future” (98%) and “they would recommend UCS to others” (98%).**

Counselor ratings

Item	Rating (1-5)
UCS staff treated me with courtesy	4.96
My counselor understood my concerns	4.69
Felt safe & comfortable in counseling	4.74
Able to be open & honest in counseling	4.72
Helped me better understand myself	4.59
Helped me better understand others	4.29
Helped me gain self-esteem	4.32
Helped me improve my comm. skills	4.10
Helped me find solutions to problems	4.52
Daily life improved	4.50
Satisfied with services I received	4.73
Will call upon UCS in future if needed	4.80
Would recommend UCS to others	4.81
Personal functioning improved	4.39
Academic functioning improved	3.90

Narrative comments were also quite positive overall. In our satisfaction surveys we ask for feedback on the positive aspects of the counseling experience and ways we can improve our services. A few representative examples are listed below for the positive aspects of the counseling experience:

- “Helped me clearly identify the issues I was experiencing and provided me with efficient methods of solving those issues. I liked the fact that I wasn’t expected to buy into every little word the counselor stated and was encouraged to try to think of my own methods that would be efficient. It has been an awesome experience.”
- “At difficult times in life I would reflect back on something me and my counselor would talk about and it would help me get through things. I would apply our revelations to real life situations and could see things from a different light.”
- “Great experience. Thank you so much. I wish I would have taken advantage of this service in my previous years at Truman.”
- “The group aspect both allowed me to see that others share my problems and can relate and taught me to confide in others. It was nice to have one day a week when it was okay to have problems and not feel the need to hide them.”
- “It was good to be able to be open and honest and communicate with someone on a real level. It definitely helped me discover things (good and bad) about myself that will do nothing but benefit me in the future. The whole experience was comfortable and I’m glad I did it.”
- “I always felt very welcomed and comfortable when coming to my sessions. I was able to open up much more than I could to anyone else and I was so pleased that what I said was heard and that I received tons of feedback and help.”



100 E. Normal
 Kirksville, MO 63501
 660/785-4014; 660/785-7444 (fax)
<http://ucs.truman.edu>

Truman State University COUNSELING SERVICES

Annual Report 2006-07

- “My counselor helped put my life into the perspective I needed to take charge and change it. I really feel better with counseling and feel empowered to change my life. It was great!”
- “My counselor was an angel in disguise. They helped me deal with my problems and gave me hope for the future. I think my counselor was professional and courteous, seemed to really care about my progress and treated me like a human being. Thank God I came here when I did, my counselor was a breath of fresh air in my life.”

In regards to feedback we received for ways to improve the services at UCS, we received a much smaller percentage of feedback in this area and most of the comments were actually compliments. The following are a few representative examples of what we received:

- “When scheduling my appointments sometimes it was hard to find day time hours – perhaps having one night a week with extended hours.”
- “Maybe advertise in different ways – I just suggest that because I think your services could help so many people.”
- “This entire experience was much different (in a good way) than I had anticipated it being and I can’t think of anything that would make it better.”
- “It seems like everything is well organized and that privacy is well-respected, so as long as that stays the same, I don’t think there is much to improve on”
- “The only thing that would make UCS better would be having a shorter waiting list for counseling, though I understand this would be difficult to remedy”
- “It’s the toughest door to walk through. I don’t know how to break down those barriers but many students are flat out afraid to come here for some reason. I had an awesome counselor and an awesome life-altering experience”

Each individual counselor received a summary of numeric and narrative feedback obtained from the clients they served, to provide affirmation and to aid in self-improvement.

One of the goals for UCS this year is to make the feedback process more complete. At the present time, almost all the feedback we receive is obtained at the end of counseling. What we don’t get is feedback from people who dropped out of counseling. **UCS plans on going to an on-line feedback form that will be sent by e-mail to every client once they have stopped counseling.** We are very confident that we offer a very needed and quality service to the campus but would like to hear more from clients that did not fully complete counseling.

Client Improvement. The single most important area of assessment looks at whether counseling leads to improvement in the issues and concerns for which clients seek help.

The main way we systematically assess treatment outcomes besides client communication is through a standardized symptom questionnaire (the Outcome Questionnaire 30.1) to all clients in almost every session. The instrument is designed to be sensitive to changes in levels of emotional distress (including physical/ emotional symptoms, relationship stress, and work/school stress) over the course of counseling, with scores compared to both distressed and non-distressed reference groups. This allows us to systematically track how clients are feeling over time, to use this information in treatment planning, and to evaluate our effectiveness on both an individual and center-wide basis. The table below shows indices of the severity of distress and improvement over time on this assessment device.

Change in distress levels on the OQ-30.1

YEAR	% with clinical distress	Average Improvement	% of clients improving
2006/07	58%	22%	78%

Approximately **58% of clients scored in the clinical range of distress at the beginning of counseling**—that is, they were experiencing levels of distress above what would be considered normal and tolerable by most people. The average amount of improvement on the OQ-30.1 was 22% for every client who came to UCS and completed at least two sessions and 78% of clients demonstrated improvement on the OQ-30.1 based on their score in the first session compared to their last session. In all cases, subsequent assessment information is used by counselors and clients to review their progress and make adjustments as needed.



100 E. Normal
 Kirksville, MO 63501
 660/785-4014; 660/785-7444 (fax)
 http://ucs.truman.edu

Truman State University COUNSELING SERVICES Annual Report 2006-07

Change in OQ-30.1 scores based on session

Session	OQ Score	Session	OQ Score
FIRST	46.1	14	42.7
2	42.1	15	44.4
3	40.7	16	43.2
4	40.1	17	48.3
5	39.2	18	47.2
6	39.9	19	44.8
7	40.6	20	41.9
8	40.4	21	47.5
9	40.8	22	44.9
10	43.5	23	46.2
11	42.3	24	47.3
12	42.6	25	40.2
13	44.8	LAST	35.9

Given our time-limited treatment focus, we suspect that the clients seeking services at UCS are often in just the beginning stages of change. This is demonstrated by the fact that the average OQ-30.1 score for every client in 2006/07 for the first session (not the intake) was 46.1 and the OQ-30.1 score drops to a low of 39.2 in the 5th session and goes up from there indicating that many of the clients that UCS sees improves quickly and only need to be seen for a few sessions. The OQ-30.1 score goes up after that indicating that clients who remain in counseling for 10 sessions or more tend to have more significant problems that are more ingrained. **It should be noted that when the OQ-30.1 was administered for the last session, no matter what actual session it actually occurred in, the score was 35.9 demonstrating a very large change from the first session (22%).** It is nice that our flexible policy that doesn't arbitrarily limit the number of sessions a student can attend helps us meet the diverse range of needs that come our way, without detracting from our primarily short-term focus.

National College Health Assessment (NCHA). For the last three years, the Student Health Center has surveyed the Truman student body about a wide range of health concerns with the NCHA. Many of the questions in the survey focus on mental health concerns. The following are the results of the last three years (as % of total Truman students in bold followed by the comparison % of the students at all other institutions):

Within the last school year, Truman students reported experiencing:

Issue	2007*	2006	2005
Anorexia	3.0	1.8 (1.9)	2.2 (2.0)
Anxiety Disorder	14.2	13.8 (12.4)	11.8 (13.4)
Bulimia	2.6	2.9 (2.3)	2.7 (2.6)
Depression	17.7	19.7 (17.8)	18.2 (19.6)
Seasonal Affect. Dis.	14.6	12.5 (8.1)	11.1 (8.9)
Sub.Abuse Prob.	3.3	2.4 (3.4)	4.1 (4.1)

*The national comparison data for 2007 was not yet available.

The key area where Truman students seem to experience significantly more problems is with Seasonal Affective Disorder but this can probably be explained by the fact that many of the schools that complete the NCHA are based in areas of the country where they have more light and the weather is nicer during the winter.

Within the last school year, Truman students reported the following factors affecting their individual academic performance:

Factor	2007*	2006	2005
Alcohol use	7.5	5.8 (7.3)	6.8 (7.6)
Assault (physical)	0.3	0.2 (0.6)	0.1 (0.5)
Assault (sexual)	1.2	1.5 (0.8)	0.7 (0.8)
Computer Use	19.6	15.1 (15.4)	16.7 (14.2)
Concern for others	21.5	20.4 (18.0)	21.9 (18.1)
Death of other	6.4	8.0 (8.5)	9.9 (8.4)
Depression/Anxiety	19.5	18.8 (15.7)	18.0 (16.3)
Drug use	1.5	1.3 (2.3)	2.3 (2.8)
Eating Disorder/Prob	1.2	2.4 (1.3)	0.6 (1.4)
Relationship difficulty	16.6	14.6 (15.6)	17.5 (15.8)
Sleep difficulty	31.7	27.1 (23.9)	30.8 (24.8)
Stress	41.4	39.6 (32.0)	43.4 (31.6)

*The national comparison data for 2007 was not yet available.

In regards to the impact on academic performance, Truman students appear to consistently and significantly deviate from the general college student population in a few areas. One area appears to be that they are more affected by their concern for a troubled family member and/or friend. As most of our students are not local residents, it can be assumed that being removed from home when things are taking place makes this more impactful to Truman students and that they are more leaned upon by fellow students who are far away from the family support system. Another area is depression and anxiety levels. We do not have good theories on why it is different here at Truman other than we are a highly competitive school that demands a great deal from our students. This pressure can also be seen in the very high level of stress and lack of sleep that our students are obtaining as seen in the NCHA data.

Within the last school year, Truman students reported experiencing the following:

Feeling	2007*	2006	2005
Overwhelmed	96.2	97.6 (93.5)	96.7 (93.8)
Exhausted	93.9	95.3 (91.5)	94.1 (92.2)
Very sad	83.6	83.0 (79.4)	83.4 (80.7)
Hopeless	66.7	67.3 (62.2)	66.6 (63.8)
Difficult to function	44.3	44.9 (43.8)	40.7 (45.7)
Considered suicide	9.9	9.3 (9.3)	10.3 (10.2)
Attempted suicide	1.1	1.5 (1.3)	1.3 (1.5)

*The national comparison data for 2007 was not yet available.



100 E. Normal
 Kirksville, MO 63501
 660/785-4014; 660/785-7444 (fax)
<http://ucs.truman.edu>

Truman State University COUNSELING SERVICES Annual Report 2006-07

The NCHA data seems to demonstrate that for the most part Truman students feel more overwhelmed, exhausted, sadder and hopeless than the general college student. While Truman students were not all that different from their peers in terms of feeling so depressed it was difficult to function, seriously considered suicide and attempted suicide, the high rates for each of these areas are alarming and need to stay a focus of Truman and UCS.

Retention-related. Published research over the last decade shows that students who receive counseling are more likely to persist in college compared to the general student body, and the discrepancy is even larger when compared to those who have personal/emotional concerns but do not receive counseling (an estimated 10%-15% retention advantage in relevant research studies). Fortunately, UCS once again was able to respond in a timely manner to students requesting services. **The average amount of time someone had to wait for an intake was 0.29 days meaning that most people were able to be seen the same day they requested services.** It should be noted that UCS did have a waitlist for counseling services from October until April but most people were on the waitlist less than a week. With the ability to see people for the intake quickly we made sure that people who were at high risk were able to be seen immediately.

While we haven't tracked true retention of students receiving counseling at Truman, we do inquire into the self-reported academic impact of students' personal problems, and whether counseling contributes to improvement in this arena. For instance, before their first appointment, 34% of students seeking counseling this year reported that they had significant concerns in regards to their academics and 26% had moderate concerns in regards to their academics. Following counseling, **64% of clients responding to our satisfaction survey either agreed or strongly agreed that their academic functioning improved as a result of counseling.**

Graduating Student Questionnaire (GSQ). Results from the 2005-2006 GSQ of graduating seniors showed that the general student body continues to be satisfied with counseling services at Truman.

Year	Mean Rating	Students Responding	Missing Responses
2005/06	3.10	654	479
2004/05	3.05	585	619
2003/04	2.97	512	478

The results of the survey show that the **average satisfaction score increased from 3.05 to 3.10 on a 4 pt. scale.** In regards to the 26 services and facilities that

were surveyed, UCS is rated the 8th highest for the campus. The results also demonstrate that in the last three years more students felt qualified to give feedback about our office meaning that they have had some interaction with and/or knowledge of our services. This seems to indicate that we have done things to be more than just a fringe service to a small group of students and are more integrated into the mission of Truman and are seen as an important services by more students.

Quality Improvement Initiatives. As noted above, counselors receive feedback on all information collected from their individual clients. With the assistance of technology additions over the last year, we have been able to increase both the efficiency with which we collect client information and our access to useful summaries of the information. The primary technology-related improvement implemented this year was the conversion to Titanium, a comprehensive database system to manage scheduling, client records, and data tracking. The transition to a new system went very smoothly and was fully integrated into our daily lives by the first week of classes. While not yet a completely paperless office, we increasingly are moving more of our service-related record-keeping to electronic storage, which is increasing efficiency of day-to-day operations and giving us more timely and organized access to information necessary to complete our work at a high level.

Outreach and Consultation Services

Another critical part of our mission is to provide prevention programming and consultation to the campus community. It is critical to the mission of UCS that we are seen as more than just a direct counseling service and can be seen as a valuable resource to the campus community to assist in the education of our students about a wide variety of mental health issues and to be a resource for people looking to help others on our campus.

Outreach presentations. Even with a high utilization of personal counseling services and an on-going waitlist for counseling services, we at UCS still stayed very active in providing outreach to the campus community. We find this to be a vital activity to help get preventative information out to the greater community, to make sure that students know that our services are available to them and to reduce stigma for those in need of our services.



100 E. Normal
 Kirksville, MO 63501
 660/785-4014; 660/785-7444 (fax)
<http://ucs.truman.edu>

Truman State University COUNSELING SERVICES Annual Report 2006-07

Outreach statistics

Year	Programs	Attendance	Hours
2006/07	281	8282	303.6
2005/06	245	8732	288
2004/05	167	6324	206.5
2003/04	178	6223	267

In 2006/07 UCS participated in 281 programs/ presentations to groups outside of UCS including classes, residence halls, student organizations, academic departments, parents and community organizations. **Total attendance at these programs was 8,282 individuals.** Presentation topics included (but not limited to):

- National Depression Screening Day
- Gambling Awareness Day
- Eating Disorders Awareness Week
- National Alcohol Screening Day
- Sleep Awareness Week
- Introduction to University Counseling Services
- Question, Persuade, Refer (Suicide Prevention)
- Stress Management
- Overcoming Test Anxiety
- Emotional Wellness
- College of the Overwhelmed: Addressing Increasing Mental Health at Truman
- Alcohol Education Class
- MBTI (Myers Briggs) training/facilitation

Consultation. We regularly consult in person, over the phone and via e-mail with concerned faculty, staff, parents, and students about developmental and mental health issues. Often these consultations are related to counseling clients and are documented within confidential client records. We also are frequently called upon to consult about situations concerning individuals who are not (or not yet) connected with our services. We believe our role as consultants is to help concerned individuals assess situations, provide a compassionate response, and encourage the use of counseling or other services, as appropriate.

This year we documented 78 significant consultations with students, faculty/staff and parents regarding Truman students. It must be noted that the 78 consultations is for significant issues (such as suicide ideation, severe depression and other extreme behaviors/issues) where we documented and/or recorded the contact on our schedules. There are many other consultations that do not require documentation and/or were not recorded on our schedule. **It is estimated that UCS provides approximately double the number of consultations that are recorded.**

In addition to consultations about individuals, we logged numerous hours of time over the course of the year consulting with various members of the campus and community about general issues related to our areas of knowledge and expertise. These included providing interviews to media outlets and student groups, and providing input to groups and organizations on campus and in the community.

Campus collaborations. Healthy working relationships with other campus departments and services are critical to effectively serving the campus community. **In the area of individual counseling, one of our most important collaborative relationships exists with Student Health Services** as ever-increasing numbers of students are utilizing pharmaceutical options as part of their mental health treatment. As in years past, we continued to refer many students for medication consultation and other health services, and received many referrals in return. With the increase in student usage of both services for mental health issues, more collaboration is something that we look to make happen in 2007/08.

We also have representation, via the director, on the Student Success Consultation Team (SSCT) and Behavioral Evaluation Team (BET), led by the Dean of Student Affairs Office, with other members including campus police, residence life, and health services. Our intention is to consult in a multi-disciplinary fashion regarding student behavioral issues that arise in any context, and to share information and expertise that could facilitate early and effective intervention to increase the probability of student success.

We also continued this year to maintain connections with residence hall staff and academic departments. Each of the counselors at UCS serves as a liaison to one of the residence halls. The liaison relationship allows us to be more connected with hall staff, encourages us to maintain contact with the staff throughout the year and to be more a part of their lives such as attending a staff meeting and/or involved with programming ideas in the halls. In 2006/07, UCS engaged in well-over 100 outreach, meetings, liaison activities with Residence Life.

As for connections to the academic departments, the director went to all but one of the academic division meetings in 2006/07 to talk about UCS services, the issues we have faced over the past few years and how faculty can better notice distress and how to respond. In addition to these meetings, various staff members of UCS have worked with a wide range of faculty and staff on campus on a more individual basis as needs arise.



100 E. Normal
 Kirksville, MO 63501
 660/785-4014; 660/785-7444 (fax)
<http://ucs.truman.edu>

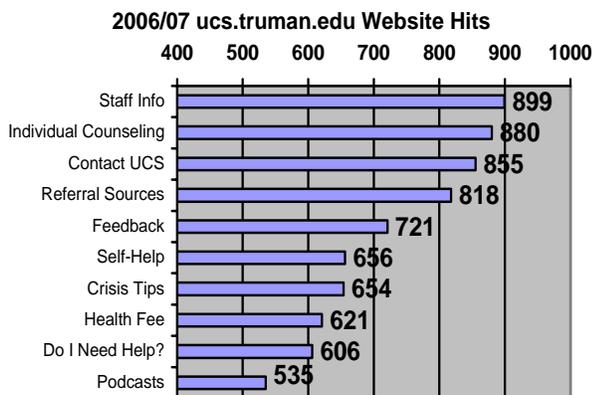
Truman State University COUNSELING SERVICES Annual Report 2006-07

Another major component of our campus collaboration is with Missouri's Partners in Prevention (MoPIP) efforts here at Truman. Phil Jorn was the primary contact with MoPIP in 2006/07 and regularly attended meetings, was directly responsible for increasing the utilization of the CHEERS program where local bars provided free non-alcoholic drinks to the designated driver and served as the advisor for Bacchus and Gamma, a student group whose focus is on alcohol abuse prevention and other related student health and safety issues.

A new effort in 2006/07 was to collaborate more with the Women's Resource Center (WRC) and Jane Maxwell was primarily responsible for this connection. Jane attended many of the WRC meetings and had UCS become a factor in many of the outreach and programming efforts of the WRC during the school year.

Website. Our website had a major overhaul and redesign in 2006/07. With the help of a student web designer, we implemented major design modifications and made the website much more user friendly. The design of the website is now complete and we are now working on improving services and content of the site. The table below summarizes hit statistics for our major website categories for the year, excluding the homepage. **Total visits for the 2006/07 year equaled over 21,000.**

Website statistics:



It is interesting to note that the tenth most visited webpage (Podcasts) is not operational. When we designed the site, we put in an area where we will eventually have a place to have podcasts so our students can download the information to their iPods. The fact that that site was visited 535 times demonstrates that there is a demand for these services and we at UCS must dedicate more time and resources to providing these services to our students.

Screening for Mental Health. A feature of the UCS website is to allow our students to take anonymous mental health screenings for common mental health issues. It allows Truman students to find out via a reliable website if they are experiencing significant symptoms for depression, generalized anxiety, Post-Traumatic Stress disorder, Bi-Polar, Alcohol and eating disorders. We provide these screenings in person on the various screening and awareness days but this feature allows them to take it at their leisure. The following is a chart showing utilization of the screenings:

Mental Health Screening	Utilization 2006/07	Utilization 2005/06	Utilization 2004/05
Depression	98	215	58
Anxiety	62	122	40
PTSD	17	44	10
Bi-Polar	38	91	29
Alcohol	18	51	19
Eating Disorders	31	83	38

For all the services UCS offers, the utilization of the on-line screening was one of the few areas where utilization decreased in 2006/07. A possible reason for this decrease is the redesign of the website. On the old website, the first thing people had access to was a link for the screenings. We designed the new website to make the link to the screenings obvious but it is clear from the results that this was not the case. Alterations will be made in 2007/08.

Campus event participation. Maintaining an active presence at large campus events is another way we regularly advertise our services and decrease the stigma of associated with UCS and counseling. This year we set up our display table and had staff available to talk and share informational materials at recruitment days, new staff orientation, campus health fair, and at all of the screening/awareness days that UCS sponsors (depression, eating disorders, alcohol, gambling, and sleep).

Alcohol Education Group

While it is not the primary responsibility of UCS to oversee the policies and responses to alcohol and other drug use, we see these issues as a very serious and important issue at Truman. While most of the campus efforts are organized by MoPIP and the Conduct Office, UCS is solely responsible for the alcohol education group. In 2006/07, 67 students required by the conduct office attended our group where we strive to have a frank and open talk about what got them into trouble, to recognize the errors that occurred and to help them problem solve for future situations. The goal, in conjunction with their other



100 E. Normal
 Kirksville, MO 63501
 660/785-4014; 660/785-7444 (fax)
 http://ucs.truman.edu

Truman State University COUNSELING SERVICES Annual Report 2006-07

sanctions, is to reduce high-risk drinking and its negative consequences among students. Our participants are primarily students receiving underage drinking citations by the residence hall staff or public safety office.

After the one time 90 minute group ends, we surveyed all the participants and found that **66% reported that this group helped participants become more prepared to make decisions about using alcohol in a way that is consistent with their beliefs and goals.**

When the participants were asked "what aspects of this group did you find helpful?" it seemed to be the group format that was most appreciated and the fact that UCS was doing the group and was not at any level connected to the discipline process. The following is a representative sample of the typical comments we received:

- "It was very relaxed, and it felt like we could really just say what we thought."
- "Being able to be open and honest."
- "For the first time I felt like I was talking to another human being about what happened. I was not talked down to and he realized that I made one mistake, didn't ruin my life. He made me feel a lot better about myself."
- "It helped me see I was not alone and that there are many different situations and aspects of alcohol-related issues."
- "Everybody telling their own stories to the group and relating them to others."

When the participants were asked "what are some ways this group could be improved?" the overwhelming response was "nothing". Occasionally issues about the size of the group in terms of the number of participants were brought up. The following is a sample of some of the comments we received:

- "Nothing, I liked it. It was not too serious and was comfortable."
- "I am not sure how the typical group works, but I think that the session went really well. I am not sure that I would change anything. I felt very comfortable the whole time."
- "Smaller group size."
- "I did not like discussion as a group. I thought that having to explain the incident was embarrassing and I should have had the option of keeping it private."

While the institution has primarily collected data via the CORE alcohol and drug survey, and now the Missouri College Health Behaviors Survey which MoPIP oversees, some data on the usage of alcohol

and marijuana are collected via the NCHA. The following are the results of the last three years (as % of total Truman students in bold followed by the comparison % of the students at all other institutions) in regards to questions about alcohol and marijuana usage:

Truman students reported the following alcohol use:

Usage	2007*	2006	2005
Never	22.5	23.0 (17.2)	20.7 (15.2)
Not in last 30 days	14.8	12.6 (13.2)	14.3 (12.2)
Used 1-9 days	52.6	55.9 (54.0)	53.7 (55.0)
Used 10-29 days	10.1	8.6 (15.1)	11.3 (17.0)
Used all 30 days	0.0	0.0 (0.5)	0.0 (0.6)

*The national comparison data for 2007 was not yet available.

Truman students reported the following marijuana use

Usage	2007*	2006	2005
Never	76.7	77.9 (65.5)	74.6 (61.8)
Not in last 30 days	14.3	12.6 (20.1)	15.0 (21.0)
Used 1-9 days	5.8	7.1 (10.0)	7.2 (11.4)
Used 10-29 days	2.3	1.8 (3.2)	2.6 (4.3)
Used all 30 days	0.9	0.5 (1.2)	0.6 (1.4)

*The national comparison data for 2007 was not yet available.

What this data seems to indicate is that more Truman students compared to their peers at other institutions around the country abstain from alcohol and marijuana use and that we have less of our students considered frequent and heavy users. This does not make alcohol and drug use a lower priority but I think gives us at Truman a unique chance to normalize non-use, restricted use or a limited use philosophy that many other institutions around the country may not be able to appropriately convey.

Students Together Educating Peers

2006/07 was the fifteenth year of the Students Together Educating Peers (STEP) organization and was again advised by Joe Hamilton. STEP continues its mission of educating Truman students on the important topics of sexual assault prevention and diversity as well as many others.

- **Outreach:** Over 2000 students attended STEP presentations last year. The table below summarizes our programs:



100 E. Normal
 Kirksville, MO 63501
 660/785-4014; 660/785-7444 (fax)
 http://ucs.truman.edu

Truman State University COUNSELING SERVICES Annual Report 2006-07

Title (topic)	#	attendance
Choices (various)	2	1400
Diversity Awareness Display (diversity)	2	450
Diversity Team (diversity)	1	75
Safe STEPS (sexual assault prevention)	1	25
A Place at the Table (diversity)	1	16
True Man of Strength	1	40
Awards (sexual assault and violence prevention)		
Sexual Scruples (sexual communication)	1	7
TOTAL	9	2013

- **Choices:** Once again for the fifteenth consecutive year, the Choices program was presented to the entire freshmen entering class. Overall the program received positive feedback once again. One student responded, "Choices did well to show me some or all of the problems I might face during my first year of college." The following table summarizes evaluation data collected:

Item	% responding very much or somewhat
Did you like the <u>Choices</u> presentation during Truman Week?	78%
Did the <u>Choices</u> presentation make you think about common college issues?	82%
Did the <u>Choices</u> presentation influence your behaviors and/or opinions on common college issues	31%
Overall, did you find the <u>Choices</u> presentation and follow-up group discussion to be useful to you in your transition to Truman?	52%

- **True Man of Strength:** The 2nd Annual True Man of Strength Campaign was even more successful this year with more applications and a well-attended awards ceremony. Many audience members commented on how important they felt the message of the campaign is and that they very much enjoyed the finalists' essays. Over 50 of the 2006 finalist posters were posted on campus to raise awareness of sexual assault and dating violence prevention.
- **Training:** Four new members successfully completed training during the spring semester. Since many of our members graduated last year this leaves a total of 6 members for the next academic year. The new members met for training for an hour each week for a total of fifteen weeks. The first half of training was focused on learning about sexual assault issues and sexual harassment

and included the following topics: Rape Prevention Theory, Myths and Facts, Rape Culture, Statistics, Profile of a Rapist, Victim Sensitivity, Survivor Support, Reporting a Rape, Missouri Laws, University Policies, Sexual Harassment. The second half of training focused on diversity issues and programming and included information on the history of hate and oppression in America and identity development.

While there is no individual survey focused on violence and sexual assault on campus, some data on these issues are collected via the NCHA. The following are the results of the last three years (as % of total Truman students in bold followed by the comparison % of the students at all other institutions):

Within the last school year, Truman students reported experiencing the following:

Issue	2007*	2006	2005
Physical fight	5.6	3.8 (6.2)	4.6 (6.9)
Physically assaulted	2.1	2.2 (3.5)	1.7 (3.9)
Sexual verbal threats	2.9	2.9 (3.4)	3.7 (3.7)
Unwanted sexual touch	10.2	11.1 (8.4)	11.5 (9.2)
Attempted rape	3.1	3.1 (2.7)	3.7 (3.0)
Rape	2.0	1.3 (1.4)	1.4 (1.6)
Abusive rel. - emotional	10.3	9.1 (12.1)	12.4 (13.3)
Abusive rel. - physical	1.5	1.1 (1.9)	1.4 (2.0)
Abusive rel.- sexual	2.1	1.3 (1.5)	1.4 (1.6)

*The national comparison data for 2007 was not yet available.

This data seems to indicate that Truman is safer in many respects than other schools around the nation, with the exception of unwanted sexual touch and in attempted rapes. But even with lower than average numbers, these issues are very real and impact a significant number of our students.

Counseling Services Staff

We have an experienced, competent, and committed staff who deserve much credit and praise for the accomplishments summarized in this report. **During the course of the academic year, we had six full-time professional staff members. On an annual basis, these positions combined for a professional staff FTE of 5.00.**

Counseling Staff. We are fortunate to have experienced and competent counseling professionals on staff. For 2006/07, **our professional counselor/student ratio during the academic year was approximately 960/1** (based on fall enrollment of 5762 and the equivalent of 6 full-time staff dedicated to providing counseling during the academic year). **The ratio recommended by accreditation standards is 1000/1.** While this demonstrates that Truman exceeds the recommended standards, the lack of practicum and internship students at Truman makes it slightly



100 E. Normal
Kirksville, MO 63501
660/785-4014; 660/785-7444 (fax)
<http://ucs.truman.edu>

Truman State University COUNSELING SERVICES Annual Report 2006-07

harder to meet the demands that have been placed upon us by the student body due to our commitment to not only provide counseling services but be a major aspect of the campus in many different ways that were discussed in this report. All FTE designations listed below are based on annual (12 month) contracts.

Brian Krylowicz, Ph.D., Director (1.0 FTE)
Licensed Psychologist

Joe Hamilton, M.A. Assistant Director (1.0 FTE)
Licensed Professional Counselor

Sara Hallberg, M.S., Counselor (.75 FTE)
Licensed Professional Counselor

Madeline Herrmann, M.A., Counselor (.75 FTE)
Licensed Professional Counselor

Phil Jorn, M.A., Counselor (.75 FTE)
Licensed Professional Counselor

Jane Maxwell, M.S.Ed., Counselor (.75 FTE)
Licensed Professional Counselor

It should be noted that UCS has obtained two new staff members in 2006/07, Jane Maxwell and Madeline Herrmann. Jane Maxwell was employed prior to the start of the 2006/07 school year and was a new position. The Student Health Fee that was implemented in 2005/06 provided the funding for a new counselor at UCS and Jane was the one who filled that position. At the beginning of the 2006/07 academic year, Erika Sterup resigned from a counselor position and Madeline Herrmann was hired as a temporary replacement in September. After a nation-wide search, Madeline Herrmann was hired to be the permanent replacement for the vacated counseling position. From all indications, the staff from 2006/07 will be returning for the 2007/08.

Graduate Level Counselors. This was the first year that UCS did not have intern or practicum graduate students due to the closing of the Master's level counselor preparation program at Truman. Historically we have had 1-2 practicum students in the Spring semester and 1-2 interns who worked in both the Fall and Spring semesters. Interns typically carried a caseload of 8-10 clients and practicum students had a caseload of 3-5 students. **Luckily, we were able to increase our professional staff to offset the loss of these graduate students with the implementation of the Student Health Fee.** But it should be noted that the loss of the graduate students has had a negative effect on the office since we are no longer a training facility, which was something that the staff enjoyed and added vibrancy to the office and allowed us to do more direct service.

Administrative Staff. The true epicenter of office activity is the reception area. We are fortunate to have an excellent secretary who models a professional and caring tone while juggling multiple tasks including reception, scheduling, file management, budgets and purchasing, and general clerical support.

Ann Weidner, Secretary (1.0 FTE)

Scholarship/Leadership Students. These students provided part-time clerical support in the reception area, assisted with outreach programming and helped with various programs that are run out of UCS. **Due to feedback we have received from students, we are no longer going to have students work in the front office as clerical support.** Students felt that having fellow students in the office (even if they did not have access to confidential information) took away confidentiality and lowered their desire to be seen at UCS. We are committed to using more students for outreach programming to obtain a student's perspective on what we do and to assist in the students getting very practical and hands on experience in the counseling profession, which is often hard to obtain.

Jordan Bergston, Senior, *Psychology*

Jeff Sanders, Senior, *Psychology*

Lissa Snyders, Senior, *Linguistics*

Christine Sigmund, Senior, *Nursing*

University/Community Service. In addition to their regular duties, professional staff participated in the life of the campus and community as well, **devoting countless hours of combined time serving on various committees and providing service to, and participating in, functions that support the general university mission.**

- Sara Hallberg – Member of Missouri Collegiate Gambling Task Force.
- Joe Hamilton – Member of Truman Week Implementation committee and Student Affairs Cultural Competence Programming committee (chair). Advisor for Students Together Educating Peers (STEP). Board Member/Trustee for American Counseling Association – Missouri.
- Madeline Herrmann – Advisor for Alpha Gamma Delta. Steering committee member for Professional Development Institute. Assisted National Society of Collegiate Scholars with prom dress project. Assisted in Residence Life hiring process for Student Advisors.
- Phil Jorn – Advisor for Bacchus & Gamma. Committee member of Missouri Partners in



100 E. Normal
Kirksville, MO 63501
660/785-4014; 660/785-7444 (fax)
<http://ucs.truman.edu>

Truman State University COUNSELING SERVICES

Annual Report 2006-07

Prevention (MoPIP). Co-taught Mountain Bike class.

- Brian Krylowicz –Member of Adair County Mental Health Board, Missouri's Suicide Prevention Planning group, Truman's Pandemic Planning Committee, and Student Affairs' Diversity Cluster. Senior Personnel for Conquering Anxiety, Learning Mathematics Grant. Assisted in hiring process for Residence Life Hall Director and Area Coordinators and Upward Bound's Assistant Director. Assisted with Summer Orientation Planning Group and Academic Support Services Proposal. Participated in Great Conversations during Truman Week and Alpha Kappa Alpha's (AKA) Professional Mentor Program.
- Jane Maxwell – Member of Women and Gender Studies and Leadership Recognition Selection committees. Liaison for the Women's Resource Center. Led discussion group for National Organization for Women (NOW) on women and aging.

Staff Development/Professional Activities. We place a high priority on professional growth and development in order to remain current and competent in our work. **Our counselors are required by state licensing boards to obtain 15-20 hours per year of continuing education to maintain professional licenses.**

- Sara Hallberg attended the American College Counseling Association conference in Reno, NV; a gambling prevention planning workshop in Columbia; completed a Suicide Risk Assessment and Training course and participated in a national teleconference related to Helping Students after a National tragedy.
- Joe Hamilton attended the American Counseling Association - Missouri conference in Jefferson City; completed a Suicide Risk Assessment and Training course; participated in a national teleconference related to Helping Students after a National tragedy and became a certified Question, Persuade, Refer (QPR) Gatekeeper Trainer, a national suicide prevention program.
- Madeline Herrmann completed a Suicide Risk Assessment and Training course and participated in a national teleconference related to Helping Students after a National tragedy.
- Phil Jorn attended a workshop on Psychopharmacology in Columbia, completed a Suicide Risk Assessment and Training course and participated in a national teleconference related to Helping Students after a National tragedy.

- Brian Krylowicz attended the Association of University and College Counseling Center Directors conference in Vail, CO; two gambling prevention planning workshops in Columbia and a Clinical Supervision workshop in Columbia. Participated in three national teleconferences (Helping Students after a National tragedy, Documentation for Students with Psychiatric Disabilities and Reorganizing Student Affairs Divisions) and became a certified Question, Persuade, Refer (QPR) Gatekeeper Trainer, a national suicide prevention program.
- Jane Maxwell worked on her dissertation with an intention of completing her degree in August 2007.

Proposed Goals for 2007/08

- Obtain better feedback from all UCS services by having evaluations done on-line. (Quadrant 2)
- Obtain accreditation from International Association of Counseling Services. (Quadrant 2)
- Expand the information available on the website, provide access to self-help materials for all Truman students, and look for new areas and ways to help promote knowledge of healthy living. (Quadrant 2 and 3)
- As a result of counseling, students will show significant decrease in negative psychological symptoms by integrating the knowledge and skills learned in counseling sessions as demonstrated by their OQ scores. (Quadrant 3)
- Look at altering the alcohol education group to maintain the quality we already have established but to find a way to better serve those that have severe substance abuse histories (Quadrant 3)
- Maintain effectiveness and responsiveness in light of increased utilization. (Quadrant 4)