ACADEMIC AND STUDENT AFFAIRS ANNUAL REPORT
Counseling Center
2015-2016
I. One-Page Executive Summary: Overview of the Successes and Challenges of this past year:

Mental health issues continue to be at the forefront of many of our publications, news and social media, especially with regard to the diminishing services and the accompanying increase in severity of presenting concerns. Our Counseling Center staff continue to share in the successes regarding the retention and graduation of several of our students. This past year, staff provided 5,660 psychotherapy sessions to over 949 students. The top seven presenting issues included 1. Major Depressive Disorder, Recurrent; Moderate; 2. Generalized Anxiety Disorder; 3. Post-Traumatic Stress; 4. Partner-Relational Problems; 5. Adjustment Disorder with Anxiety and Depressed Mood; 6. Problems of Adjustment to Life-Cycle Transitions; and 7. Substance Use/Dependence. There were at least 308 crisis/triage sessions with 269 students, several of whom had suicidal ideation. Eight students had hospitalizations due to persistent and severe mental illness; most of whom were discharged to our care, post-hospitalization. Approximately 22% of our clients received simultaneous psychiatric care for psychotropic needs either from psychiatrists, or primary care physicians, on or off campus.

Staff Psychologists facilitated a variety of mental health workshops and initiated our Mental Health Awareness and Screening Days for Depression, Eating Disorders, and Alcohol Awareness and Prevention. There was much collaboration on campus-wide outreach programs such as Fall Fest, New Student Orientation, the Trio Programs.; and service on several campus-wide committees. Our continued challenges include meeting the continued growing demand for timely interventions and documentations for a variety of purposes including companion animals.

Staff also provided consultation and interventions to our CARE Team, C.A.R.T., Office of Student Conduct, Faculty, Administrators, and Staff, when mental health issues were involved. Two new staff psychologists joined our staff after searches last year.

Additionally, the Counseling Center contributed to the National Database- the Center for Collegiate Mental Health, through Penn State University, after obtaining IRB approval. This would allow for national comparisons of college student mental health data in subsequent years. Data thus far show higher scores on most mental health disorders for our MSU Denver students, than their normative peers.

II. Unit Accomplishments: Completion and Progress Toward the previous Year’s Academic Goals in Line with Strategic Plan and Current Initiatives

The Counseling continued its efforts toward supporting our institution's Strategic Themes:

Theme 1: Student and Academic Success

Goal 1: MSU Denver will strategically grow enrollment in support of student success and in response to market demand, consistent with Colorado’s 2025 college completion goal.

Theme 3: University Culture

Goal 2: MSU Denver faculty, staff and students feel valued and engaged in an environment of empowerment, trust, inclusion, and fairness.

Staff continued to support clients’ academic needs through provision of Academic Skills’ Workshops such as How to Communicate with Your Professor, Exam Strategies, and Dealing with Procrastination and Perfection. Clients were referred to follow-up services with the Access Center, Trio Program and Tutoring Center as appropriate. There was
much collaboration on cases between the Access Center, the CARE Committee, Financial Aid, and the Health Center at Auraria. Staff made professional recommendations for accommodations in keeping with clients’ presenting issues and their impact on life functions. The process of individual therapy allows our students to do a deeper exploration of the self and its relationship with related others, in an effort to enhance understanding, bring relief to mental pain and anguish, and provide buffers in dealing with loss, including the loss of self; in order to facilitate more meaningful engagement with others.

Approximately 17 students from a variety of Resource Programs completed a 12-hour training course facilitated by Counseling Center staff, and took the Bacchus National Exam to become Certified Peer Educators. The interventions of Peer Educators/Mentors have been shown to be effective in improving academic success and retention for many students at risk for attrition.

III. Supporting Metrics

   a. ii. Program Metrics for 5 years, 2011-2015

![Graph: No. of Psychotherapy Sessions, 2011-2016](image)

This table provides a comparison in the number of individual therapy sessions over the last five years for a range of clients. Note that staff size, and enhanced data retrieval account for some of the fluctuations. Also, note that these numbers do not capture the severity or growing complexity in cases which require an increase in case management responsibilities.
This chart demonstrates that 69% of our client sample are of Caucasian background, and 31% are from a variety of ethnic backgrounds, and reflective of our institution’s ethnic make-up.
Female students continue to utilize mental health services at rates that surpass males; in this instance doubling the rates for males. This is consistent with trends in the fields and has implications for messages that males receive about seeking professional help. A growing number of transgender students are also pursuing help.

This chart shows that Seniors and Juniors (66%) tend to take advantage of counseling services, more so than Sophomores and Freshmen (17%). Perhaps this is a reflection of growing maturity and recognition of the importance of enhancing interpersonal relationships with others, or increased familiarity with available resources.
This chart shows that clients are reporting reductions in depression and anxiety since starting counseling, by as much as 60%. This is very encouraging.

Counseling has had a positive impact on me remaining in/or progressing in school.
This chart overwhelmingly demonstrates clients’ evidence (87%) that counseling has been helping them to remain in school or to make academic progress.

Our clients are becoming increasingly savvy with the growing variety of high-tech sources of communication such as Instant Messaging, Facebook, and Chat Rooms. This has implications for both marketing of our services and interventions as they are increasingly relying on the touch of a button. With this in mind, our website offers several self-help and online screening instruments for those who choose internet resources. The following tables provide a summary from 602 online users who participated in anonymous online screenings on our website.
Online Users’ Class Levels

Online Users Age Profile
Of these online users, 63% were between the ages of 18 and 24; and 31% were between the ages 25 and 34. Fifty-three percent were Juniors and Seniors. Overall, students between ages 18 and 34 (94%) are the heaviest online users.

b. Employee Professional Metrics

**Professional Development- Workshops/Conferences Attended:**

**Dr. Gail Bruce-Sanford:**

- Campus Threats to Safety: From Prior Sexual Intimates to Violent True Believers. (July, 2016). Invited Speaker: J. Reid Meloy, ABPP; UC Boulder
- Association of University and College Counseling Centers’ Directors’ Conference, Salt Lake City, Utah, October 2015
- Colorado/Wyoming Counseling Centers Directors’ Conference, March 2016, Laramie, Wyoming

**Dr. Steven C. Lee:**

- Campus Threats to Safety: From Prior Sexual Intimates to Violent True Believers. (July, 2016). Invited Speaker: J. Reid Meloy, ABPP; UC Boulder

**Dr. Amy Westergren-Amlicke:**

- Colorado Counseling Association Annual Conference, April 21-23, Denver, CO; Dr. Irvin Yalom, Keynote Address.
- Dr. Gregg Jacobs: Developing Expertise in Cognitive Behavioral Therapy for Insomnia (CBT-I), Aurora Mental Health, October 2, 2015.

**Dr. Ray Gornell:**

- American Society of Clinical Hypnosis Annual Conference, March 11-15, 2016, St. Louis, MO.
- ASCH Hypnosis Workshop, Chicago, IL, Sep. 17-22, 2015, Chicago IL

**Dr. Terri Bazacos:**


**Dr. Michael Malmon:**

- American College Health Association National Conference, June, 2016, San Francisco, CA

**Dr. Jodie Benabe:**

Colorado Assn. of Family and Conciliation Courts Training, Oct. 9-11, 2015, Breckenridge, CO

ii. Grants Written – N/A

iii. Scholarly Activities- N/A

iv. Service Activities

Staff served on several committees both on campus and nationally. A listing follows:

Gail Bruce-Sanford, Ph.D.

- APA Division 35-Women in Psychology, Amy Hyde Research Grant Selection Committee
- Liaison to Domain 8-Ethics, Legal, and Professional Issues with the Association of State and Provincial Psychology Boards (ASPPB). Reviewed items for National Psychology Exam.
- The Tri-Institutional Campus Assault Response Team (C.A.R.T.)
- MSU Denver Institutional Review Board (IRB)
- The MSU Denver CARE Team

Steven C. Lee, Ph.D.

- The MSU Denver CARE Team
- Chair, Search Committee for Staff Psychologist
- UC Denver American Indian Graduation Ceremony
- Coordination of Professional Development and Crisis services
- Assist with Titanium configurations.

Michael Malmon, Ph.D.

- Chair, American College Health Association, Continuing Education Sub-Committee
- Member, ACHA Continuing Education Committee
- Chair, Search Committee for Staff Psychologist
- Coordinates Group and Workshop Program for the Center
- Coordinates the Practicum Training Program

Ray Gornell, Psy.D.

- Search Committee Member, Staff Psychologist position
- HIPAA Training for Staff
• Emergency Preparedness for Staff

Amy Westergren-Amlicke, Ph.D.:

• MSU Denver Disability Awareness Festival Committee, Fall 2015
• Item Writer, Domain 8-Ethics, Legal, and Professional Issues with the Association of State and Provincial Psychology Boards (ASPPB). Reviewed items for National Psychology Exam.
• Search Committee Member, Staff Psychologist position
• Coordinates Outreach Services for the Center

Theresa Bazacos, Psy.D. & Jeanne Burkhart, Ph.D.

• Phoenix Center at Auraria Campus Outreach and Education
• Search Committee Member, Staff Psychologist position
• Liaison for Peer Educator Training

Alanna Hager, Ph.D.

• Be Well Auraria Committee

Professional Memberships:

American Psychological Association
Gail Bruce-Sanford, Ph.D., Alanna Hager, Ph.D., & Amy Westergren-Amlicke, Ph.D.

APA Division 35 –Psychology of Women
Gail Bruce-Sanford, Ph.D.

Colorado Psychological Association
Gail Bruce-Sanford, Ph.D., Amy Westergren-Amlicke, Ph.D., Theresa Bazacos, Ph.D.; & Jodie Benabe, Ph.D.

American Society of Clinical Hypnosis
Ray Gornell, Ph.D.

American Board of Professional Psychology
Ray Gornell, Ph.D.

National Register of Health Service Providers
Ray Gornell, Ph.D.

American Academy of Clinical Psychology
Ray Gornell, Ph.D.
IV. Measurements of Progress:

a. Update on progress toward program or unit review outcomes - N/A

b. Update on accreditation specific issues

Two years ago our Accreditation Site Visitors made recommendations for our Staff to utilize *Titanium Electronic Medical Records System*. This became a reality and staff have been tremendously pleased with the relative ease of client record management, data analysis, and overall enhanced efficiencies. Along with this was the adoption of the Dragon Naturally Speaking, a highly acclaimed voice recognition software that makes the creation of notes much easier and less-time consuming. An unintended positive outcome is the enhanced articulation of staff in training individual speech patterns to be recognized by the software for speech to text.

Staff have also worked very diligently on the process for contributing to the *Center for Collegiate Mental Health (CCMH)*, a multidisciplinary database for understanding the unique mental health needs and issues of college and university students. To date, all staff have completed the required IRB training and a proposal was submitted to MSU Denver’s IRB Board. IRB approval was obtained at the end of summer 2014 and Information Technology staff assisted with the technical aspects of working with the server. As a result, we have been able to start contributing to the CCMH. In subsequent years the Counseling Center will have the capability of having more benchmark comparisons on mental health issues with other institutions. Table 1 in section c. hereunder shares data pertaining to nine different subscales for a subset of MSU Denver Counseling Center clients compared to those in the national data base.

This past year our accrediting agency, The International Association of Counseling Services (IACS) has also asked us to respond to the discontinuation of the APA-Approved internship Training Program and to the issue of low staff salaries.

The Internship Program requires much administrative oversight with regard to the development and maintenance of policies and procedures consistent with national trends and standards. These have been becoming increasing in complexity and have been taking away time and resources from some of our direct services with our students. We have already channeled these resources (space and salaries) to the hiring of additional professional staff.

The issue of lower staff salaries has been shared with Administrators who have to balance the needs of the entire institution with available resources.

c. Unit Assessment Report (See attached)

d. Additional Metrics
Table 1: CCAPS National Comparison
July 2015-June 2016 (809 Clients)

<table>
<thead>
<tr>
<th>Subscales</th>
<th>Center Average</th>
<th>National Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>1.71</td>
<td>1.58</td>
</tr>
<tr>
<td>Generalized Anxiety</td>
<td>1.87</td>
<td>1.60</td>
</tr>
<tr>
<td>Social Anxiety</td>
<td>1.94</td>
<td>1.81</td>
</tr>
<tr>
<td>Academic Distress</td>
<td>1.78</td>
<td>1.85</td>
</tr>
<tr>
<td>Eating Concerns</td>
<td>1.02</td>
<td>1.00</td>
</tr>
<tr>
<td>Family Distress</td>
<td>1.65</td>
<td>1.28</td>
</tr>
<tr>
<td>Hostility</td>
<td>1.21</td>
<td>1.04</td>
</tr>
<tr>
<td>Substance Use</td>
<td>0.83</td>
<td>0.76</td>
</tr>
<tr>
<td>Distress Index</td>
<td>1.81</td>
<td>1.64</td>
</tr>
</tbody>
</table>

This table shows that our sub-sample of MSU Denver clients are slightly higher than our national sample on several subscales, except for Academic Distress which is slightly lower. It tells us that some of our students are faced with more challenging issues than their normative peers.

Outreach Initiatives, 2015-2016

This Chart provides a sample of activities in which staff were engaged as facilitators or participants, some of which were program-centered, and others campus-wide such as New Student Orientation, National Depression, Alcohol Awareness, Eating Disorder and Interpersonal Violence Screening Days. Staff also responded to emergency requests, facilitated several invited tabling events including Fall Fest, Disability Awareness Festival, and Spring Fling. Groups include the Reisher Scholars, Trio, Latino students, LGBTQ students, the First Year Program, Veterans, Peer Ambassadors; and services to several Academic Departments including Psychology, Social Work, Human Services, and the Department of Health Professions.

Student interactions with professional staff in informal presentation settings also help to break down the stigma of pursuing professional help.
Challenges: At both the MSU Denver campus and nationwide, we are seeing an increase in the demand for counseling services and a dramatic increase in the number of crises seen and complexity of issues presented to counseling center staff. It is therefore, essential to not only provide on-going counseling and crisis intervention to increase the likelihood of student success, retention and campus safety, but to also provide the necessary staff and resources to allow for primary prevention and education efforts. Outreach/Primary Prevention acts as an early identification service that can help to connect students to resources which will thereby reduce distress and ameliorate the escalation towards crisis. If our aim is to retain students, promote wellness and keep the campus community safe, energy and resources will be well spent in catching and ameliorating problems early. Prevention efforts can decrease the risk for a variety of undesirable outcomes such as suicide and violence while also increasing the chances of favorable student outcomes such as academic success and retention. Because of the limited number of staff and high demand for individual and group counseling services, a challenge this past academic year was to be able to devote enough staff time to the area of outreach. Clearly, additional staff and a larger budget for psycho-educational materials such as pamphlets and student promotional items would be of great assistance in this area.
V. Plans for the Current year (2016-17) to Support the Achievement of MSU Denver’s and the Counseling Center’s Strategic Plan

The Counseling Center plans on supporting the institution’s Strategic Plan. In particular,

**Theme 1: Student and Academic Success**

**Goal 1: MSU Denver will strategically grow enrollment in support of student success and in response to market demand, consistent with Colorado’s 2025 college completion goal.**

The following strategies have been identified as appropriate for enhancing student retention and success:

1. Continue to provide a variety of academic skills- based workshops such as Exam Strategies, Time Management, Test Anxiety, and Dealing with Perfectionism and Procrastination.

2. Continue to enhance marketing to ensure that more students are aware of our services.

3. Continue a series of Workshops to New and Adjunct faculty to share information with them on Counseling Center Services and the continued referral process for students exhibiting complexities in mental functioning.

4. Continue to enhance self-help resources on the Counseling Center website to reach a greater number of online students.

5. Continue to enrich liaison relationships with a greater number of academic and student services departments for easier referrals of students.

6. Continue with the ongoing professional development of Counseling Center Staff so that they keep in step with updated trends and issues in service delivery.

7. Continue to utilize Titanium software, which enhances data entry and utilization statistics, to have a more refined understanding of trends in usage as well as comparisons to other benchmarking institutions.

8. Continue to provide training to Peer Educators and Mentors in other service programs so that student leaders can enhance their intervention, communication, and referral skills and understanding of their limitations.

9. Continue to engage in Staff Retreats twice yearly to reflect and review services offered, to enhance knowledge of new laws impacting practice, and to identify changing needs.

10. Continue collaboration with other Academic and Student Services Departments on a variety of outreach initiatives to enhance participation in Counseling Center services and to help reduce stigma in help-seeking.

VI: Resources

In reviewing data from some of our Benchmarking Peers with an enrollment of over 17,000 students we compare less favorably with staff size. In keeping with our accreditation expectations, our Ideal Staff Ratio should be 1 to 1,500 students or an additional 5-7 FTEs. This would have implications for maintaining high quality care and having more flexibility for the duration of treatment with cases involving more severe pathology. Moreover, if our institution continues to grow then it will be only appropriate to project that this desired staff size will commensurate with student demand for services. The need for additional space must also accompany this vision.
It is imperative that we offer Staff Psychologists lucrative salaries and a career ladder to enhance their retention with the institution. Many other agencies and institutions, both public and private, offer very competitive packages and incentives that are attracting our staff away from our Center. Even when compared to other Counseling Center staff salaries, MSU Denver salaries continue to be among the lowest. As a result we lost three staff psychologists within the last four months.

Note that appendices referred to hereunder are so brief and would not be included as separate pages.

a. **5 Year Staff Request**

   2016-2021      Five Additional Staff Psychologists   (5 FTE)

b. **5 Year Equipment Request**

   2016-2018      15 New Computers and Printers for all staff

c. **5 Year Space Request**

   Given the projection to have an additional five, full-time Staff Psychologists in five years, it is anticipated that we will need an additional 3,000 sq. feet for staff offices. Our present waiting room has also out grown its capacity and so we will need an additional 1,000 sq. feet for additional waiting room space, that is more private and confidential.
Student Engagement and Wellness
Counseling Center Assessment Report
2015-2016

Program Name: Individual and Group Therapy

Staff Responsible for Assessment: Dr. Gail Bruce-Sanford, Dr. Steven Lee, & Dr. Amy Westergren-Amlicke

Brief Program Description and Purpose:
Over the last few years there has been a growing focus on the mental health of college students especially in light of various high profile tragedies involving suicide or homicide. Many questions have emerged as experts attempt to offer explanations to mental health issues that are steeped in layers of complexity—personal, familial, geographical, and socioeconomic. Answers to these questions have implications for policies regarding access to treatment, types of interventions, and the costs of maintaining prompt and effective services.

This program is designed to facilitate the bio-psychosocial treatment of mental or psychological issues and disorders in which qualified mental health professionals provide a safe therapeutic environment for clients to explore both conscious and unconscious factors that impact interpersonal functioning. The purpose is to assist clients in identifying difficult and painful feelings and issues that hinder personal growth and success, so that they could identify and utilize healthy coping strategies to successfully pursue their academic goals.

Key Program Learning Outcomes:
A) As a result of participation in individual or group therapy, clients will be able to reduce their levels of anxiety.

B) As a result of participation in individual or group therapy, clients will be able to reveal reduced levels of depression.

C) As a result of participation in individual or group therapy, clients will be able to report reduced levels of academic distress.

Methodology:
Clients were administered the Counseling Centers Assessment of Psychological Symptoms (CCAPS-62) Questionnaire at initial entry, followed by the CCAPS 34 at sessions five and ten. The CCAPS are multi-dimensional instruments, with eight subscales related to psychological symptoms and distress in college students. The instrument takes about 7-10 minutes to complete. They are also used for diagnostic skill development, client conceptualizations, treatment planning and goal-setting. Results reveal whether their scores fall in the Low, Mild, Or Elevated ranges. A client whose score falls in the Elevated range at the first session, and a Mild range in the fifth or tenth session would be perceived as improving in treatment for instance. CCAPS is managed by the Center for Collegiate Mental Health (CCMH) at Penn State University as a service to university and college counseling centers. This allows for peer-based comparisons based on over 230,000 client participants (over 140 institutions) and growing. All Centers obtain IRB approval at their respective institutions prior to contributing de-identified data to the CCMH.

Pre- and Post-Test scores were examined at the first, fifth, and/or tenth counseling sessions depending on a client’s duration with therapy. The national mode is five sessions, but there are some clients who choose to continue beyond the fifth session. For the purposes of this study, four subscales were selected for comparison on the CCAPS-34: Social Anxiety, Generalized Anxiety, Depression, and Academic Distress. A raw score of 1.30 or less is indicative of a low score, and a score of 2.10 or more is indicative of an elevated score on the Generalized Anxiety Subscale. A raw score of 1.65
or less is indicative of a low score, and a score of 2.50 or more is indicative of an elevated score on the Social Anxiety Sub Scale. A raw score of 1.00 or less is indicative of a low score, and a score of 1.75 or more is indicative of an elevated score on the Depression Sub Scale. A score of 1.45 or less is indicative of a low score, and a score of 2.50 is indicative of an elevated score on the Academic Distress Sub Scale.

Scores are uploaded monthly to the CCMH database and are available for data comparisons currently from the 2012 data base. Efforts are underway by CCMH to include more recent comparisons.

Results:
One hundred and thirty-one clients participated in this year’s assessment. Pre Treatment and Post-Treatment scores are displayed in Table 1.

Table 1

This table indicates that our clients improved on measures for Generalized Anxiety, 1.19 to 0.57 a 48% improvement rate; for Social Anxiety, 1.27 to .93, a 73% improvement rate; Depression, .97 to .47, a 48% improvement rate; and Academic Distress, 1.33 to .84, a 59% improvement rate after five or more treatment sessions. All pre-test scores fell in the low range. This is a within-groups comparison only reflective of our own Center’s changes.

Recommendations/Implications:
Our results indicate that therapy interventions have been effective and instrumental in reducing anxiety and depression levels in our clients as well as in enhancing their academic comfort. Depression and anxiety could be very debilitating conditions that have negative impact on one’s self perception and self-efficacy, which in turn impact one’s academic performance. Having qualified mental health professionals who are available to assess these factors in our students is critical for their retention and success. Moreover, therapy interventions were done in a short-term model so that clients did not have to wait too long before they started experiencing positive changes.
Student Learning Outcomes:

- With regard to student learning outcomes, these results are typically shared with clients so that they have some feedback about their internal states that can help them to more effectively monitor their changes. They can also assist them in setting goals and challenging themselves to meet these goals by their own desired timelines. They can more specifically identify factors/life issues which contribute to their mental functioning and come in more prepared to discuss these challenges. In other words, these results help them to become more psychologically astute and more empathically attuned to their cognitions, feelings, and behaviors.

- These results also have implications for the Center’s planning of academic and personal growth workshops that target specific mood states such as anxiety, depression, or academic distress. They can be shared with Student Support Services, the Trio Program, The Access Center, the Health Center, and the First Year Program, whose staff also work with academic retention issues.

- The data is also helpful in examining “dose effects”, with respect to how many psychotherapy sessions might be necessary and sufficient in working with particular presenting issues. This has implications for recommending session limits especially in peak demand times.

- It also has implications for influencing the professional development undertakings of professional staff who could look out for additional trainings and research on related issues to bring a deeper understanding and to inform treatment planning.

- Additionally, it would be great to look at five-year comparisons of our Counseling Center clients to look closely at trends as a function of societal demands and challenges as our institution attempts to respond to some of these needs and demands.

Future CCAPS follow-up administrations will be more deliberate so that we can obtain a larger sample pool. It means that all therapists would have to make a concerted effort to ensure that clients complete a second administration at the appointed time. Feedback has been given to the software company requesting an automatic notification when a client reaches the fifth or tenth sessions.

This Assessment Report focused on the established goals of our Fall 2015 Assessment Plan in keeping with expectations of our Department of Student Engagement and Wellness. Our Annual Report will be more extensive in addressing client usage and many other demographic factors.