



COUNSELING IMPACT ASSESSMENT REPORT

2023-24



Universities of Wisconsin

2023-24 Counseling Impact Assessment Report

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Assessment of the impact of mental health counseling has been in place for 13 years across the Universities of Wisconsin and is considered a priority for all counseling center professionals who use the data and information to inform their universities and advocate for resources. This work would not be possible without the commitment of time and effort from UW counseling centers; the UW Counseling Impact Assessment Committee; Universities of Wisconsin Administration for their annual funding of this project; and to Catalyst at UW-Stout for coordinating data gathering and reporting.

Gratitude is extended to all counseling center staff who work tirelessly to provide effective services in support of student well-being and success. Finally, a special word of thanks to Deirdre Dalsing for her steadfast and longstanding leadership as chair of the UW Counseling Impact Assessment Committee. Deirdre leaves a lasting legacy and committee members, the counseling center community, and Universities of Wisconsin colleagues wish her the best in retirement!



Foreword

This annual report summarizes results from the 13th year of data collection by the Universities of Wisconsin Counseling Impact Assessment Project, overseen by a systemwide committee of the same name. The project tracks a core set of common data elements across Universities of Wisconsin counseling centers, to provide benchmark data for each university and to allow for system-level analyses of counseling utilization and impact.

This report shares the latest data from the Counseling Impact Assessment Project (CIAP), initiated by UW counseling directors in 2010, to provide a systematic way to track trends, assess their work, and engage in ongoing quality improvement. This project supports the work done in our counseling centers by providing data and responses from students who continue to find value in the services provided. Trend data shared in this annual report aligns with national research that shows when students improve due to counseling, they are more likely to persist in their education.

The format of this annual report was modified this year to allow for intentional emphasis on key areas that, if left unattended, could negatively impact the excellent work being done within our counseling centers. The report still summarizes annual data and trends over time, but rather than repeat narrative for trends that have been consistent in recent years, the report instead outlines key findings and presents briefer highlights of the core data tracked over time.

The narrative in the body of the report then expands on staffing and salary data that supports a need to more adequately staff counseling centers and provide fair and equitable compensation to their licensed professional staff. Momentum to address the rise in mental health concerns among college students requires strong institutional support and funding to provide services at a level that minimizes the negative impact of mental health on academic performance and retention.

Information is also provided to summarize use of the extended mental health and well-being resources made available through a Universities of Wisconsin contract with Mantra Health that provides increased options for telecounseling, telepsychiatry, YOU at College (a web-based self-help portal dedicated to student health, well-being, and success), and a 24/7 mental health support service available to all students.

A handwritten signature in black ink, reading 'Deirdre Dalsing'.

Deirdre Dalsing, UW-Platteville
Committee Chair

Introduction

Counseling services on university campuses play a critical role in the success of today's students as mental health issues have become more normalized and students continue to seek services in record numbers. Data shared in this report on an annual basis has echoed national reports indicating that more students are attending college with a history of mental health concerns and previous service usage.

As past annual reports have demonstrated, the work done in UW counseling centers positively impacts students' academic performance and supports the development of critical life skills necessary to manage current and future concerns. Students continue to voice support for the core services of individual and group counseling and the equally important work of crisis intervention, prevention education, skills workshops, and campus consultation. Counseling center professionals strive to respond to the evolving mental health and well-being needs of their campus communities. Most services that Universities of Wisconsin students use are provided in-person and on campus, while the availability of supplemental telehealth services has provided an additional option and allowed for increased access for many students.

Note: The data in this report comes from students participating in counseling at UW counseling centers and with third-party telehealth providers—the data and commentary should not be considered to represent the experiences of the general student population.

Methods

The current report summarizes data collected across all 13 universities that comprise the Universities of Wisconsin. The report uses two primary data collection sources summarized in the table below. In addition to these two primary sources of data, counseling center directors responded to survey questions to inform information on service usage and staffing.

Table 1: Measures

Client Information Form (CIF)	
<ul style="list-style-type: none"> A standard intake form created by the Counseling Impact Assessment Committee and first implemented in 2012-2013 	<ul style="list-style-type: none"> Uses items from the Center for Collegiate Mental Health (CCMH), which allows for national comparisons
<ul style="list-style-type: none"> Gathers information about presenting concerns, mental health background, and academic functioning at counseling intake 	<ul style="list-style-type: none"> Consists of varying response scales, depending on type of item
Learning Outcomes and Satisfaction (LOS) Survey	
<ul style="list-style-type: none"> A survey created by the committee for students who use counseling services, administered on a semesterly basis 	<ul style="list-style-type: none"> Includes an overall measure of satisfaction with services and impact of counseling on academic and other areas of life functioning
<ul style="list-style-type: none"> Assesses the extent to which clients perceive counseling as helpful in the context of intrapersonal learning (such as stress management) and academic outcomes 	<ul style="list-style-type: none"> Consists of the response scales Disagree (1) to Strongly Agree (5) and Poor (1) to Excellent (5)

Universities collect Client Information Form (CIF) data as part of routine clinical practice when clients first request services. These data are deidentified before sharing with UW-Stout’s Catalyst office at the end of the academic year and then aggregated for reporting purposes. Learning Outcomes and Satisfaction (LOS) surveys are administered at the end of each semester then aggregated at the end of the academic year.

Table 2: Participation by UW University

	CIF - Intake n = 5,667	LOS - End of Semester n = 1,200
UW-Eau Claire	15% (827)	14% (163)
UW-Green Bay	2% (138)	8% (91)
UW-La Crosse	9% (479)	6% (75)
UW-Madison*	14% (793)	5% (60)
UW-Milwaukee	9% (532)	9% (103)
UW Oshkosh	6% (352)	11% (136)
UW-Parkside	1% (59)	1% (11)
UW-Platteville	7% (366)	12% (147)
UW-River Falls	7% (392)	2% (26)
UW-Stevens Point	9% (530)	6% (70)
UW-Stout	8% (474)	12% (145)
UW-Superior	3% (174)	2% (24)
UW-Whitewater	10% (551)	12% (149)

*UW-Madison contributed to all data sources beginning 2022-23. CIF and LOS data prior to 2022-23 does not include UW-Madison.

2023-24 Report Highlights

The following information highlights key findings from counseling center data collected this year. Tables and graphs of all data referenced in this section are available in the Appendices.

- **Counseling Usage:** Student use of counseling services continues at a high level and has seen little impact from decreases in enrollment across the Universities of Wisconsin in recent years. This is consistent with national trends showing increases in demand for mental health services on college campuses that often run counter to decreases in enrollment. During the 2023-2024 academic year, 14,145 UW students accessed mental health services through UW counseling centers, representing 9.5% of the student population. (See Appendix 1, pp. 24-25.)
- **Demographics:** Female students (57%) remain more likely than male students (35%) to attend counseling, but this year represents a narrowing of that gap with the number of men presenting for counseling outpacing national benchmarks. Students who identify as transgender or other nonbinary gender category continued to grow and accounted for 8% of students attending counseling this year. Over the last 13 years of data collection, we have seen a 28-percentage point increase in usage by students who identify as LGBQ (from 10% to 38%) and a 7-percentage point increase in students who identify with a disability (from 8% to 15%). The percentage of students of color (17%) using counseling has grown by four percentage points over time. (See Appendix 2, pp. 26-30.)

- Presenting Concerns and Academic Stress: Anxiety (76% of counseling clients), stress (67%), and depression (62%) are the top three reasons students seek counseling, remaining consistent over the past several years. Additional concerns that impact academics—procrastination/motivation (47%), low self-esteem/confidence (46%), attention/concentration (40%), and sleep (27%)—are all in the top 10 concerns identified by students. With 48% of all UW students reporting feelings of loneliness in the most recent administration of the National College Health Assessment (ACHA, 2024), it is worth noting that issues related to friends (30% of counseling clients) and shyness/social discomfort (25%) also are voiced by a significant percentage of students as reasons for seeking counseling. (See Appendix 3, pp. 31-33.)
- Mental Health History: The number of UW counseling clients who report a prior mental health history has continued to increase and exceed national averages. For example, 70% of UW counseling clients in 2023-24 reported previous counseling in their lifetime, compared to 61% nationally, and 50% of clients reported a history of being prescribed medication for mental health, compared to 38% nationally. Self-reported safety risk indicators among clients continue to indicate that many UW students who use counseling services experience more serious and complex mental health needs—evidenced by a 12 percentage-point increase in reports of non-suicidal self-injury over the last 12 years, a 12 percentage-point increase in reports of serious suicidal ideation, and 6.4 percentage point increase in those reporting suicide attempts. The percentage of clients reporting these safety risk indicators continues to be higher than national benchmarks reported by the Center for Collegiate Mental Health (CCMH, 2024b) and underscores the continued importance of providing mental health counseling to enhance the well-being and safety of individual students and their university communities. (See Appendix 4, pp. 34-35.)
- Drug and Alcohol Use/Misuse History: The prevalence of problematic alcohol use history among students has been consistent over the last several years, impacting approximately 24% of counseling clients. Since the project started gathering data on substance use, there has been a continued growth in the number of students using marijuana (23% in 2023-24). UW university counseling centers provide screening and support services for students who show evidence of misuse of alcohol or other drugs, but they generally do not provide primary alcohol and other drug treatment. (See Appendix 4, pp. 34-35.)
- Mental Health Outcomes: Students continue to experience improved functioning in multiple areas as a result of participating in counseling. Data from post-counseling surveys this year highlight improvements in overall well-being (reported by 79% of clients), feeling better prepared to address future concerns and achieve goals (82%), and making improvements on the specific issues for which students sought counseling (86%). The results were above the 12-year average on these outcome metrics, which has been the case when availability of appointments is above average, as occurred this year (see Client Satisfaction below). These positive outcomes are also consistent with research on outpatient mental health treatment generally. (See Appendix 5, pp. 36-37.)
- Academic Outcomes: Students struggling with their academics or thinking of leaving school prior to using counseling continue to report that counseling helped improve their academic performance and helped them remain enrolled, consistent with research connecting emotional well-being to GPA, retention, and graduation (Levines, 2024). Among the 35% of students who reported struggling academically prior to counseling, 71% reported improved focus on their academics and 70% reported improved academic performance. Of the 21% who reported thinking of leaving school prior

to counseling, 82% indicated counseling helped them remain in school. This represents an estimated 2,436 students across the Universities of Wisconsin that counseling centers helped retain in 2023-2024, accounting for over \$20 million in saved tuition revenue, consistent with previous years. (See Appendix 5, pp. 38-40.)

- Client Satisfaction: Universities of Wisconsin students attending counseling continue to report very high satisfaction with services and a strong desire for access to services on-campus. Client ratings of appointment availability improved this year, with 91% of clients able to secure their first appointment in a timely manner and 88% reporting access to follow-up appointments in a timely manner. While telecounseling continues to be offered as an option for students through university counseling centers since the pandemic, 92% of clients using counseling services on campus prefer in-person sessions to telecounseling. Clients expressed support for telecounseling availability but not as their primary source of treatment. (See Appendix 6, pp. 41-42.)
- Personnel/Staffing: Staffing levels are a critical factor in a counseling center's ability to provide timely and effective services and retain students who might otherwise leave college early. The average student-to-counselor ratio of 1,328:1 remains above the recommended ratio of 1,000:1 in a high-use environment, and four UW universities remain above the higher recommended threshold of 1,500:1. An additional metric for assessing staffing and service levels, the Clinical Load Index (CLI), showed an average of 107 clients per full-time counselor this year, compared to 112 last year. This is above the national average of 92 for centers nationwide (CCMH, 2024a).
- Staff Retention: After many years of staffing stability, staff retention has now become a critical issue, with 11 UWs turning over 60% or more of their staff in the last five years—and five of those turning over 100% or more. At the same time, pools of applicants are smaller with predominantly newer, unlicensed professionals who need additional supervision before they can work independently. Salaries are reported as the primary reason for staff departures and also the primary barrier to hiring licensed, qualified individuals. Problems recruiting and retaining staff contribute to the challenge of demand-for-services sometimes exceeding capacity, resulting in less student access and decreased effectiveness. An increase in both clinical full-time equivalents (FTEs) and salaries to compete with market demands would allow for more reliable access and overall quality of services to better meet the needs of students seeking care.
- Telehealth Services: In addition to students attending on-campus counseling, an additional 1,807 students attended telecounseling offered through Mantra Health (at 12 UW universities) or Uwill (at UW-Madison). The Mantra contract also includes telepsychiatry services, a 24/7 mental health phone support service, and YOU at College, a personalized well-being platform that directs students toward university-based and online resources to promote student success and well-being. These combined services have increased access to mental health resources by 1) providing support outside typical working hours, 2) improving options available to online students, 3) increasing access to psychiatric providers in geographic areas currently underserved, and 4) expanding the diversity of mental health providers available to students. During the final year of this contract (2024-2025), a peer support service, Togetherall, will be added to the suite of services for all UWs, and five UWs will pilot a new suite of services from Mantra, which adds on-demand daytime services, wellness coaching, and self-guided skills modules to assist students with some of the most common mental health struggles. Additional funding is required for any of these telehealth services to continue being offered beyond 2024-2025.

Personnel/Staffing

Staff Roles and Responsibilities

Mental health professionals working at UW university counseling centers include licensed psychologists, counselors, social workers, and marriage and family therapists. Professional staff provide a range of clinical services to students, including individual, couples, and group counseling as well as case management. Beyond these core clinical services, they also provide mental health expertise on campus committees that address student mental health, well-being, and behavior. A good example of this is membership on behavior intervention teams, CARE teams, or threat assessment teams that exist at all universities to address a continuum of behaviors that range from mildly concerning to high-risk. Counseling center staff also provide individual consultation to faculty and staff when they are concerned about student behavior or well-being. Another longstanding feature of counseling centers is to provide education and prevention programming to faculty, staff, and students in support of student well-being and creating a campuswide culture of care. In recent years, partnerships with athletic departments have increased in response to NCAA mental health guidelines that include an expectation that all student athletes be screened for mental health concerns. This range of activities and responsibilities embeds university counseling center professionals into the fabric of the university community and distinguishes their work from counterparts working in other mental health settings outside the university.

In addition to employing professional credentialed staff, many centers also serve as training sites for graduate students seeking counseling-related degrees and hire staff who are in the process of accruing the clinical hours necessary for their license to practice independently. These individuals provide much-needed expansion of clinical and other service capacity and require weekly clinical supervision. The clinical documentation of unlicensed staff needs to be reviewed and signed by licensed clinicians with proper credentials which, for a supervisor with one supervisee providing 25 clinical hours per week, would involve reviewing 25 clinical notes per week and meeting for one hour of clinical supervision. With the amount of professional staff turnover experienced by counseling centers in recent years (detailed in the next section), some supervisors within UW counseling centers have supervised as many as six clinicians in training at the same time, resulting in approximately 150 notes per week to review. This is a large administrative workload on top of providing the full range of services described above.

Staffing Levels

The number of professional staff relative to university enrollment is a critical indicator of a counseling center's ability to provide timely and effective services. This annual report has been tracking the ratio of students to counselors at UW universities for the past decade, displayed in Figure 1. According to the International Accreditation of Counseling Services (IACS) *Standards for University and College Counseling Services (2023)*, "Reasonable effort should be made to maintain minimum staffing ratios in the range of one FTE professional staff member (excluding trainees) for every 1,000-1,500 students, depending on services offered, other university mental health agencies, evolving service models, the trend for growing demand, and various other factors. Additional measures may be accessed to evaluate necessary staffing for the clinical capacity of the center (i.e., Clinical Load Index [CLI])." (p. 15) A high student-to-counselor ratio results in fewer appointments available for students. Higher ratios also increase the pressure felt by clinical staff to meet student needs without sufficient resources, which can lead to burnout. Note that the student-to-counselor ratio has improved over time but remains above the 1,000:1 ratio that is preferred in a high-use environment. Systemwide, the improved ratio has been the result of increased positions combined with decreased enrollment.

Figure 1: 10-Year Trend: Ratio of Students to Counselors

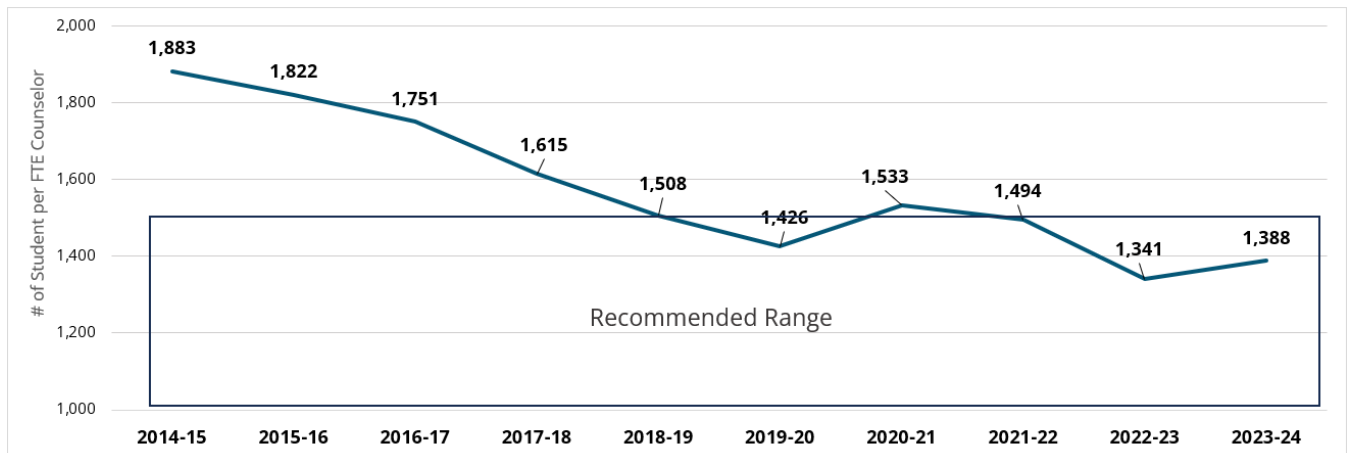


Figure 1 Description: Line graph depicting the student:counselor ratio from 2014/15 to 2023/24: 2014/15 1,883; 2015/16 1,822; 2016/17 1,751; 2017/18 1,615; 2018/19 1,508; 2019/20 1,426; 2020/21 1,533; 2021/22 1,494; 2022/23 1,341; 2023/24 1,328

To illustrate the variability of the student-to-counselor ratio across individual UW universities, Table 3 displays the nine-year trend of students to counselors by university. In 2023-2024, nine UW counseling centers met the 1,500:1 ratio, with four of them meeting the lower 1,000:1 recommended ratio. Four universities remain above the 1,500:1 ratio. This variation leads to significant differences in how many students can be served and the level of service provided across the UWs.

Table 3: Nine-Year Trend: Ratio of Students to Counselors by University

Campus	2015	2016	2017	2018	2019	2020	2021	2022	2023	Trend
Eau Claire	1599	1526	1312	1544	1100	1205	1084	884	889	
Green Bay	1983	2816	2840	2224	1944	2847	2041	1724	1331	
La Crosse	1706	1573	1566	1568	1229	1190	984	1689	1172	
Madison	1636	981	951	830	708	867	902	1417	1125	
Milwaukee	2952	2252	2187	2134	1991	2747	2002	1781	1943	
Oshkosh	1441	1356	1349	1403	1105	1647	997	812	1563	
Parkside	2224	2138	2084	2045	2150	2250	2072	2644	2687	
Platteville	2543	2177	1739	1616	1475	1678	1067	1019	1639	
River Falls	1554	1598	1595	1344	1291	1323	1021	897	847	
Stevens Point	1434	1443	1212	1145	1512	1848	1641	1170	1372	
Stout	1558	1697	1364	1270	949	1107	1672	1008	838	
Superior	1321	1577	947	918	1339	1011	1044	1033	806	
Whitewater	1737	1626	1855	1558	1751	1454	2901	1357	1838	

An additional metric used to provide perspective on appropriate staffing and service levels for counseling centers is the Clinical Load Index (CLI), which was developed through a partnership between the Center for Collegiate Mental Health (CCMH), the International Accreditation of Counseling Services (IACS), and the Association for University and College Counseling Center Directors (AUCCCD). The CLI is a standardized metric that is most easily thought of as the average annual caseload for a full-time counselor at a given center. Instead of focusing exclusively on full-time equivalent (FTE) staffing levels, the CLI considers the actual number of students seeking services (counseling center use) and the amount of “clinical capacity”

(weekly appointment availability) to calculate a score that describes the relationship between the supply and demand for counseling services at any given center. CLI numbers at UW universities are summarized in Table 4, along with other metrics important for assessing counseling center staffing and service levels. The average CLI across UW universities in 2023-2024 was 107, which compares to 92 for centers nationwide (CCMH, 2024a). This equates to the average full-time counselor at a UW counseling center providing services to 107 individual students over the course of an academic year. Note that CLIs across UW counseling centers ranged from a low of 64 to a high of 178.

Table 4: University Breakdown of Utilization, Avg. Sessions, Student/Counselor Ratio, & CLI

University	% of Total Enrollment Served (2023-2024)	Avg. Session Attendance (2023-2024)	Student/Counselor Ratio (2023-2024)	Clinical Load Index (CLI) (2023-2024)
Eau Claire	11.7%	5.5	889	82
Green Bay	8.1%	5.4	1331	94
La Crosse	6.4%	3.6	1172	82
Madison	12.7%	2.8	1125	123
Milwaukee	5.7%	5.6	1943	108
Oshkosh	10.3%	6.6	1563	162
Parkside	3.1%	5.0	2687	85
Platteville	8.9%	3.3	1639	117
River Falls	10.5%	4.1	847	112
Stevens Point	7.1%	6.3	1372	99
Stout	11.2%	6.9	838	91
Superior	8.0%	5.5	806	64
Whitewater	7.1%	5.4	1838	178
All UWs	9.5%	5.1	1388	107

CCMH categorizes CLI scores in ranges including Low (less than 62), Mid (between 62-139), and High (greater than 139) classifications. The Universities of Wisconsin have no counseling centers with a Low CLI, 11 centers with a Mid CLI, and two centers with a High CLI. According to CCMH (2020), Low CLI centers tend to be smaller schools that are more likely to offer traditional services that include full-length intake assessments as the first appointment, rather than briefer, triage appointments to screen for urgency. Students served in Low CLI centers are the most likely to receive weekly individual counseling, have more appointments that are scheduled closer together, and experience more symptom reduction during treatment (CCMH, 2020). The wait for routine counseling services tends to be minimal at Low CLI centers, and individual counseling is the primary mode of treatment. These centers are more operationally flexible, are more likely to be able to serve most students who seek help, and may never run out of capacity during the year.

Most centers at the Universities of Wisconsin (11) are in the Mid CLI range. Mid CLI centers tend to fill up quickly for individual counseling and are likely to struggle with demand exceeding supply as the CLI increases. Mid CLI centers are unable to provide as much weekly individual counseling as Low CLI centers. As centers move from the low to high ends of the Mid CLI zone, they gradually accumulate characteristics of centers managing greater demand with limited supply. This means they are more likely to shift from

traditional hour-long intakes to brief triage screenings, provide case management to refer more students to community resources, and offer a disproportionate amount of “rapid access” services compared to routine treatment. Centers that have gradually moved toward the high end of this zone without commensurate changes to expectations from the university community may be under considerable operational stress. Work stress for centers in this zone is likely to be caused by demand exceeding supply and being unable to fully treat students in need. Centers at the high end of this zone are very likely to place limits on the length of individual treatment through a variety of approaches (such as session limits and/or reduced appointment frequency) and to deliver a broader range of treatments as a result (such as group counseling options; CCMH, 2020).

Two counseling centers within the Universities of Wisconsin operated with High CLIs in 2023-24. Nationally, centers in the high zone are more likely to be at larger universities and to implement clinical systems that maximize efficiency while also clearly limiting access to weekly individual therapy. These centers may be under pressure (as a result of the demand/supply imbalance) to get students in quickly but are also the most likely to provide diluted treatment that is associated with less symptom reduction (poorer outcomes). High CLI centers are more likely to prioritize rapid access services over traditional treatment and have increased crisis intervention demands that require external resources to help manage after-hours. In general, centers in this zone will be managing very high demand that consistently exceeds supply and thus are more likely to provide a range of treatment and referral options for students. Diluted treatment (spreading appointments out, limiting the number of appointments, and shortening appointment lengths), limits on eligibility for care, and other scope-of-service limitations are more common at high CLI centers. Centers across this zone may struggle to, or be unable to, provide weekly individual counseling and will be constantly seeking ways to manage demand and improve efficiency. Those at the highest end of this zone may need to focus almost entirely on rapid-access, crisis stabilization, and external referrals. Work stress in this zone, especially the high-end, will likely be focused on a near constant level of excessive demand for services by students in high levels of distress paired with the inability to provide treatment on site (CCMH, 2020).

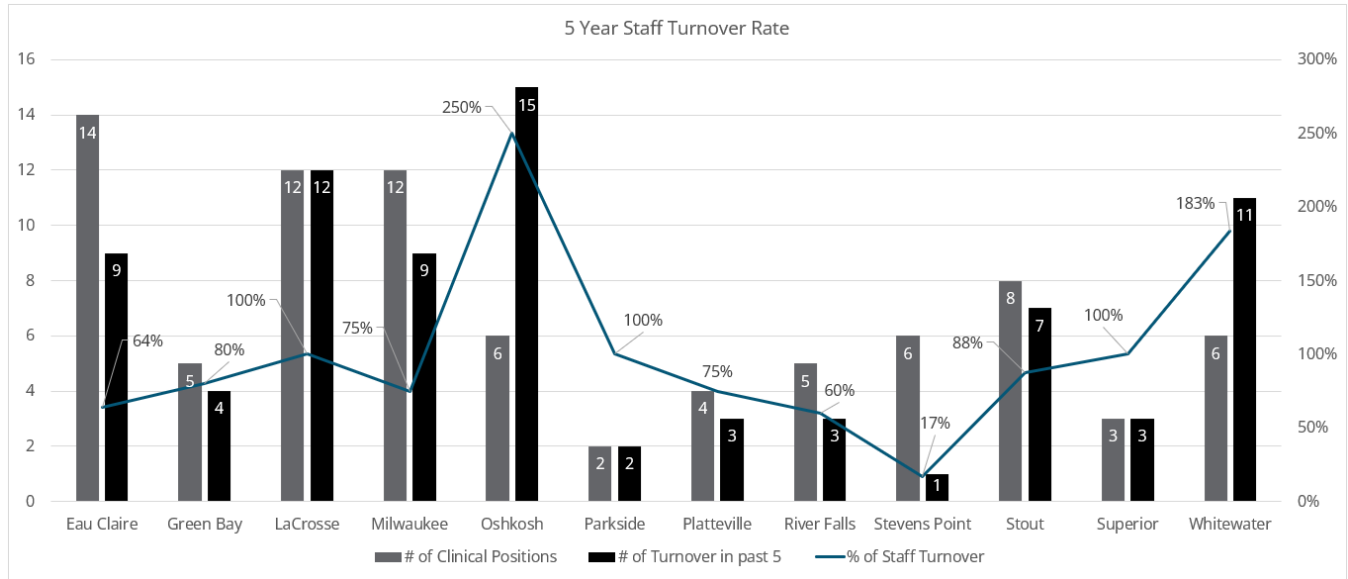
Center use, staffing ratios, and clinical capacity combine to tell a story about what service levels each center can provide to students and the impact that has on staff. As an example, Table 4 demonstrates how two universities can see the same percentage of their student body yet provide a different level of service and experience the demand in the center in different ways. For example, Stevens Point and Whitewater both saw 7.1% of their students last year but, because of different staffing ratios and CLIs, one was able to see students for a greater number of sessions. This and other examples demonstrate how staffing can impact a center’s ability to see clients, the number of sessions clients are likely to have, and the workload placed on clinical staff. Balancing staffing and clinical capacity with the type of service that universities want to provide to their students is a critical conversation that needs to occur at each university.

Staff Retention

In response to anecdotal reports in the past three years across UW counseling centers and centers nationally, counseling center directors were once again surveyed to explore growing concerns about counselor retention and difficulties filling open positions. In 2023-2024, UW counseling centers (not including UW-Madison) had a total of 13 clinical positions turn over, with two universities losing three clinicians, one university losing two clinicians, five universities losing one clinician, and three universities retaining all of their clinicians. This is a slight improvement from the previous year, but still a concerning trend. Examining clinician turnover across the past five years (see Figure 2), two UW counseling centers

experienced an extreme amount of turnover: 250% and 183%, respectively. Five additional counseling centers reported 80% to 100% turnover and four reported 60% to 75% turnover. Only one UW counseling center, Stevens Point, reported low turnover, at 17%, which represented one staff member in five years.

Figure 2: Five-Year Staff Turnover



Directors noted that staff turnover has several operational and clinical impacts, including the following:

- Time demands for recruitment, onboarding, and training
- Reduced ability to serve students
- Loss of critical university knowledge
- Disruption for clients who have to transition to new counselors, with a potential impact on their clinical progress
- Increased clinical supervision demands on the director and other licensed staff
- Increased responsibility/stress on remaining staff
- Lowered staff morale

University decisions to pause rehiring, often due to overall budget constraints that have been impacting UW universities, exacerbates the issues noted above and negatively impacts access to essential counseling services.

Salary concerns were identified as the primary reason counseling center clinicians leave, as well as the main barrier to hiring new clinicians. Table 5 summarizes average starting salaries at UW counseling centers compared to regional and national data published by AUCCCD (2023). Whether looking at starting salaries or overall staff salaries, averages for UW counseling counselors and psychologists lag behind national averages. Comparing overall staff salaries, the average annual salary for a UW licensed counselor was \$61,474, compared to \$70,465 nationally, and the average annual salary for a psychologist was \$79,379, compared to \$87,562 nationally. The discrepancies were slightly less when comparing Midwest salaries but still exist and indicate UW salaries are lower. Additionally, many UW counseling centers primarily hire clinicians on 10-month contracts for budget savings, resulting in even lower pay than annual base salaries.

Table 5: Average Salaries for University Counselors and Psychologists

Position	Starting Salary Averages ¹		Overall Salary Averages		
	UW	National	UW	Midwest	National
Clinical Counselor	\$56,887	\$64,564	\$61,474	\$67,919	\$70,465
Psychologist	\$75,000	Insufficient data	\$79,379	\$80,390	\$87,562
Director	No first-year directors	\$117,600	\$108,409	\$100,841 ²	\$110,156

¹Starting salary data is not broken down by region in the AUCCCD report, so no Midwest average is available.

²Limited Midwest director data and a low salary outlier in the AUCCCD report skews this average.

It is also important to note that UW counseling center staff rarely leave for other universities but rather for mental health settings in their local communities where salary discrepancies are typically even wider. While data varies by region, online recruitment platforms list the average salary for psychologists in WI as ranging between \$102,612 (Indeed) and \$110,921 (ZipRecruiter). For mental health providers licensed as professional counselors, clinical social workers, or marriage and family therapists, the average salary in Wisconsin is \$84,476 (ZipRecruiter). All of these averages exceed state, regional and national averages for mental health providers in higher education.

Not visible in the salary data, and likely an outcome of budget considerations our universities face, is the fact that only six UW counseling centers have a psychologist on staff. The lack of psychologists is a concern because they possess advanced training in assessment, clinical supervision, and therapy, and they are able to provide clinical supervision to multiple disciplines (for example, counselors, social workers, and marriage & family therapists), which is not the case for other mental health professionals. This reduction in the diversity of professional credentials further exacerbates the stress put on staff in the counseling center environment and represents a culture shift from prior decades when more psychologists were employed at university counseling centers.

As noted previously, UW-Stevens Point has experienced the lowest staff turnover in its counseling center, losing only one clinical staff member to retirement in the past five years—and that staff member worked in the counseling center for approximately 20 years. According to their director, above-average salaries and a traditional clinical service model have played a significant role in staff satisfaction and retention. Stevens Point clinical staff salaries are higher than UW averages and are more consistent with Midwest and national averages. In addition, the Stevens Point counseling center strives to provide services to as many students as possible without sacrificing components of effective therapy. With a student staff ratio around the system average (1,372:1) and a CLI in the middle of the mid-range (99), Stevens Point was able to serve just over 7% of its student population for an average of six sessions per student (see Table 4)—a level of service that can lead to reliable clinical improvements. The ability to provide effective therapy, even in times of high demand, contributes significantly to job satisfaction and, ultimately, staff retention.

In addition to overall staff turnover, there has also been a concerning turnover trend among counseling center directors at UW counseling centers—with nine of 13 centers changing directors in the last five years. The stress of consistent staff turnover has undoubtedly made the director position more difficult. In

addition to clinical and supervisory roles, directors are administratively responsible for supporting a healthy work environment, managing budgets with limited resources, and advocating for equitable and accessible services on campus, often with only indirect influence on university-level decision-making. While average UW director salaries are similar to regional and national benchmarks (see Table 5), it is notable that first-year counseling center director salaries in the most recent national survey (AUCCCD, 2023) were higher than the average for all directors (\$117,600 vs. \$110,156), suggesting that universities are having to pay more to recruit professionals into director roles. Attention to work stressors and salary compression at the director level will be important factors to monitor to gain more stability in counseling center leadership in the future.

Implications

As evidenced above, recruitment and retention are key challenges facing UW counseling centers. Prioritizing staff retention must begin with equitable pay and attention to factors that contribute to workload and burnout of all counseling center staff, including directors. The combination of below-market pay, workloads that are very demanding, and clients who are experiencing more serious and complex mental health needs all contributes to staff recruitment and retention issues, which in turn impacts the level and quality of care provided to students. Improving the recruitment and retention of clinicians will result in improved access to care, help stabilize student-to-counselor ratios and clinical capacity, and result in better outcomes for students.

The combined impact of increased demand for services without commensurate increases in staffing, as well as challenges with recruiting and retaining staff, results in rising caseloads for clinicians and modifications to clinical models in counseling centers, according to a collaborative analysis by AUCCCD and CCMH focusing on counseling center staff turnover (Gorman & Scofield, 2023). The prospect of high demand for services is likely to continue, as students continue to report high levels of distress in both high school (CDC, 2024; WI Dept. of Public Instruction, 2024) and university surveys. On the university level, 19% of UW students who completed the National College Health Assessment (ACHA, 2024) in spring 2024 scored in the “high distress” range on a psychological screening instrument. This is double the percentage of enrolled students seeking services at UW counseling centers (9.5%), leading to concern that some students who need the most support may be unable to access it. For centers with high student:counselor ratios and/or CLI scores, continual adjustments to manage the supply/demand imbalance will increase caseloads, negatively impact treatment outcomes, and create more unhealthy work environments that put further strain on staff recruitment and retention.

Supplemental Telemental Health and Well-Being Services

One effort to ease demand on university counseling center staff and provide increased student access to mental health resources has come from the addition of telemental health and well-being services. In spring 2022, Governor Evers allocated \$5 million in American Rescue Plan Act (ARPA) funds to the Universities of Wisconsin to help address student mental health needs that were exacerbated by the pandemic. With this allocation of funds, a three-year contract for telemental health and well-being services began in Fall 2022 for 12 UW universities (excluding UW-Madison, where another telehealth vendor is in use) to provide additional resources to students. Through the contract, three services have been provided:

- 1) YOU at College, a self-help platform incorporating online and university-based resources.
- 2) UW Mental Health Support 24/7, an emotional support and crisis phone service.
- 3) Mantra Health, a telecounseling and telepsychiatry service that acts as a supplement to on-campus treatment services.

The same services are available across UW universities, with each university determining the best way to present the services to students based on their local university context.

Use and Impact

YOU at College - In total, over 4,000 student accounts have been created within the individualized YOU at College portal across the 12 participating universities. As an upstream resource and the “digital front door” to both on-campus and online services available to students, this tool has the broadest applicability to the student population. Below are the top priorities students established during their onboarding within the YOU platform, which informs the content that is recommended to them:

- Sleep
- Stress & Anxiety
- Academics and Grades
- Fitness & Nutrition
- Mindfulness and Balance
- Relationships and Making Friends
- Purpose & Meaning

Table 6 summarizes all-time metrics since implementation in December 2022.

Table 6: YOU at College Use

Total Student Accounts	University Resources Viewed	Self-Check Assessments Completed	Referrals to Mantra	Crisis Button Clicks
4,038	2,440	1,710	539	366

It is notable that the platform seems to be succeeding in its goal to direct students to resources to meet their needs, with over 2,000 university resources viewed and several hundred students finding other components of the telehealth contract, such as Mantra Health and the 24/7 support service. As a personalized resource, students also completed self-check assessments to monitor their progress on identified areas of concern. Given its use by only 4,000 students to date, additional opportunity exists to market this tool to more students during the final year of the contract.

UW Mental Health Support 24/7 - Students were able to access 24/7 mental health support via phone, text, or chat during the 2023-24 academic year, with a total of 238 contacts via these three methods (see Table 7).

Table 7: UW Mental Health Support 24/7 Utilization July 2023-June 2024

	Crisis	Information Only
Calls	78	26
Chats/Texts	117	17

Demographics of students accessing the 24/7 service were slightly different than students who accessed university counseling services, with 25% identifying as students of color (higher than percentages accessing university counseling) and 21% identifying as LGBTQ (lower than percentages accessing university counseling). The most common issues students identified when contacting the 24/7 service were similar to top concerns identified by students attending counseling:

- Anxiety/stress
- Relationship concerns
- Academics
- Depression
- Suicidal ideation

Mantra Health – A primary goal for contracting with a telehealth provider was to increase access to counseling services, including providing greater treatment capacity, serving a wider range of student identities, and providing more flexible scheduling in terms of hours of operation. In addition, the contract provides expanded access to psychiatric providers, which responds to the challenge of limited local access to providers faced by many UW universities.

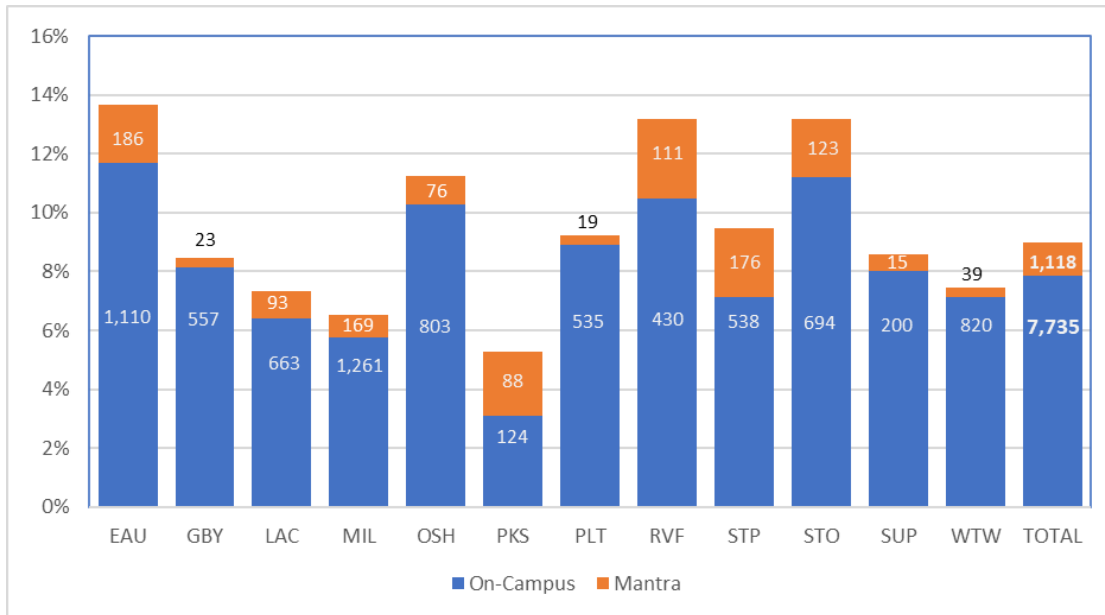
For the 2023-24 academic year, 1,253 unique students attended 6,549 appointments with Mantra Health counseling and psychiatry services (see Table 8). The average number of sessions attended for Mantra counseling (4.71) was similar to the average session attendance for on-campus counseling (5.1) across UWs.

Table 8: Mantra Health Service Use July 2023-July 2024

Care Type	Unique Students Served	Completed Appointments	Average Session Attendance
Telecounseling	1,118	5,271	4.71
Telepsychiatry	314	1,278	4.07

As depicted in Figure 3, a total of 7,735 students attended counseling on campus at the 12 UW universities on the Mantra contract, accounting for 7.9% of their respective student populations. With Mantra Health providing telecounseling to an additional 1,118 students, that percentage increased to 9.0%. As a supplemental service, Mantra Health provided approximately 13% of the total counseling services utilized by UW students in 2023-24, with university counseling services providing 87% of the care that students used.

Figure 3: Number and Percentage of Students Using On-Campus and Mantra Counseling



In terms of client demographics, one goal for adding telehealth services was to increase the diversity of provider identities through Mantra Health to attract a wider range of students seeking services. Mantra providers do represent greater diversity of racial/ethnic and sexual orientations and, as illustrated in Table 7, Mantra Health served slightly higher percentages of students of color and LGBQ students compared to on-campus services. Compared to 2022-23, both UW university and Mantra providers saw greater percentages of students with marginalized identities.

Table 9: Client Demographics – Mantra and University Services

Category	UW University %	Mantra %
White	83%	81%
Students of Color	17%	19%
Heterosexual	62%	57%
LGBQ	38%	41%
Disability Status	15%	4%

Finally, regarding flexible scheduling options offered by extended telehealth services, 37% of Mantra Health appointments occurred on weekends or after 5 p.m. on weekdays during 2023-2024. Also, since the contract was implemented, 290 students have accessed services from outside Wisconsin, extending the option of treatment to more enrolled students who would otherwise not have access to university-provided services.

While treatment outcomes of telehealth services compared to on-campus services are measured using different metrics, students receiving counseling from Mantra Health reported benefits similar to students attending counseling on campus. Client satisfaction with their telehealth providers has been high, with an

average provider fit rating of 8.69 on a scale of 1-10, and average visit ratings of 4.92 on a 1-5 scale. Ninety-four percent of students indicate that their provider has helped them achieve their goals, and 63% of students who initially scored in the moderate to severe range on a common measure of anxiety symptoms (GAD-7) experienced clinically significant improvement by their final assessment.

Taken together, the data indicate that the addition of telehealth options has resulted in more and different students accessing counseling services, provided greater provider diversity and appointment flexibility, and produced positive outcomes for students. This suggests that telemental health and well-being services are having positive impact on some of the service gaps previously identified by the 12 UW universities served.

UW-Madison Uwill Use Summary – Similar to Mantra Health’s telecounseling services, UW-Madison implemented supplemental telecounseling services during the 2022-23 academic year through the Uwill platform to bolster the options available for students seeking mental health services at UW-Madison’s Mental Health Services (MHS). In 2023-2024, students could either be referred to Uwill by MHS staff or could self-refer. Examples of common reasons for referrals to brief teletherapy through Uwill included: 1) student out of state or out of country; 2) flexibility with schedule (that is, sooner available appointments, availability outside MHS business hours, online booking with provider of choice); and 3) timing of year (such as student graduating at end of term). Students were initially offered enough “Uwill credits” for three, 30-minute sessions with an ability to request additional sessions.

From July 2023 to June 2024, 689 students registered for Uwill and completed a total of 1,434 sessions for an average of 2.08 sessions per registered student. Unlike Mantra Health’s 45- to 60-minute sessions, Uwill sessions are 30 minutes in length. Sessions were conducted in 16 total languages, which is a unique feature of Uwill’s offering. The most common focus areas for sessions included self-esteem, academic concerns, and social isolation or loneliness.

Future Directions

The 2024-2025 academic year will mark the final year of the current Mantra Health contract. With funds remaining from the original \$5M allocation, stakeholders chose to make two modifications to the telehealth contract in the final year. First, all 13 UW universities have entered into a one-year contract with Togetherall, an anonymous online peer-support service that is moderated by mental health professionals. This service is intended to provide an alternative level of support for students who may not want to access professional counseling, whose issues are subclinical in nature, or who want additional 24/7 support outside whatever other services they might be using. Additionally, five UW universities (UW-Eau Claire, UW-Parkside, UW-Platteville, UW-River Falls, and UW-Stevens Point) will pilot an expanded service offered by Mantra Health entitled *Whole Campus Care*, which adds on-demand daytime support via video, wellness coaching for students whose issues are assessed to be subclinical, and self-guided skills modules to assist students with some of the most common mental health struggles.

Students and university stakeholders have perceived benefits to these additional services and are advocating for base funding increases to sustainably support the broad range of mental health services, both on-campus and through telehealth, which support the needs of current and future students.

Conclusion

This report documents both the successes and challenges of providing mental health counseling services at UW universities. The data presented over multiple years from university-based services, and more recently from telehealth services, consistently demonstrate the important role mental health services play in supporting student success. As Universities of Wisconsin counseling centers continue to experience high levels of student use, and students accessing care continue to report more serious and complex mental health needs than national averages, the need to provide an adequate range of mental health and well-being services has never been more critical. Providing these services supports student retention efforts—as evidenced by the estimated \$20 million in tuition revenue saved annually from students who say counseling played a role in keeping them enrolled.

Addressing issues with counseling staff recruitment and retention have become high priorities, as has offering supplemental services to provide more options to students at any point along the mental health continuum. As biennial budget planning gets underway in 2024-2025, both Universities of Wisconsin Administration and the Board of Regents are advocating for a base funding increase of \$11M annually to meet these identified needs. This level of support would make important strides toward ensuring that students have access to a well-funded and stable set of services they can rely on in times of need, to support their well-being and success. Counseling center professionals, in collaboration with other university partners, will continue to be on the forefront of supporting these goals.

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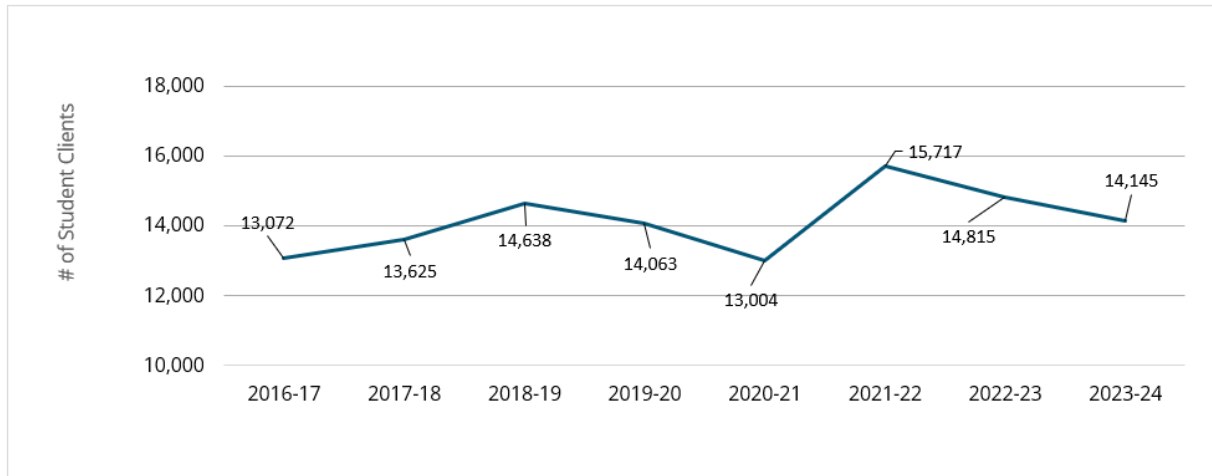
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Appendices

Appendix 1: Counseling Use

Information about counseling use is gathered via survey from counseling centers at the end of each academic year. Students were counted as using services in 2023-2024 if they attend at least one session with a staff counselor between July 1, 2023, and June 30, 2024.

Counseling Center Use, Eight-Year Trend



Counseling Center Use, 2023-2024

Total Number of Clients	Total University Enrollment ¹	Percentage of Student Population Attending Counseling	Average Sessions Attended
14,145	148,942	9.5%	5.1

¹Fall 2023, 10th day headcount of students eligible for counseling services (including branch campuses)

Number and Percentage of Students Attending Counseling, by University Over 5 Years

University	Total Counseling Clients					% of Total Enrollment 2023-24	5-Year Change in Use
	2019-20	2020-21	2021-22	2022-23	2023-24		
Eau Claire	1,206	910	1,162	1,079	1,110	11.7%	-8.0%
Green Bay	509	391	528	657	557	8.1%	9.4%
La Crosse	996	742	1,091	826	663	6.4%	-33.4%
Madison	4,600	5,523	6,689	6,358	6,410	12.7%	39.3%
Milwaukee	1,564	1,150	1,546	1,405	1,261	5.7%	-19.4%
Oshkosh	1,348	1,401	1,401	888	803	10.3%	-40.4%
Parkside	277	139	144	119	124	3.1%	-55.2%
Platteville	596	390	531	651	535	8.9%	-10.2%

River Falls	558	387	524	620	430	10.5%	-22.9%
Stevens Point	495	483	534	520	538	7.1%	8.7%
Stout	781	537	694	743	694	11.2%	-11.1%
Superior	185	160	150	215	200	8.0%	8.1%
Whitewater	948	791	723	734	820	7.1%	-13.5%
TOTAL	14,063	13,004	15,717	14,815	14,145	9.5%	0.6%

Appendix 2: Client Demographic Data

Taken from the Client Information Form (CIF), the following standard demographic items are requested prior to the first session with each counseling client. They are presented below, with benchmark comparisons to national counseling center data collected by the Center for Collegiate Mental Health (CCMH, 2024b) during the 2022-2023 academic year (the most recent available).

Demographic Trends Summary

Item	12-Year Change	2012/13 to 2023/24	Lowest	Highest	UWs 2023-24	CCMH 2022-23
Demographic Trend Data						
Female	-6.3%		57.0%	70.0%	57.0%	72.0%
Male	0.3%		27.5%	35.0%	35.0%	25.0%
Transgender/Non-Binary	7.4%		0.6%	8.0%	8.0%	1.0%
White	-2.0%		83.0%	86.5%	83.0%	65.0%
Students of Color	4.0%		13.0%	17.0%	17.0%	35.0%
Heterosexual	-23.5%		62.0%	85.5%	62.0%	67.0%
LGBQ	28.2%		9.8%	38.0%	38.0%	43.0%
Registered Disability	7.3%		7.0%	15.0%	15.0%	12.0%

NOTE: 12-year change column is represented as percentage point change, subtracting the percentage of students in each category in 2012-13 from the percentage in 2023-2024.

Demographic Trends Detail

Item	2012-13	2014-15	2016-17	2018-19	2020-21	2022-23	2023-24
Female	63.3%	65.6%	66.9%	64.0%	70.0%	65.0%	57.0%
Male	34.7%	32.7%	30.9%	33.0%	27.5%	29.0%	35.0%
Transgender/Self-identify	2.0%	1.7%	2.2%	3.0%	2.5%	7.0%	3.0%
White	85.0%	86.0%	86.5%	84.0%	85.0%	84.0%	83.0%
Students of Color	13.0%	14.1%	13.5%	16.2%	15.0%	16.0%	17.0%
Heterosexual	85.5%	84.6%	82.6%	78.0%	70.0%	63.0%	62.0%
LGBQ	9.8%	15.4%	15.4%	22.0%	30.0%	37.0%	38.0%
Registered Disability	7.7%	8.8%	8.5%	7.0%	10.9%	13.0%	15.0%

Complete Client Demographic Data - 2023-2024

	UW Counseling Clients (n= 5,667)	Universities of Wisconsin Population (n=162,531)	CCMH (n=185,114)
Academic Status (%) (n = 5,310)			
1 st Year Undergraduate	26%	18%	24%
2 nd Year Undergraduate	24%	17%	19%
3 rd Year Undergraduate	20%	17%	19%
4 th Year Undergraduate	18%	22%	15%
5 th Year Undergraduate	3%	-%	4%
Graduate/Professional Degree	8%	16%	16%
Other	1%	-%	1%
Gender Identity (%) (n = 5,428)			
Woman	57%	45%	62%
Man	35%	55%	33%
Transgender	3%	-%	1%
Self-identify	5%	-%	5%
Race/Ethnicity (%) (n = 4,768)			
African American/Black	3%	3%	10%
American Indian or Alaskan Native	<1%	<1%	1%
Asian American/ Asian	4%	2%	12%
Hispanic/ Latino(a)	5%	8%	11%
Multi-racial	3%	4%	5%
Native Hawaiian or Pacific Islander	<1%	<1%	<1%
White	83%	76%	59%
Other	<1%	2%	2%
Sexual Orientation (%) (n = 4,634)			
Bisexual	18%	-%	14%
Gay	3%	-%	3%
Heterosexual	62%	-%	67%
Lesbian	4%	-%	2%
Questioning	3%	-%	4%
Self-identify	11%	-%	1%
GPA [Mean (SD)]	3.30 (1.583)	-	-
International Student (% Yes)	2%	7%	9%
First-Generation Student (% Yes)	26%	31%	24%
Age [Mean (SD)]	21 (3.610)	21-24 AVG	22 (4.13)
US Military Service (% Yes)	2%	2%	1%
Traumatic/Stressful Military Experience [% Yes (n)]	<1% (1720)	-% (-)	36% (1,229)
Athlete (% Yes)	7%	-	4%
Transfer Student (% Yes)	2%	3%	9%

NOTE: Ns for specific UW Counseling Client variables are less than the total N, as clients can choose not to respond to all demographic items. Universities of Wisconsin population data that is not collected or reported is indicated by a "-" throughout this table. Because of rounding conventions, the sum of percentages may not equal exactly 100%.

	UW Counseling Clients (n = 5,667)	CCMH (n = 185,114)
Current Housing (%) (n = 5,231)		
On Campus	52%	39%
Off Campus	46%	58%
Other	1%	1%
Who Do You Live With (%) (n = 5,231)		
Roommate(s)	54%	67%
Alone	15%	14%
Spouse, partner, or significant other	12%	10%
Parent(s) or guardian(s)	9%	11%
Family other	3%	6%
Children	4%	2%
Other	1%	1%
Relationship Status (%) (n = 4,401)		
Single	57%	61%
Serious dating or committed relationship	38%	34%
Married	2%	4%
Divorced	<1%	<1%
Civil union, domestic partnership, or equivalent	3%	<1%
Widowed	<1%	<1%
Separated	<1%	<1%
Current Financial Situation (n = 5,285)		
Always stressful	13%	12%
Often stressful	23%	20%
Sometimes stressful	38%	36%
Rarely stressful	21%	23%
Never stressful	6%	9%
Registered Disability (n = 5332)		
(% Yes)	15%	12%
If Yes, Which Category- Check all that apply (%) (n = 813)		
Attention Deficit / Hyperactivity disorder	40%	50%
Difficulty Hearing	3%	3%
Specific Learning Disability	11%	13%
Mobility Impairments	3%	4%
Health Impairment / Condition	9%	12%
Psychological Disorder / Condition	25%	30%
Visual Impairments / Difficulty Seeing	2%	3%
Traumatic Brain Injury	1%	2%
Cognitive Difficulties/Intellectual Disability	4%	4%
Difficulty Speaking/Language Impairment	1%	1%
Autism Spectrum Disorder	8%	8%
Other	14%	15%

	UW Counseling Clients (n = 5,667)	CCMH (n = 185,114)
Religious/Spiritual Preference (%) (n = 4,202)		
Christian	18%	17%
Catholic	12%	10%
Agnostic	1%	1%
Atheist	12%	13%
Self-identify	27%	28%
Buddhist	<1%	2%
Jewish	<1%	2%
Muslim	<1%	2%
Hindu	4%	4%
No preference	25%	21%
Hours of Work Per Week (%) (n = 3,638)		
0	45%	41%
1-5	7%	6%
6-10	11%	11%
11-15	11%	10%
16-20	12%	13%
21-25	6%	7%
26-30	3%	4%
31-35	1%	2%
36-40	2%	3%
40+	2%	3%

NOTE: Because of rounding conventions, the sum of percentages may not equal exactly 100%.

Learning Outcome and Satisfaction Survey Demographics

The demographics below represent the subset of counseling clients who completed the Learning Outcome and Satisfaction (LOS) survey at the end of each semester. They can be compared against CIF demographics to assess the representativeness of clients completing the survey.

	LOS Survey (n = 1,200)
Academic Status (%) (n = 1,097)	
Freshman/First year	229 (21%)
Sophomore	247 (23%)
Junior	257 (21%)
Senior	232 (21%)
Graduate/Professional Degree Student	113 (10%)
Other	19 (2%)
Gender Identity (%) (n = 1,094)	
Woman	715 (65%)
Man	238 (22%)
Transgender	51 (5%)
Self-identify	91 (8%)

	LOS Survey (n = 1,200)
Race/Ethnicity (%)	(n = 1,094)
African American/ Black	19 (2%)
American Indian/ Alaskan Native	9 (1%)
Asian American/ Asian	61 (6%)
Hispanic/ Latino(a)	50 (5%)
Native Hawaiian/ Pacific Islander	1 (<1%)
Multi-racial	26 (2%)
White	921 (84%)
Self-identify	7 (1%)
Age [Mean (SD)]	21.93 (7.95)
Number of Sessions [Mode]	6

NOTE: Ns for specific LOS demographic variables are less than the total N, as clients can choose not to respond to all items. Because of rounding conventions, the sum of percentages may not equal exactly 100%.

Appendix 3: Client Presenting Concerns and Academic Stress

Also taken from the Client Information Form (CIF), the following items are asked prior to the first counseling session for on-campus services (not telehealth). These items are unique to UW counseling centers, and therefore there are no national counseling center benchmark comparisons to share.

Presenting Concern Trends Summary

Item	12-Year Change	2012/13 to 2023/24	Lowest	Highest	UWs 2023-24
Presenting Concerns					
Anxiety	16.1%		59.9%	76.0%	76.0%
Stress	2.3%		59.0%	69.0%	67.0%
Depression	7.9%		54.1%	67.1%	62.0%
Procrastination	11.0%		36.0%	50.0%	47.0%
Low self-esteem	8.5%		37.5%	47.0%	46.0%
Attention	2.6%		30.0%	44.0%	40.0%
Problems related to school or grades	-3.2%		26.0%	45.3%	39.0%
Friends	5.4%		24.6%	32.0%	30.0%
Sleep Difficulties	3.7%		23.3%	31.3%	27.0%
Eating Behavior	8.2%		15.8%	28.0%	24.0%
Social Discomfort/Shyness	8.4%		17.6%	26.0%	26.0%

NOTE: 12-year change column is represented as percentage point change, subtracting the percentage of students in each category in 2012-13 from the percentage in 2023-2024.

Presenting Concern Trends Detail


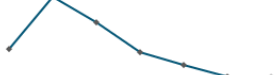
Item	2012-13	2014-15	2016-17	2018-19	2020-21	2022-23	2023-24
Anxiety/fears/worries (other than academic)	59.9%	65.4%	73.3%	61.0%	76.0%	75.0%	76.0%
Stress/stress management	64.7%	66.7%	68.3%	59.0%	69.0%	69.0%	67.0%
Depression/sadness/mood swings	54.1%	64.1%	67.1%	58.0%	66.0%	64.0%	62.0%
Procrastination/motivation	36.0%	42.1%	45.9%	38.0%	50.0%	48.0%	47.0%
Low self-esteem/confidence	37.5%	42.3%	46.3%	39.0%	47.0%	45.0%	46.0%
Attention/concentration	37.4%	38.2%	38.9%	30.0%	41.0%	44.0%	40.0%
Problems related to school/grades	42.2%	45.3%	44.7%	26.0%	40.0%	43.0%	39.0%
Friends/roommates/dating concerns	24.6%	29.9%	29.7%	26.0%	32.0%	28.0%	30.0%
Sleep difficulties	23.3%	29.4%	31.3%	26.0%	30.0%	28.0%	27.0%
Eating behavior	15.8%	20.3%	21.0%	20.0%	26.0%	28.0%	24.0%
Shyness/social discomfort	17.6%	21.6%	24.2%	20.0%	21.0%	25.0%	26.0%

Complete Presenting Concern Data – 2023-2024

Items	UW Counseling Clients (n = 5,667)
Anxiety/fears/worries (other than academic)	77%
Stress/stress management	68%
Depression/sadness/mood swings	64%
Procrastination/motivation	48%
Low self-esteem/confidence	47%
Attention/concentration	41%
Problems related to school or grades	39%
Friends/roommates/dating concerns	31%
Sleep difficulties	27%
Shyness/social discomfort	26%
Eating behavior/weight problems/eating disorders/body image	25%
Anger/irritability	22%
Choice of major/career	16%
Grief/loss	14%
Other	14%
Childhood abuse (physical, emotional, sexual)	14%
Marital/couple/family concerns	12%
Physical symptoms/health (headaches, stomachaches, pain)	8%
Self-injury (cutting, hitting, burning)	7%
Alcohol/drug use	6%
Sexual assault/dating violence/stalking/harassment	6%
Sexual orientation	5%
Gender identity	5%
Cultural adjustment	3%
Seeing/hearing things others don't	2%
Bullying/harassment	1%
Prejudice/discrimination	1%
Urge to injure/harm someone else	1%

Students were asked to report the degree to which their academics were being negatively impacted by their mental health. Students responded to each item on a scale from 1 (Strongly Disagree - SD) to 5 (Strongly Agree - SA).

Academic Stress Trends Summary

Item	12-Year Change	2012/13 to 2023/24	Lowest	Highest	UWs 2023-24
I am having a hard time focusing on my academics (agree/strongly agree)	-4.7%		47.0%	57.0%	47.0%
I am thinking about leaving school (agree/strongly agree)	-2.3%		9.0%	15.6%	9.0%

Academic Stress Trends Detail

Item	2012-13	2014-15	2016-17	2018-19	2020-21	2022-23	2023-24
I am having a hard time focusing on my academics (agree/strongly agree)	51.7%	52.2%	53.6%	50.0%	57.0%	51.0%	47.0%
I am thinking about leaving school (agree/strongly agree)	11.3%	15.6%	13.5%	11.0%	10.0%	9.0%	9.0%

Complete Academic Stress Data – 2023-2024

Subscale Item	SD/Disagree	Neutral	Agree/SA	UWs Mean (n)
I am struggling with my academics	48%	23%	30%	3.60 (5,303)
I am thinking of leaving school	79%	12%	9%	2.13 (5,297)
My academic motivation and/or attendance are suffering	42%	20%	38%	3.86 (5,296)
I am having a hard time focusing on my academics	31%	22%	47%	4.35 (5,285)

NOTE: Because of rounding conventions, the sum of percentages may not equal exactly 100%.

Appendix 4: Mental Health and Alcohol/Drug Use History

For the items below, students were asked to indicate the frequency with which they have had various experiences in their lifetime. The UWs and CCMH columns represent the percentages of students who reported having the experiences at least one time in their lifetime.

Mental Health and Alcohol/Drug Use History Trends Summary

Item	12-Year Change	2012/13 to 2023/24	Lowest	Highest	UWs 2023-24	CCMH 2022-23
Prior Treatment						
Counseling	22.8%		47.2%	70.0%	70.0%	61.0%
Medication	16.7%		32.3%	49.0%	49.0%	38.0%
Hospitalization	4.8%		6.2%	11.0%	11.0%	9.0%
Threat to Self						
Non-Suicidal Self-Injury	11.9%		20.1%	32.0%	32.0%	28.0%
Serious Suicidal Ideation	12.0%		24.0%	36.0%	36.0%	34.0%
Suicide Attempt(s)	6.4%		6.6%	13.0%	13.0%	11.0%
Drug and Alcohol						
Felt the need to reduce your alcohol or drug use	-1.1%		24.0%	26.0%	24.0%	26.0%
Marijuana Use	8.6%		14.4%	23.0%	23.0%	25.0%

NOTE: 12-year change column is represented as percentage point change, subtracting the percentage of students in each category in 2012-13 from the percentage in 2023-24.

Mental Health and Alcohol/Drug Use History Trends Detail

Item	2012-13	2014-15	2016-17	2018-19	2020-21	2022-23	2023-24
Prior Treatment							
Counseling	47.2%	52.5%	55.7%	57.0%	65.0%	68.0%	70.0%
Medication	32.3%	39.9%	42.2%	40.0%	47.0%	48.0%	49.0%
Hospitalization	6.2%	9.9%	10.0%	10.0%	11.0%	10.0%	11.0%
Threat to Self							
Non-suicidal Self-Injury	20.1%	27.6%	30.2%	31.0%	30.0%	28.0%	32.0%
Serious Suicidal Ideation	24.0%	34.0%	35.7%	34.0%	36.0%	35.0%	36.0%
Suicide Attempt(s)	6.6%	10.7%	11.4%	12.0%	12.0%	11.0%	13.0%
Drug and Alcohol							
Felt the Need to Reduce Your Alcohol or Drug Use	25.1%	25.9%	25.6%	26.0%	26.0%	24.0%	24.0%
Marijuana Use	14.4%	17.3%	18.5%	20.0%	21.0%	23.0%	23.0%

Complete Mental Health and Alcohol/Drug History Items – 2023-2024

Items	Never	1 Time	2-3 Times	4-5 Times	> 5 Times	UWs % (n)	CCMH % (n)	
Been hospitalized for mental health concerns	89%	7%	3%	1%	<1%	11% (5,417)	9% (117,955)	
Felt the need to reduce your alcohol or drug use	76%	8%	9%	2%	6%	24% (4,706)	26% (106,448)	
Others expressed concern about your alcohol or drug use	87%	8%	3%	1%	1%	13% (5,415)	14% (106,385)	
Received treatment for alcohol or drug use	98%	1%	1%	<1%	1%	2% (5,497)	2% (111,093)	
Purposely injured yourself w/o suicidal intent (such as cutting, hitting, burning, etc.)	68%	5%	7%	4%	16%	32% (4,952)	28% (115,761)	
Seriously considered attempting suicide	64%	12%	13%	2%	8%	36% (5,029)	34% (113,355)	
Made a suicide attempt	87%	8%	3%	1%	1%	13% (5,029)	11% (113,636)	
Considered causing serious physical injury to another person	94%	2%	2%	<1%	1%	6% (5,002)	6% (112,991)	
Intentionally caused serious physical injury to another	98%	1%	1%	<1%	<1%	2% (5,001)	1% (112,281)	
Someone had sexual contact with you w/o your consent	73%	13%	8%	2%	5%	27% (5,437)	27% (112,082)	
Experienced harassing, controlling, and/or abusive behavior from another person (e.g., friend, family member, partner, authority figure)	60%	6%	8%	3%	23%	41% (5,403)	39% (113,715)	
Experienced a traumatic event that caused you to feel intense fear, helplessness, or horror	53%	17%	15%	5%	10%	47% (3,573)	47% (109,824)	
Items	Never	Prior to College	After Starting College	Both	UWs % (n)	CCMH % (n)		
Attended counseling for mental health concerns	30%	27%	19%	24%	70% (5,485)	61% (112,646)		
Taken a prescribed medication for mental health concerns	51%	13%	15%	22%	50% (5,434)	38% (112,455)		
Items	None	Once	Twice	3 to 5 Times	6 to 9 Times	> 10 Times	UWs % (n)	CCMH % (n)
In the last 2 weeks, how many times have you used marijuana?	77%	5%	4%	6%	3%	5%	23% (5,056)	25% (97,277)

NOTE: Because of rounding conventions, the sum of percentages may not equal exactly 100%.

Appendix 5: Mental Health and Academic Outcomes

The Learning Outcomes and Satisfaction (LOS) Survey is administered to clients at the end of the semester, asking them about a variety of mental health outcomes, including the extent to which counseling helped them make improvements on intrapersonal skills, academic functioning, and well-being.

Mental Health and Well-Being Outcome Trends Summary

Item	12-Year Change	2012/13 to 2023/24	Lowest	Highest	UWs 2023-24
Client Outcomes: Interpersonal and Emotional Well Being					
I made improvements on the specific issues for which I sought counseling.	2.6%		80.0%	86.0%	86.0%
I am better prepared to work through future concerns and achieve my goals.	5.6%		75.0%	82.0%	82.0%
I increased my ability to think clearly and critically about my problems.	4.2%		74.0%	82.0%	82.0%
Percentage of students who self-reported an increase in well-being from the beginning of services to the end of services.	-3.4%		78.0%	82.4%	79.0%
Percentage of students who rated the effectiveness of therapy in helping students with their problems as good, very good, excellent.	-1.4%		83.0%	93.0%	87.0%

NOTE: 12-year change column is represented as percentage point change, subtracting the percentage of students in each category in 2012-13 from the percentage in 2023-24.

Mental Health and Well-Being Outcome Trends Detail

	2012-13	2014-15	2016-17	2018-19	2020-21	2022-23	2023-24
I made improvements on the specific issues for which I sought counseling	83.4%	86.0%	82.0%	80.0%	83.0%	83.0%	86.0%
I am better prepared to work through future concerns and achieve my goals	76.4%	80.2%	76.8%	75.0%	78.0%	78.0%	82.0%
I increased my ability to think clearly and critically about my problems	77.8%	78.7%	76.3%	74.0%	79.0%	78.0%	82.0%
Percentage of students who self-reported an increase in well-being from the beginning to the end of services	82.4%	82.0%	81.0%	80.0%	82.0%	78.0%	79.0%



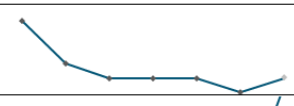

	2012-13	2014-15	2016-17	2018-19	2020-21	2022-23	2023-24
Percentage of students who rated the effectiveness of therapy in helping with their problems as Good, Very Good, or Excellent	88.4%	90.0%	83.0%	85.0%	93.0%	83.0%	87.0%

Complete Mental Health and Well-Being Outcome Data – 2023-2024

Subscale Items	SD/Disagree	Neutral	Agree/SA	UWs Mean (n)		
I made improvements on the specific issues for which I sought counseling.	5%	9%	86%	4.23 (1,179)		
I have started to live a healthier lifestyle in at least one area (such as sleep, diet, exercise, alcohol/drug use).	7%	21%	72%	3.95 (1,138)		
I have improved my ability to manage stress.	7%	20%	74%	3.94 (1,173)		
I am better prepared to work through future concerns and achieve my goals.	5%	13%	82%	4.12 (1,172)		
I increased my self-confidence and/or self-esteem.	8%	24%	67%	3.86 (1,149)		
The counseling process helped me understand cultural, family, ethnic, and/or community differences.	9%	32%	59%	3.75 (1,003)		
I have gained a greater understanding of myself or a clearer sense of identity.	6%	13%	81%	4.11 (1,158)		
I increased my ability to think clearly and critically about my problems.	5%	12%	82%	4.12 (1,165)		
I improved my communication skills.	6%	19%	75%	4.03 (1,141)		
Total Subscale	6%	19%	75%	4.02 (1,189)		
Item	Poor	Fair	Good	Very Good	Excellent	UWs Mean (n)
My level of well-being when I started counseling.	35%	46%	16%	3%	<1%	1.87 (1,154)
My level of well-being now.	4%	18%	50%	24%	4%	3.07 (1,154)
	Decline		No change		Improvement	
Overall perceived change in well-being	2% (18)		19% (220)		79% (916)	

NOTE: Because of rounding conventions, the sum of percentages may not equal exactly 100%.

Academic Outcome Trends Summary

Item	12-Year Change	2012/13 to 2023/24	Lowest	Highest	UWs 2023-24
Client Outcomes: Academics					
% of students who reported they were struggling academically prior to counseling.	-3.0%		33.0%	38.0%	35.0%
Of those who reported struggling academically, the % of students who reported increased focus as a result of counseling.	5.0%		62.0%	71.0%	71.0%
% of students who reported they were thinking of leaving school prior to counseling.	-4.0%		20.0%	25.0%	21.0%
Of those who reported they were thinking of leaving school, the % of students who reported that counseling helped them to stay in school.	3.2%		72.0%	82.0%	82.0%

NOTE: 12-year change column is represented as percentage point change, subtracting the percentage of students in each category in 2012-13 from the percentage in 2023-24.

Academic Outcome Trends Detail

Item	2012-13	2014-15	2016-17	2018-19	2020-21	2022-23	2023-24
% of students who reported they were struggling academically prior to counseling	38.0%	36.0%	38.0%	36.0%	37.0%	33.0%	35.0%
% of students who reported increased focus as a result of counseling	66.0%	63.0%	62.0%	64.0%	67.0%	63.0%	71.0%
% of students who reported they were thinking of leaving school prior to counseling	25.0%	22.0%	21.0%	21.0%	21.0%	20.0%	21.0%
% of students who reported that counseling helped them to stay in school	78.8%	77.0%	79.0%	76.0%	77.0%	72.0%	82.0%

Complete Academic Outcome Data – 2023-2024

Items	SD/Disagree	Neutral	Agree/SA	UWs Mean (n)
Counseling has increased my academic motivation and/or class attendance.	17%	39%	43%	3.35 (1,084)
Counseling has helped me to focus better on my academics.	12%	32%	56%	3.57 (1,106)
Counseling has helped with my academic performance.	13%	36%	52%	3.49 (1,095)
Counseling has helped me stay at school.	14%	30%	56%	3.61 (1,045)
Prior to counseling, I was struggling with my academics.	47%	18%	35%	2.83 (1,147)
Prior to counseling, I was thinking of leaving school.	68%	11%	21%	2.25 (1,140)

NOTE: Because of rounding conventions, the sum of percentages may not equal exactly 100%.

For the table below, students were separated by those who reported that they were or were not struggling with their academics prior to counseling, to compare how counseling affected academic performance for each group.

Academic Outcomes: Clients Struggling with Academics vs. Clients not Struggling

Scale Items		SD/Disagree	Neutral	Agree/SA	Overall UWs Mean (n)
Counseling has increased my academic motivation and/or class attendance.	Struggling Academically	13%	26%	61%	3.68 (396)
	Not Struggling	20%	47%	33%	3.14 (678)
	Total (average)				3.35 (1,084)
Counseling has helped me to focus better on my academics.	Struggling Academically	10%	20%	71%	3.82 (396)
	Not Struggling	13%	39%	48%	3.40 (691)
	Total (average)				3.57 (1,106)

Scale Items		SD/Disagree	Neutral	Agree/SA	Overall UWs Mean (n)
Counseling has helped with my academic performance.	Struggling Academically	12%	18%	70%	3.79 (398)
	Not Struggling	13%	47%	40%	3.31 (683)
	Total (average)				3.49 (1,095)
Counseling has helped me stay at school.	Struggling Academically	11%	17%	72%	3.93 (383)
	Not Struggling	16%	38%	47%	3.40 (651)
	Total (average)				3.61 (1,045)

NOTE: Because of rounding conventions, the sum of percentages may not equal exactly 100%.

For the table below, students were separated by those who reported that they were or were not thinking of leaving school at the beginning of counseling to compare whether counseling services impacted retention.

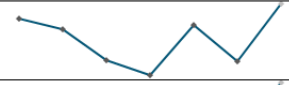
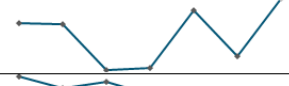
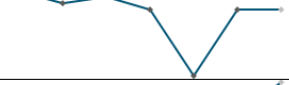


Retention Impact: Clients Thinking of Leaving School vs. Not Thinking of Leaving School

Counseling has helped me stay at school.	SD/Disagree	Neutral	Agree/SA	UWs Mean (n)
Thinking of Leaving	9%	9%	82%	4.11 (240)
Not Thinking of Leaving	16%	36%	48%	3.44 (791)
TOTAL (Average)	13%	23%	65%	3.61 (1,045)

NOTE: Because of rounding conventions, the sum of percentages may not equal exactly 100%.

Appendix 6: Client Satisfaction

Client Satisfaction Trends Summary

Item	12-Year Change	2012/13 to 2023/24	Lowest	Highest	UWs 2023-24
Client Satisfaction					
I was able to get my first appointment in a timely manner	2.1%		81.0%	91.0%	91.0%
I was able to get follow-up appointments in a timely manner	2.1%		81.8%	88.0%	88.0%
It is important for me to have counseling services located on campus	-1.4%		90.0%	96.4%	95.0%
I would return to the counseling center again	1.1%		91.0%	94.0%	94.0%
I would recommend counseling services to a friend	0.0%		92.0%	94.0%	94.0%

NOTE: 12-year change column is represented as percentage point change, subtracting the percentage of students in each category in 2012-13 from the percentage in 2023-24.

Client Satisfaction Trends Detail

Item	2012-13	2014-15	2016-17	2018-19	2020-21	2022-23	2023-24
I was able to get my first appointment in a timely manner	88.9%	87.5%	83.1%	81.0%	88.0%	83.0%	91.0%
I was able to get follow-up appointments in a timely manner	85.9%	85.8%	81.8%	82.0%	87.0%	83.0%	88.0%
It is important for me to have counseling services located on campus	96.4%	95.5%	96.0%	95.0%	90.0%	95.0%	95.0%
I would return to the counseling center again	92.9%	91.6%	92.6%	91.0%	92.0%	92.0%	94.0%
I would recommend counseling services to a friend	94.0%	93.6%	93.3%	92.0%	94.0%	93.0%	94.0%

Counseling Satisfaction – 2023-2024

Items	SD/Disagree	Neutral	Agree/SA	UWs Mean (n)
The office staff were helpful in providing information and direction.	2%	6%	92%	4.39 (1,138)
This counselor displayed sensitivity/acceptance to individual differences (e.g. culture, gender, ethnicity, etc.).	2%	2%	96%	4.65 (1,125)
This counselor helped me clarify my concerns and provide guidance.	3%	3%	94%	4.54 (1,148)
This counselor supported me in making my own decisions and reaching my personal goals.	2%	5%	93%	4.54 (1,139)
The counseling environment was warm and inviting.	2%	4%	95%	4.63 (1,140)
It is important for me to have counseling services located on campus.	2%	3%	95%	4.71 (1,126)
I would return to the counseling center again.	3%	3%	94%	4.64 (1,125)
I would recommend counseling services to a friend.	3%	3%	94%	4.65 (1,133)
Total Subscale	2%	4%	94%	4.60 (1,157)

NOTE: Because of rounding conventions, the sum of percentages may not equal exactly 100%.

Appointment Availability – 2023-2024

Item	SD/Disagree	Neutral	Agree/SA	UWs Mean (n)
I was able to get my first appointment in a timely manner.	6%	4%	91%	4.42 (1,138)
I was able to get follow-up appointments in a timely manner.	5%	7%	88%	4.37 (1,116)

NOTE: Because of rounding conventions, the sum of percentages may not equal exactly 100%.

Overall Satisfaction – 2023-2024

Item	Poor	Fair	Good	Very Good	Excellent	UWs Mean (n)
Overall effectiveness of counseling in helping with my problems.	4%	9%	35%	37%	15%	3.50 (1,153)
Overall quality of the services I received.	2%	4%	19%	37%	37%	4.03 (1,153)

NOTE: Because of rounding conventions, the sum of percentages may not equal exactly 100%.