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An Examination of the Mental Health Services Provided to Students at Western Michigan University

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A Comparative Study of Mental Health Services at
Western Michigan University to Similar Michigan Universities

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Western Michigan University
Abstract

Introduction: All college students will experience stress related to academic demands, changing social situations and new environments. For some students, these multiple stressors can create overwhelming challenges. Students who are not able to receive needed support may be unable to successfully navigate the world of higher education, and are at higher risk of developing mental illness. The purpose of this study is to assess mental health services available at Western Michigan University (WMU) in comparison to other similar size universities within the state.

Method: The information used in this study was collected via several methods. Information was gathered from ten medium to large Michigan universities; which compares student populations, and the number of counselors and psychiatrists employed. This data was obtained from phone calls to college counseling departments, examining staff directories and from a review of the literature. Web based research of prevalent student run mental health groups on college campuses was also completed.

Results: The information collected reveals that WMU is ranked sixth for student to counselor ratio out of the ten schools analyzed. For the ratio of the number of students to psychiatrists, WMU is also ranked sixth out of ten. WMU was the only university that did not provide student-run support groups or registered student organizations devoted to mental health.

Conclusion: WMU lacks important mental health services. Hiring more psychiatrists and counselors, providing student groups that heighten awareness, and supplying students with more information may increase the mental health of students in a positive way. Future studies should examine students’ opinions on their universities mental health services and what they feel would help them the most.
Introduction

An individual’s college years are among the most influential times in a young adult’s life. Throughout college, students experience intellectual, emotional and social growth, but also experience many pressures such as fitting in, getting along with roommates, exploring sexuality and a myriad of issues that involve the transition from adolescence to adulthood (Kadison & DiGeronimo, 2004). All college students experience academic stress, changing social situations, insecurity, and new environments. These can all be challenges affecting the mental health of students. With all of these increasing stressors in a college student’s life, many individuals develop or must deal with the symptoms of a mental illness.

Mental health services provided by colleges are a vital service; individuals with depression are 20.4 times more likely to commit suicide than the general population (Cedex, 2008). Due to a lack of studies based in Michigan, this author reviewed a study of Virginia Colleges in the 2008 through 2009 school year, eight suicides were completed in Virginia public colleges alone (Manahan, Richard, Davis & Flynn, 2011). Of college students from eighteen to twenty-four years old, suicide is the second leading cause of death (Suicide Prevention Resource Center, 2004). Suicide occurs at a rate of 6.5 to 7.5 per 100,000 among college students (Silverman, Meyer, Sloane, Raffel & Pratt, 1997). It has also been discovered that 15% of graduate students and 18% of undergraduate students have contemplated attempting suicide in their lifetimes, and of those students 40-50% of the same students reported multiple episodes of serious suicidal ideation (Drum, Denmark & Smith, 2009). One of the most important facts that demonstrates why college mental health services are so important is that most students commit suicide are not receiving counseling services (Gallagher, R.P., 2012).
It is important that collegiate staff are educated and provide services to help young adults learn how to lead healthy and constructive lives. To achieve the goal of global health, one cannot ignore mental health (Klara, Christodoulou, Jenkins, Tspias, Lecic-Tosevski, & Bhugra 2012). Lack of preventative mental health services for students could have long lasting implications. The purpose of this study is to identify the current mental health resources provided at WMU in comparison with other universities within Michigan and what WMU can do to improve their services.

**Method**

Information was gathered from ten medium to large Michigan Universities; that compares student populations, and the number of counselors and psychiatrists employed. Data was obtained from phone calls to college counseling departments, examining online staff directories and from a review of the literature. The information gathered on the student populations was the approximate number of both undergraduate and graduate students enrolled in the fall of 2014 semester. The information was then used to calculate the ratios of counselors to students and psychiatrists to students. Web based research of prevalent student run mental health groups on college campuses was also completed.

**Results**

The data collected reveals that WMU is the fifth largest in student population, including undergraduate and graduate students, of the ten Michigan universities examined. In fall 2014 WMU student population was approximately 24,000 with eight counselors and one psychiatrist on staff at the counseling center. Data analysis also reveals that WMU currently provides a student to counselor ratio of 1: 3,000 and a student to psychiatrist ratio of 1: 24,000. However, WMU was ranked six out of ten in the ratio of the number of counselors to students and was also
ranked sixth out of ten in the ratio of the number of psychiatrists to students. Please see Table 1 for a comparison of data from ten of Michigan’s medium to large universities, including student populations, number of counselors on staff, the number of psychiatrists on staff and the ratios comparing counseling and psychiatric staff to the number of students. Interns or students in graduate programs serving as counselors were not counted because they do not have professional degrees and are not permanent members of the staff. A counselor is an individual who has a degree that allows them to help guide and help individuals; these can be a variety of degrees, such as in social work and psychology (Sapko n.d.). A psychiatrist is an individual who must have his/her doctorate degree in medicine with a concentration in the diagnosis and treatment of mental illness ("Definition of Psychiatrist", 2014).
Table 1

Michigan University Student Populations, the Number of Counselors and Psychiatrists on Staff and the Ratio to Students

<table>
<thead>
<tr>
<th>University</th>
<th>Approximate Student Population (Undergraduate and Graduate)</th>
<th>Number of Counselors on Staff</th>
<th>Number of Psychiatrists on Staff</th>
<th>Ratio of Counselors on Staff to Students</th>
<th>Ratio of Psychiatrists on Staff to Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Michigan State University</td>
<td>49,000</td>
<td>13</td>
<td>3</td>
<td>1: 3,769</td>
<td>1: 16,333</td>
</tr>
<tr>
<td>University of Michigan</td>
<td>43,000</td>
<td>24</td>
<td>2*</td>
<td>1: 1,791</td>
<td>1: 21,500</td>
</tr>
<tr>
<td>Wayne State University</td>
<td>31,000</td>
<td>13</td>
<td>1</td>
<td>1: 2,384</td>
<td>1: 31,000</td>
</tr>
<tr>
<td>Grand Valley State University</td>
<td>25,000</td>
<td>12</td>
<td>1*</td>
<td>1: 2,083</td>
<td>1: 25,000</td>
</tr>
<tr>
<td>Western Michigan University</td>
<td>24,000</td>
<td>8</td>
<td>1</td>
<td>1: 3,000</td>
<td>1: 24,000</td>
</tr>
<tr>
<td>Eastern Michigan University</td>
<td>23,000</td>
<td>8</td>
<td>1</td>
<td>1: 2,875</td>
<td>1: 23,000</td>
</tr>
<tr>
<td>Central Michigan University</td>
<td>20,000</td>
<td>10</td>
<td>2</td>
<td>1: 2,000</td>
<td>1: 10,000</td>
</tr>
<tr>
<td>Oakland University</td>
<td>20,000</td>
<td>4</td>
<td>1**</td>
<td>1: 5,000</td>
<td>1: 20,000</td>
</tr>
<tr>
<td>Ferris State University</td>
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<td>0</td>
<td>1: 3,500</td>
<td>0: 14,000</td>
</tr>
<tr>
<td>Saginaw Valley State University</td>
<td>10,000</td>
<td>3</td>
<td>0</td>
<td>1: 3,333</td>
<td>0: 10,000</td>
</tr>
</tbody>
</table>

*One additional nurse practitioner in psychiatric medicine

** Part time employee

Discussion

Counseling and psychiatric services are an important part of a well-rounded university experience; they provide supports for learning to cope with and function in stressful environments. One of the best ways WMU can help students is to provide them with adequate
counseling and psychiatric staff. As of November 2014, students at WMU are currently being put on a wait-list before receiving regular counseling services (Sindecuse Health Center, personal communication, November 6, 2014). The authors (Kadison & DiGeronimo, 2004) of The Campus Mental Health Crisis report that mental health services are often underfinanced, understaffed and generally unequipped to handle the number of students who desperately need help. One way that WMU can improve services is to expand the counseling and psychiatric staff so that students can receive mental health services in a timely manner. It is important to ensure a diversity of counselors and psychiatrists that reflect the demographic of the student population, because it is vital for the student to feel comfortable with the person from which they are seeking help (Hall, Guterman, Lee, Little, 2002). Currently, the majority of WMU’s counseling staff are white females, which does not appropriately reflect WMU’s student population. It often takes individuals who require mental health services several tries to find the counselor who suits them best (Smith, 2014).

It can become difficult and frustrating to seek out a counselor without the proper information and resources. This author’s own person experience during the data collection process revealed a reluctance on the part of university counseling staffs to provide information, specifically on waiting lists or staffing. The WMU counseling desk receptionist stated “I’m not comfortable sharing that information” when asked about the waiting list to regularly see a counselor. Many other universities had to first “check with their managers” or voiced concerns before sharing information on the number of counselors and psychiatrists staffed. The WMU counseling staff did not return phone calls or emails about request to share waitlists. Due to the lack of verified data, this author received anecdotal statements from students, stating they had waited from three weeks to two months to receive counseling services. This author calls for a
better access and sharing of information related to counseling and psychiatric resources. It is difficult to gauge the need to expand services without cooperation from counseling centers. Without better spreading of counseling and psychiatric information students may not know where to seek help and may continue without the mental health services they need.

Another mental health service that WMU does not currently provide is a student group or a registered student organization dedicated to mental health advocacy or support. Two common mental health groups are National Alliance on Mental Illness (NAMI) on Campus, and Active Minds. NAMI helps individuals find treatment, support, research, and raise awareness (NAMI on Campus, n.d.). Active Minds is another national organization with chapters in almost every major Michigan University including Central Michigan University, University of Michigan, Michigan State University, and Eastern Michigan University. In fact, every university in this study, except WMU, has a current chapter of Active Minds on their campus (Find a Chapter, n.d.). Active Minds is a student group that promotes speaking openly about mental health, reducing the stigma surrounding mental health issues, and educating individuals (About Us, n.d.).

In addition to the education that can be received by attending a student group, more information on mental health should be provided by WMU in the student dormitories and around campus for students. It is common that the student dormitories and campus have information posted or programs such as sex education or flue prevention, but rarely mental health. More information such as flyers and pamphlets should be posted and provided for students. Topics such as symptoms, where to receive help, fighting the stigma of mental health, and that receiving mental health treatment can improve a student’s quality of life are all valuable topics to provide for students. There are many resources for students to help them manage their mental health.
Organizations such as American College Health Association, Campus Health and Safety and Suicide Prevention Resource Center contain helpful information, specifically towards student needs.

**Conclusion**

WMU currently offers mental health services to students, but it is a resource that, if expanded upon, would greatly benefit students. Mental health services are an important asset college staff should provide for their students; as important as flu shots and sex education. WMU may not be the leader in campus mental health services, but there are steps that can be taken to make WMU a supportive learning environment for all students. Hiring more psychiatrists and counselors, providing student groups that provide awareness, and supplying students with more information can increase the campus’s mental health in a positive way. With a more comprehensive approach to mental health services all college students can access the full benefits of their education.

References


