#### Secrets We Don’t Want to Keep in Counseling Services

**Snapshot of Fall 2017 Trinity Student Clients**

* 276 individual students sought at least one counseling session during the fall 2017 semester, 14.5% more than during the fall 2016 semester.
* 64% of clients identified as female.
* 93% indicated that they sought counseling for a personal or interpersonal concern.
* 32% indicated that they sought counseling because they were in trouble academically. 49% indicated that their concerns were causing moderate to severe academic trouble.
* 60% indicated that they had previously seen a mental health professional elsewhere (not CS), either before college, after starting college, or both.
* 27% reported a previous diagnosis of depression; 26% reported a previous diagnosis of an anxiety disorder.
* 30% indicated that they had taken a prescription medication for mental health reasons (not ADD/ADHD), either before college, after starting college, or both.
* Over 5% reported having been hospitalized at least once for mental health concerns.
* 9% reported having attempted suicide at least once.

**Other Data about Trinity Student Clients**

* Between 2002-2003 and 2016-2017:
* The number of individual clients seen annually increased by 83%.
* The proportion of undergraduates seen annually doubled (8.5% to 17.1%).
* The number of individual counseling sessions provided annually doubled.
* During 2016-2017 the average number of sessions per client was 3.3, with 89.7% of clients being seen for six or fewer sessions.
* 32.1% of 2016-2017 clients indicated that they were “in crisis today” at their initial consultation, a notable increase from the previous five years, which ranged from 16.1% to 24.1%.
* The number of urgent sessions during fall semesters has increased by 50% since 2013.
* 11.1% of 2016-2017 clients reported having seriously considered suicide

within the 30 days preceding their initial consultation.

* Among the undergraduates who received their diploma in December 2016 and May 2017, 33.2% had been a client at some point during the past five years.
* 92% of a sample of 2016-2017 clients indicated that their experience with their counselor was either very satisfactory or more satisfactory than unsatisfactory. 86% reported much or some improvement. 98% would either definitely or probably refer a friend to Counseling Services.
* The most frequently cited outcomes of counseling among that same sample of clients were:
* Improvement in managing anxiety
* Improvement in solving/coping with problems
* Improved mood (reduced depression)
* Gaining a clearer sense of identity
* Improved relationships
* Increased self-confidence
* Strengthened stress management skills
* Clarified personal values, beliefs, or attitudes
* Increased likelihood of continuing/graduating from Trinity
* Living a healthier lifestyle (re: sleep, exercise, diet, alcohol and other drug use)
* Improved academic performance

**National Data**

The Center for Collegiate Mental Health is the best source of comprehensive data on college counseling center clients. The CCMH 2017 Annual Report is based on data from 147 counseling centers, 161,000+ clients, almost 3,600 clinicians, and over 1.2 million appointments. It reports data for the 2016-2017 year and trends for the last seven years.

* Anxiety and depression are the two primary reasons for students seeking counseling. Anxiety passed depression several years ago.
* 64% of clients identified as female.
* 57.2% of clients had previous counseling for mental health concerns (reflecting annual increases for seven years).
* 34.2% had taken medication for mental health concerns (reflecting annual increases for seven years).
* 9.8% had been hospitalized for mental health concerns.
* 10% had made a suicide attempt.
* Upward trends were noted for measures of depression, generalized anxiety, and social anxiety, with a downward trend for alcohol use.
* Lifetime prevalence rates of “threat-to-self” characteristics (non-suicidal self-injury, serious suicidal ideation, and suicide attempts) have increased for the seventh year in a row.
* Average length of treatment = 4.5 sessions.

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