EXECUTIVE SUMMARY

This report contains the results of a pilot study that explores the range of psychosocial needs of students attending Historically Black Colleges and Universities (HBCUs) and the resources available to and training needs of the counseling center personnel who serve them. The results indicated that students are dealing with a variety of mental health issues (60%), with acute stress and generalized anxiety being the most frequently occurring on a measure of well-being; have been exposed to two or more traumatic experiences before the age of 18 for which they have never received treatment (80%); and they are just as likely to use the counseling center to address financial and relationship problems as issues related to emotional and mental well-being (28.6%). Conversely, counseling personnel revealed that while they are aware of the types of mental health issues commonly encountered by college students, they are not familiar with counseling modalities that are culturally-centered and relevant to this population. Furthermore, counselors revealed that barriers to the provision of services include: disproportionate staff to student ratios; limited funding and resources; and high levels of stigma associated with the receipt of counseling services. While the sample sizes for this study were small, it is obvious from this pilot data that more research is needed and creative methods must be employed to further identify the psychosocial needs of students attending HBCU’s and improve the operations of counseling centers. The report from this pilot study concludes with recommendations for achieving these objectives.
BACKGROUND

Most research on college student mental health is conducted on the campuses of predominately white institutions. Unfortunately, much of this research does not address the unique mental health issues encountered by African American college students. Due to the small number of African American students included, there is limited empirical research available in this area.

In 2007, the National Leadership Council on African American Behavioral Health (NLC) proposed to document the mental health needs of African American college students enrolled at HBCU’s and translate that information into guidelines for the development of effective interventions and the improvement of mental health services provided to them. In addition, it was believed that this would lead to development of strategies to reduce the stigma associated with addressing mental health in this segment of the African American community by identifying a unique approach to documenting the needs of this underserved population.

The goals of the study were to:

1. Bring awareness to the mental health needs of students attending Historically Black Colleges and Universities;
2. Gain greater understanding of types of services currently provided;
3. Promote the understanding of culturally-centered services that HBCU’s could incorporate into their practices to address the unique psychosocial needs of the students they serve; and
4. Develop guidelines for the development of client need-informed delivery systems.

These goals were achieved by engaging in the following activities:

1. Development and implementation of the HBCU Student Psychosocial Needs Assessment
2. Development and implementation of the HBCU Counseling Center Personnel Survey
3. Recommendations for development of a HBCU Culturally Centered Service Delivery System
The expected outcomes were: increased student utilization of campus mental health services; increased knowledge of the mental health issues that negatively impact psychosocial functioning; and increased understanding of the importance of providing services that are culturally centered and client-need informed.

It should be noted that the initial proposal indicated that all four-year Historically Black Colleges and Universities would be included in the study (N=97). However, this was later determined to be unfeasible and the project revised to be a pilot. The sample size was reduced to student participation from three schools: Alabama State University, Huston-Tillotson University, and Morehouse College. Counseling Center personnel participants were from Alabama State University, Florida A&M University, Huston-Tillotson University, Morehouse College, North Carolina A&T, and North Carolina Central University.

The small sample size limited the statistical methods available for use, so the results from the pilot study are reported in the form of descriptive statistics.

THE HBCU STUDENT PSYCHOSOCIAL NEEDS ASSESSMENT AND COUNSELING CENTER SURVEY

In the past fifteen years, there has been an increase in the number of students with and the severity of, mental health problems on college and university campuses across the United States (Benton et al, 2003; Kitzrow, 2003). Specific mental health problems most often cited as increasing included depression, anxiety, suicidal ideation and suicide, stress, sleep deprivation, and eating disorders (Benton et al, 2003; Kitzrow, 2003; Gallagher, 2005).

A survey of 366 counseling center directors in colleges and universities across the United States substantiated these claims. Of the counseling center directors who responded, 95% reported that they saw an increase in the number of students coming to counseling who were already on prescribed psychiatric medications, 96% believed that the increase of students with more serious problems is a concern that should be aggressively addressed by their respective institutions, and 42.8% of them believed their clients had severe psychological problems that required attention beyond the scope of college counseling center capabilities (Gallagher, 2005).

While this information is very important and necessary for the development of interventions to address the mental health needs of college students, a major limitation in the current body of research is the dearth of information pertaining to African American college students as a distinct group or the organizational structure and program characteristics of counseling centers on the campuses of Historically Black Colleges and Universities.
A review of the literature addressing the mental health of African American college students shows differences between this group and the general population related to recognition of need for services, stigma tolerance, and the use of mental health services.

So, Gilbert, and Romero (2005), reported from their study (n=134) of African American students at a Historically Black College (HBCU) that the more likely students were to recognize their own needs, the more likely they were to have greater stigma tolerance and confidence in mental health practitioners. These changes in attitude then resulted in greater use of mental health services.

With the exception of the So et al article, most empirical studies of mental health issues in African American college students have been conducted on the campuses of majority white institutions and only address issues such as service utilization patterns, students’ perception of counselors with regard to race/ethnicity, and student attitudes toward counseling. There is little information about the specific mental health problems experienced by African American college students, nor the efforts made by HBCUs to address the increase in mental health issues on campus. The purpose of this study was to serve as a starting point for future research in this area.

**Study Design:**

This needs assessment is a pilot study that used internet-based survey research methods to collect data relevant to the psychosocial needs of students attending HBCU’s and the organizational needs of counseling center personnel at these institutions. Descriptive statistics is used to present the results from the collected data.

**Theoretical Framework:**

The theoretical framework for the study is an integration of systems theory and organizational psychology. Systems theory provides a structure for the integration of the Student Assessment and the Counseling Center Personnel Survey because it can be used to analyze and describe phenomena that work in conjunction to produce some result. Furthermore, the principles of organizational psychology, which is the science examining the relationship between individuals and their work environment, provide an additional lens for framing the results from the Counselor Survey. Those principles include: (1) the identification and improvement of attitudes and behaviors that affect employee performance through the use of feedback systems and training; (2) evaluation of job design (3) motivational factors; (4) organizational development and restructuring, as well as; (5) team performance.
METHODS

Instruments:

Two internet-based surveys that would allow students and counselors secure, individual access were created for this study. This method was chosen because it allowed for ease of dissemination, increased the probability of obtaining participation by students who may not have utilized counseling center services at their institution, and afforded an extra measure of privacy for those students who might find discomfort with completing a pen and paper copy of the document for fear of the information falling into the wrong hands.

At the time of the data collection the instruments for the study (HBCU Student Psychosocial Needs Assessment & the Counseling Center Personnel Survey) had not been validated. However, at the end of the survey respondents were asked to provide feedback relative to the design and clarity of the instrument. This data may be analyzed at a later date in order to make adjustments to the original instrument.

The Student Survey was designed to collect data relative to the well-being of students, knowledge and use of available campus resources, opinions regarding the use of counseling, and the types of counseling-related services they would like to see offered by their institution. The survey was hosted on the Survey Monkey website and SSL encryption was purchased for an additional fee to ensure the highest level of security. Fifty-eight (58) items were included in the instrument and the average time to complete it was approximately thirty (30) minutes.

The Counseling Center Personnel Survey was designed to collect data relative to the training and educational background of participating counselors, the service provision models utilized (e.g., guidance counseling, psychotherapeutic, hybrid, and outsourcing), the awareness of culturally-centered interventions, especially those targeting African Americans, and educational outreach efforts. The instrument contains thirty-six (36) items and the average time to complete it was approximately fifteen (15) minutes.

Permissions:

Upon completion of the survey instruments, an Institutional Review Board (IRB) packet was submitted to the University of Texas at Austin. Confidentiality agreements, as well as statements indicating participant right to withdraw from the project were included in the packet. Additionally, it was indicated that there would be referral information specific to each institution as well as access to counselors for all participants. After receiving approval, additional permissions were obtained from the participating institutions.
Recruitment:

Most HBCU’s have a small number of Counseling Center Personnel. When initial plans were outlined to include all of the institutions, telephone calls were made to 49 of the 97 to inquire about the size of their staff. Many indicated that there were 1-5 staff members who provided counseling services to students. The counselors (N=9) included in this report also indicated that their counseling centers have limited staff members. One respondent indicated that they were solely responsible for providing counseling, testing, and disability services for a campus of 5300 students. This is significantly greater than the 1:250 ratio recommended by the American School Counselor Association and even exceeds the more lenient standard of 1:1,500 recommended by the International Association for Counseling Services (IACS), the accrediting body for college and university counseling centers.

After each participating institution’s approval was granted, letters were sent to school Presidents, as well as Counseling Center Directors via email. Follow-up phone calls were also used as a recruitment tool and were made to those institutions that responded, as well as non-responders. With the limitation on the number of institutions that could participate, the inclusion criteria were adjusted to accept the first three institutions that responded. Seven institutions (primarily represented by counseling center personnel) responded to the first invitation. Those institutions were: Alabama State University; Benedict College; North Carolina A & T University; South Carolina State University; Fayetteville State University; North Carolina Central University; and Texas Southern University. Upon indication of their intent to participate, it was requested that they provide the contact information for their institution’s Institutional Review/Human Subjects board chairperson. Alabama State University, South Carolina State University and North Carolina Central University were the only institutions to provide the information by the established deadline. The final three HBCU’s that we received the student surveys from were: Alabama State University, Huston-Tillotson University and Morehouse College. The counselor surveys were from these three HBCU’s, as well as several additional universities because of the low number of counselors at the three universities.

The inclusion criteria for students the study included: (1) respondents were required to be 18 years of age at the time of the study in order to provide consent; (2) completion or enrollment in introductory psychology; and (3) not currently taking medication to alleviate mental disorders. The decision to exclude students who were currently taking medication was instituted because prior research showed that the use of medication was generally successful in alleviating symptoms. Thus findings concerning mental health status could possibly be skewed toward positive mental health functioning when the opposite was true. If a student answered affirmatively on the question regarding medication, skip search functioning in the survey
informed them that the survey was completed and thanked them for their participation. The only inclusion criterion for counseling center personnel was that they provided direct counseling services to students.

The timeline for deploying the survey and the access password for both surveys were given to the counseling center and representatives for each institution. A maximum response count of 9 was set on the Survey Monkey website to ensure compliance with OMB directives. Students and counselors for the study were sent a link to the survey through their institutions e-mail system advertising the soon-to-be conducted study. This message was broadcast by IT personnel twice a week for the two weeks directly preceding the intended launch day. The email gave information pertaining to the purpose of the study, the access password, confidentiality, and right of refusal to participate. In an extra effort to alleviate concerns, respondents were given a brief bio identifying the Principal Investigator as a social worker and her email address if they had any questions pertaining to participation.

**Sampling:**

Due to the small number of respondents that were required for this pilot study (N=9), there was no true sampling approach employed. Since all members of the responding population were included the study is technically classified as a census. A census of counseling personnel respondents was also conducted to obtain the required number of nine subjects. To reflect the psychosocial needs of students and the preparedness of the counselors who serve them, questions relevant to each population’s status and the objectives of this study were asked. The results from each are outlined following information related to participant demographics.

**Demographics:**

Student Characteristics: Of the 9 students whose results are reported here, 88.9% (8) identified their racial/ethnic background as African American. The other respondent selected bi-racial/multiethnic. The gender breakdown was nearly equal, with 56% (n=5) indicating they were female and 44% (n=4) selecting male. The average age of respondents was twenty-two (22), with 68% selecting ‘Junior’ as their classification. Survey respondents were more likely to live on campus (67%); have a grade point average between 3.0 and 3.9 (56%); and were single (89%).
Counselor characteristics: The characteristics of the counselors who responded were female (100%); Black/African American (100%); and both had been in their current position for more than 5 years (67%). Their professional titles varied, and included psychologists, social workers, and licensed professional counselors. All respondents held at least a Master’s degree, with 44% reporting they held doctoral degrees. All were licensed in their particular field.

Results:

HBCU Students:

In order to fully capture the psychosocial needs of students attending HBCU’s, student respondents were asked questions regarding the following variables: knowledge and use of counseling center services, mental health status, and pre-college experiences.

All students indicated that they were aware of their campus counseling center and most had learned of its existence through the New Student Orientation program. Results indicate that students are grappling with a variety of mental health issues (60%), with acute stress and generalized anxiety being most frequently occurring on a measure of well-being, and they are just as likely to use the counseling center to address financial and relationship problems as well as emotional and mental well-being (28.6%). Although 79% of students responded that they had no mental health issues, scores on the well-being measure revealed that 60% of students were positively assessed for either acute stress or generalized anxiety. Males were more likely to experience acute stress, while females were more likely to suffer from generalized anxiety.

80% of student respondents reported that they had at least two traumatic experiences before the age of 18. The most frequently cited experiences were sexual abuse (89%), domestic violence (88%), and physical abuse (78%). Conversely, all students who indicated they had past traumatic experiences said they never received counseling to address those issues.
Learned About Counseling Center

- Didn't know we had one
- New student orientation
- Other Student/Friend
- Professor
- Campus Staff Member
- Counseling Center Staff
- Flyer

Response Frequency

Reason for Counseling

- 14.3%
- 0.0%
- 28.6%
- 28.6%
- 28.6%
- 0.0%

Not Applicable
Academic Problem
Financial Problem
Emotional/Mental...
Relationship Problem
Family Problem
Type of Trauma Exposure Before 18

Yes | No
--- | ---
Domestic violence | 6 | 5
Close relative murdered | 2 | 3
Close friend murdered | 2 | 3
Spent time in foster care | 1 | 1
Spent time in a dangerous community | 2 | 3
Homeless (with or without your family) | 1 | 1
Involved in a serious car accident | 0 | 0
Survived a natural disaster in... | 0 | 0
Been shot/shot at | 0 | 0
Been attacked, robbed, or assaulted by... | 2 | 3
Post-traumatic stress disorder (PTSD) from... | 3 | 4
Family evicted from... | 4 | 3
Been the victim of a robbery or... | 4 | 3

11
HBCU Counselors:

A majority of counselors indicated that their center had high student activity. The average number of students seen weekly was 26. Counseling center personnel were asked questions related to their knowledge of student presenting problems, barriers to their effectiveness, and their professional training needs. With regard to mental health needs, counselors reported that they were familiar with the literature indicating that college students were more likely to experience issues such as depression, anxiety, and stress. However, only 11% of responding counselors indicated that they assessed students for past traumatic experiences.

Individual counseling and referral to outside agencies were used by all of the participating institutions. Other treatment modalities used included: assistance with medical withdrawal from the institution (88.9%); wellness seminars (88.9%); psychiatric evaluations (88.9%); prescribing medications (88.9%); anonymous self assessment (77.8%); group counseling (55.6%); and online resources (55.6%).

With regard to training needs, all respondents indicated a desire to learn more about culturally-centered treatment modalities for use with African American college students. Many are also interested in training regarding the impact of trauma on student functioning and the assessment of students who are a threat to others.

In response to questions related to institutional factors that impacted their effectiveness, counselors revealed that there were a number of barriers. The most commonly cited concerns
were the disproportionate staff to student ratios, limited funding & resources, and lack of administrative buy-in regarding the importance of the counseling center providing mental health services.
RECOMMENDATIONS

1. HBCU leadership must commit to creation of a culturally competent system of care that incorporates on campus services through student health and counseling services, as well as coordination with community based treatment and support services. This includes allocation of funds to assure adequate resources are available to students and counselors and development of policies and procedures for the student health and counseling services to:
   a. Provide crisis management services
   b. Assist students with psychiatric emergencies and other crises
   c. Provide training for health and counseling center personnel, as well as campus security and administrators related to management of mental health issues on campus

2. HBCU’s must provide institutional support in order for counseling centers to function effectively and students to perform at optimal levels.

3. HBCU’s must assure that counseling center staff has access to training in African-centered counseling modalities.

4. HBCU’s must include effective, comprehensive screening as part of the freshman orientation program, included in the collection of overall health-related information, or obtained when students visit the student health center for primary care services. Counseling centers must be equipped with educational materials that can be distributed campus wide.

5. HBCUs must provide comprehensive education and outreach programs that destigmatize mental health problems, remove barriers to accessing appropriate care, and encourage help-seeking.

6. HBCUs must ensure access to currently available web based screening tools (i.e., JED Foundation’s Ulifeline and AFSP’s Depression Screening Questionnaire) and work with African American behavioral health organizations to customize these screening tools or develop others that better address issues in African American college students.

7. HBCU’s must participate in activities designed to reducing stigma related to mental illness in this population given the potential to impact a larger segment of the African
American community. When students and administrators have the opportunity to witness the impact of acknowledgement and treatment of mental health issues, they are much more likely to share their experiences with friends and loved ones, creating a ripple effect of appropriate intervention and stigma reduction.

8. HBCU’s must request initiation of a large scale research agenda to further explore variables identified in this and other studies to determine impact of mental health issues on student functioning.

CONCLUSION

This study has several limitations, including the small sample size, no sampling methodology, and the use of non-validated instruments. Although the work of Rubin and Babbie (2007) suggests that the use of small samples prevents the generalizability of data outside the study population, NLC believes the results in this report indicate that this is an area that needs further exploration.

Most HBCU’s have a small number of Counseling Center Personnel yet the students suffer from a variety of mental health related issues for which they are often unable to adequately access needed services. Access and stigma continue to be major barriers to receiving mental health treatment for college students, especially those attending HBCUs. It must also be understood that expanding awareness of potential pre-college experiences, such as witnessing violence, experiencing trauma before age 18, and physical and sexual abuse have historically been ignored putting these students at increased risk for trauma related mental health problems. These past experiences must be factored into screening and evaluation protocols used for this group.

Historically Black Colleges and Universities have a long history of outreach into their surrounding communities. They are a microcosm of the larger African American community, serving as an ideal point of access to engage the community. It stands to reason that the HBCU college counseling center can be one of the first steps on the path to removing the stigma pertaining to mental illness and mental health service utilization in the African American community – a critical component to advancing the Center for Mental Health Services’ goal of eliminating health disparities.

The National Leadership Council on African American Behavioral Health stands ready to provide leadership in the scholarly study of this area, as well as training and technical assistance to colleges and their staff, including the health and counseling center personnel who provide services on HBCU campuses.
Participating Schools (Students)

Alabama State University

Huston-Tillotson University

Morehouse College

Participating Schools (Counseling Center Personnel)

Alabama State University (1)

Florida A & M University (2)

Huston-Tillotson (1)

Morehouse College (3)

North Carolina A & T University (1)

North Carolina Central University (1)
REFERENCES


NLC – Board of Directors

Wilma Townsend, MSW, Co-President
  Joe Powell, Co-President
Toni Johnson, PhD, Secretary
Aminifu Harvey, DSW, Treasurer
  Tracee Black, Member
Nancy Carter, Member
King E. Davis, PhD, Member
Miriam Delphin, PhD, Member
Louis Gallant, Ph.D., Member
Juanita Harris-Price, MEd, Member
William Lawson, MD, PhD, Member
  Oscar Morgan, Member

Altha J. Stewart, MD
  Executive Director

Research for this study was funded by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) with funds disbursed through Human Resources Research Organization’s (HumRRO) Eliminating Mental Health Disparities initiative. The study was conducted by Carrie Elliott, a doctoral student from the University of Texas, School Of Social Work with knowledge of the mental health needs of students attending Historically Black Colleges and Universities (HBCU), and the organizational structure of counseling centers at these institutions.