10/06/2020

BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM

October 8, 2020
Via WebEx Videoconferences

Thursday, October 8, 2020

8:45 a.m. – 10:00 a.m.	**Audit Committee**
8:45 a.m. – 10:00 a.m.	**Capital Planning & Budget Committee**
8:45 a.m. – 10:00 p.m.	**Research, Economic Development, & Innovation Committee**
10:30 a.m. – 12:00 p.m.	**Business & Finance Committee**
10:30 a.m. –12:00 p.m.	**Education Committee**
12:00 p.m.	Lunch Break
12:45 p.m.	**I. All Regents** Via WebEx Videoconference **Closed Session** Via WebEx Videoconference

Webex videoconference registration information and meeting materials can be found at https://www.wisconsin.edu/regents/meetingmaterials or may be obtained from Jess Lathrop, Executive Director, Office of the Board of Regents, 1860 Van Hise Hall, 1220 Linden Drive, Madison, WI 53706, (608) 262-2324.

BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM

I. All Regents   Via WebEx Videoconference
Thursday, October 8, 2020
12:45 p.m.

1. Calling of the Roll

2. Declaration of Conflicts

3. Updates and Introductions

4. Approval of the records of the August 20, 2020 Meeting of the UW System Board of Regents, the September 10, 2020 Meeting of the Executive Committee of the UW System Board of Regents, and the September 25, 2020 Special Meeting of the UW System Board of Regents

5. Report of the Board President
    A. Report of the Wisconsin Technical College System Board
    B. Update on the UW-Stevens Point chancellor search process
    C. Upcoming meeting of the Action Collaborative on Preventing Sexual Harassment in Higher Education
    D. Changes to UW System's Office of Compliance and Integrity

6. Report of the System President
    A. Update on COVID-19 response
    B. Administrative efficiencies within UW System

7. Report and approval of actions taken by the Education Committee

8. Report and approval of actions taken by the Capital Planning & Budget Committee

9. Report of the Research, Economic Development, and Innovation Committee

10. Report of the Audit Committee

11. Report and approval of actions taken by the Business & Finance Committee

12. Student Behavioral Health: COVID-Related Results from the Counseling Impact Assessment Project and Update on the Student Behavioral Health Initiative

13. Resolution of appreciation for Regent Emeritus Gerald Whitburn's service on the UW System Board of Regents

14. Resolution of appreciation for Regent Emeritus Jason Plante's service on the UW System Board of Regents

15. Resolution of appreciation for UW System President Ray Cross's service to the University of Wisconsin System

16. Regent communications, petitions, and memorials

17. <u>Closed Session</u> – Move into closed session to (a) consider a UW-Madison honorary degree recipient, as permitted by s. 19.85(1)(f), Wis. Stats.; (b) consider emeritus status for the former UW System President, as permitted by s. 19.85(1)(f), Wis. Stats.; (c) consider ongoing personnel matters, as permitted by s. 19.85(1)(f), Wis. Stats.; and (d) consider strategies for crime detection and prevention as permitted under s. 19.85(1)(d), Wis. Stats.

18. Adjourn

STUDENT BEHAVIORAL HEALTH: COVID-RELATED RESULTS FROM THE COUNSELING IMPACT ASSESSMENT PROJECT AND UPDATE ON THE STUDENT BEHAVIORAL HEALTH INITIATIVE

REQUESTED ACTION

No action is required; this item is for information only.

SUMMARY

The Board will receive another update on the Student Behavioral Health Initiative, get a deeper look into our campus counseling centers and the student they serve, and participate in a discussion about the priorities for 2020-21 and beyond to better meet student behavioral health needs.

Presenters will share key data from the UW System Counseling Impact Assessment Project (UWCIAP), which tracks a core set of common data elements across the System counseling centers, for the purposes of providing benchmarking data for each campus and to allow for local and system-level analyses of counseling utilization and impact. Highlights from the UWCIAP will include the most common presenting concerns among students attending counseling, background experiences that impact their mental health and help-seeking behaviors, and a summary of outcomes showing how counseling helps to improve students' lives both personally and academically.

Presenters will also share how the backdrop of a global pandemic and societal unrest in the U.S. in recent months has affected the issues students bring to our counseling centers, and how centers have adjusted services to meet students' behavioral health needs in a way that responds to the times and is safe for both students and staff.

Finally, presenters will engage the Board in discussion about key priorities outlined by the Behavioral Health Initiative workgroups, as well as unforeseen needs that have arisen as a result of the COVID-19 pandemic.

Presenter(s)
- Artanya Wesley, Ph.D. (Vice Chancellor for Student Affairs, UW-Whitewater)
- Sandra Cox, M.S., LPC (Counseling Center Director, UW-Oshkosh)
- John Achter, Ph.D., LP (Student Behavioral Health Coordinator, UW System Administration)

BACKGROUND

In April 2019, the Board learned about the significant increase in behavioral health issues among our student population, resulting in overtaxing counseling, health, and other campus resources where students turn for help. Data was presented from the National College Health Assessment (NCHA, 2018) that demonstrated heightened rates of anxiety and depression among the general student population, with under-represented student populations (i.e., students of color, LGBTQ students, and students with disabilities) showing the highest levels of distress. Following this meeting, President Cross established the Student Behavioral Health Initiative and charged workgroups with developing recommendations to address the growing needs. Student affairs and health professionals representing every campus participated in 3 workgroups during Summer/Fall 2019, and completed reports summarizing their recommendations in Spring 2020. Senior Student Affairs Officers (SSAOs) have provided brief updates of the initiative during the 2019-20 academic year. Today's focus is more specifically on the experience of counseling centers and the student clients they serve, and the most salient priorities for 2020-21 to continually improve upon ways to meet their evolving needs.

Related Policies

- Regent Policy Document 23-1: Basic Health Module
- Regent Policy Document 23-2: Health, Safety, and Security at UW System Institutions

ATTACHMENTS

A) UW System Counseling Impact Assessment Report (2019-20)

University of Wisconsin System - Counseling Impact Assessment Report

(2019-20)

UNIVERSITY OF
WISCONSIN SYSTEM

Table of Contents

University of Wisconsin System - Counseling Impact Assessment Report (2019-20)

Results from the Client Information Form and the Learning Outcomes and Satisfaction Survey.

ASSESSMENT COMMITTEE

Deirdre Dalsing
Chair
Director, Counseling Services
University of Wisconsin-Platteville

John Achter
Honorarium
Associate Dean of Students, Dean of Students
University of Wisconsin-Stout

Sandy Cox
Director, Counseling Center
University of Wisconsin-Oshkosh

Leslie Wartgow
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Paul Dupont
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University of Wisconsin-Milwaukee

Stacey Gerken
Director, Counseling Center
University of Wisconsin-Stevens Point

Amy Henniges
Director of Health & Counseling Services
University of Wisconsin-Green Bay

Jim Freiburger
Executive Director, Counseling Center
University of Wisconsin-Whitewater

Chasidy Faith
Interim Director, Counseling Center
University of Wisconsin-Stout

ACKNOWLEDGEMENTS

OVERVIEW

This Annual Report summarizes results from data collection during the 2019-2020 academic year by the University of Wisconsin (UW) System Counseling Impact Assessment Project, overseen by a system-wide committee of the same name. The project seeks to track a core set of common data elements across UW-System counseling centers, for the purposes of providing benchmarking data for each campus and to allow for system-level analyses of counseling utilization and impact. Incremental progress has been made each year in establishing a systematic and sustainable assessment process that both serves day-to-day clinical needs of counseling center professionals and helps them evaluate and improve upon their work. By moving thoughtfully and systematically, we hope to continue to strengthen the ways in which we assess our work, for the betterment of the clients we serve.

The project has now gathered nine years of client feedback on the impact of services received through the Learning Outcomes and Satisfaction Survey (LOS) and eight years of client demographics through the Client Information Form (CIF). In 2014-15, we began requesting client IDs to allow for pre/post comparisons of client functioning on the various instruments administered. In 2018-19, we began reporting trend data for counseling center staffing and utilization. This annual report attempts to summarize all this data in a way that is accessible and helpful to counseling center professionals and their constituents in understanding our work. In addition to this report, participating campuses each receive an individualized report comparing their results to UW System (LOS & CIF) and national (Center for Collegiate Mental Health) benchmarks.

During the 2019-20 academic year, the impact from the COVID-19 pandemic was widespread. Campuses in the UW-System transitioned to alternative delivery format for classes and closed campuses to students and faculty. Counseling Centers across the system adjusted as well and initiated tele-mental health services through phone and videoconferencing. Questions were added to the LOS survey to obtain information regarding utilization and interest in tele-mental health services, as well as assess the impact of the pandemic on important mental health factors.

METHODS

The current report summarizes data collected across 12 institutions within the University of Wisconsin System. There were two primary sources of data collection which are summarized in the table below. For the purposes of this report, Fall 2019 data only is presented as primary data for CIF and LOS findings as the COVID-19 pandemic significantly interrupted operations across the UW System in the Spring 2020 term. COVID-19 data provided was collected at the end of the Spring 2020 term.

TABLE 1: MEASURES

Client Information Form (CIF)	
▪ A standard intake form created by the Counseling Impact Assessment Committee and piloted during the 2012-13 academic year	▪ Utilizes items from the Center for Collegiate Mental Health (CCMH), which allows for national comparison
▪ Gathers information about presenting concerns, mental health background, and academic functioning at intake	▪ Consists of the response scale of Strongly Disagree (1) to Strongly Agree (5)

Learning Outcomes and Satisfaction Survey (LOS)	
▪ A survey for students who utilize counseling services administered on a semesterly basis	▪ Includes an overall measure of satisfaction with services
▪ Assesses the extent to which clients perceive counseling as helpful in the context of intrapersonal learning (e.g., stress management) and academic outcomes	▪ Consists of the response scales Disagree (1) to Strongly Agree (5) and Poor (1) to Excellent (5)

Campuses have an ongoing data collection mechanism for CIF data, which was collected from each campus at the end of each semester and was aggregated for reporting. LOS surveys are administered at the end of fall and spring semesters.

TABLE 2. CLIENT INFORMATION FORM AND LEARNING OUTCOMES AND SATISFACTION SURVEY PARTICIPATION BY UW INSTITUTION (2019-20) *FALL DATA ONLY

Institution	CIF – Intake n = 4090	LOS - End of Semester n = 1055
UW-Eau Claire	20% (810)	14% (150)
UW-Green Bay	2% (88)	6% (62)
UW-La Crosse	13% (546)	13% (141)
UW-Milwaukee	-	15% (159)
UW-Oshkosh	14% (560)	8% (88)
UW-Parkside	1% (54)	1% (12)
UW-Platteville	7% (284)	9% (92)
UW-River Falls	9% (364)	8% (86)
UW-Stevens Point	6% (247)	5% (48)
UW-Stout	15% (623)	11% (118)
UW-Superior	-	1% (11)
UW-Whitewater	13% (514)	8% (88)

RESULTS

CLIENT INTAKE FORM (CIF)

Designed to measure client characteristics and history, the CIF consists of a presenting concerns checklist, four items assessing intake academic functioning, and the standard demographic and personal history items established by the Center for Collegiate Mental Health (CCMH).

The 2019-20 results of the CIF are presented below, with comparisons to national counseling center data. Students were asked to report concern for factors related to their mental health as part of an intake form that is completed prior to a counseling session. Results are displayed in Table 3.

TABLE 3: CLIENT INTAKE FORM - CURRENT OVERALL MENTAL HEALTH (PRESENTING CONCERNS) - % REPORTING YES

Items	System Survey (n = 4090)
Anxiety/ fears/ worries (other than academic)	77%
Stress/ stress management	70%
Depression/ sadness/ mood swings	71%
Low self-esteem/ confidence	47%
Procrastination/ motivation	46%
Attention/ concentration	38%
Friends/ roommates/ dating concerns	32%
Sleep difficulties	30%
Problems related to school or grades	42%
Choice of major/ career	21%
Shyness/ social discomfort	25%
Eating behavior/ weight problems/ eating disorders/ body image	24%
Anger/ irritability	22%
Marital/ couple/ family concerns	12%
Grief/ loss	13%
Physical symptoms/ health (headaches, stomachaches, pain)	13%
Alcohol/ drug use	6%

Items	System Survey (n = 4090)
Self-injury (cutting, hitting, burning)	8%
Childhood abuse (physical, emotional, sexual)	11%
Sexual assault/ dating violence/ stalking/ harassment	8%
Sexual orientation	5%
Gender identity	3%
Seeing/ hearing things others don't	2%
Cultural adjustment	2%
Urge to injure/ harm someone else	1%
Bullying/ harassment	2%
Prejudice/discrimination	2%
Other	6%

Students were asked to report the degree to which their academic career is being negatively impacted by their mental health status. Students responded to each item on a scale from 1 (Strongly Disagree - SD) to 5 (Strongly Agree - SA). The reported academic outcomes of student's mental health can be seen in Table 4.

TABLE 4: CLIENT INTAKE FORM - ACADEMIC OUTCOMES

Subscale Item	SD/Disagree	Neutral	Agree/SA	System Mean (n)
I am struggling with my academics	44%	25%	31%	3.66 (1232)
I am thinking of leaving school	76%	13%	11%	2.23 (452)
My academic motivation and/or attendance are suffering	44%	18%	38%	3.79 (1527)
I am having a hard time focusing on my academics	30%	20%	50%	4.43 (2028)

Students were asked to report the occurrence of previous negative mental health events. The percentage of students who reported such events can be seen in Table 5. The cumulative are the percentages of students who have experienced the incident at least one time.

TABLE 5: CIF MENTAL HEALTH HISTORY ITEMS

Items	Never	1 Time	2-3 Times	4-5 Times	More than 5 Times	System (%; *n*)	CCMH (%, n)
Been hospitalized for mental health concerns	88%	8%	3%	<1%	<1%	11% (460)	10% (14,124)
Felt the need to reduce your alcohol or drug use	75%	9%	9%	2%	5%	25% (1007)	27% (36,684)
Others expressed concern about your alcohol or drug use	85%	7%	6%	<1%	2%	16% (615)	16% (21,644)
Received treatment for alcohol or drug use	98%	2%	<1%	<1%	<1%	2% (96)	2.4% (3,372)
Purposely injured yourself w/o suicidal intent (e.g., cutting, hitting, burning, etc.)	65%	7%	8%	3%	17%	35% (1425)	29% (41,612)
Seriously considered attempting suicide	59%	15%	15%	3%	8%	41% (1634)	37% (53,407)
Made a suicide attempt	87%	8%	4%	<1%	<1%	13% (536)	11% (15,326)
Considered causing serious physical injury to another person	95%	2%	2%	<1%	1%	5% (196)	7% (10,788)
Intentionally caused serious physical injury to another	98%	1%	1%	<1%	<1%	2% (78)	2% (1,900)

Items	Never	1 Time	2-3 Times	4-5 Times	More than 5 Times	System (%; *n*)	CCMH (%, n)
Someone had sexual contact with you w/o your consent	74%	13%	8%	2%	3%	26% (1032)	25% (35,704)
Experienced harassing, controlling, and/or abusive behavior from another person (e.g., friend, family member, partner, or authority figure)	62%	6%	8%	2%	22%	39% (1541)	38% (54,663)
Experienced a traumatic event that caused you to feel intense fear, helplessness, or horror	58%	16%	14%	4%	8%	42% (835)	41% (47,758)

Students were asked to report mental health interventions prior to starting college. The frequency of reported interventions can be seen in Table 6. The cumulative percentages are the percentages of students who have used these interventions.

TABLE 6: EXTENDED MENTAL HEALTH HISTORY ITEMS

Items	Never	Prior to College	After Starting College	Both	System (%; *n*)	CCMH (%, *n*)
Attended counseling for mental health concerns	33%	26%	21%	20%	67% (2716)	56% (79,022)
Taken a prescribed medication for mental health concerns	65%	10%	12%	13%	35% (1401)	35% (48,617)

Students were asked to report the rate of marijuana usage during the two weeks prior to a counseling session. The reported frequencies can be seen in Table 7. The percentages are the percentages of students who have used marijuana at least once.

TABLE 7: REPORTED MARIJUANA USE

Items	None	Once	Twice	3 to 5 Times	6 to 9 Times	10 or More Times	System (%; n)	CCMH (%, *n*)
Think back over the last two weeks. How many times have you used marijuana?	80%	5%	4%	4%	3%	4%	20% (820)	26% (32,361)

LEARNING OUTCOMES AND SATISFACTION SURVEY (LOS)

The Learning Outcomes and Satisfaction Survey (LOS) is the standard outcome measure created by the Counseling Impact Assessment Committee in 2011. Given to clients at the end of the semester, the LOS is designed to measure the extent to which clients believe that counseling helped them to make improvements on intrapersonal skills, academic functioning, and well-being, as well as their satisfaction with services. The LOS contains three subscales: the Intrapersonal Learning Outcomes Subscale, the Client Satisfaction Subscale, and the Academic Outcomes Subscale. Additional items that do not factor onto the three Subscales are presented separately. The 2019-2020 results of the LOS are presented below with all client LOS entries included.

TABLE 8: LEARNING OUTCOMES AND SATISFACTION SURVEY - DEMOGRAPHIC DATA

	System Survey (n = 1055)
Academic Status (%)	
Freshman/ First year	197 (20%)
Sophomore	203 (21%)
Junior	249 (25%)
Senior	236 (24%)
Graduate/ professional degree student	84 (9%)
Other	18 (2%)
Gender Identity (%)	

	System Survey (n = 1055)
Woman	768 (78%)
Man	167 (17%)
Transgender	12 (1%)
Self-identify	39 (4%)
Race/Ethnicity (%)	
African American/ Black	19 (2%)
American Indian/ Alaskan Native	4 (<1%)
Asian American/ Asian	36 (4%)
Hispanic/ Latino(a)	32 (3%)
Native Hawaiian/ Pacific Islander	2 (<1%)
Multi-racial	49 (5%)
White	835 (85%)
Self-identify	9 (1%)
Age [Mean (*SD*)]	21.42 (7.71)
Number of Sessions [Mode]	4

Students were asked to report their level of agreement with statements related to their lifestyle and perception of self-efficacy. Students responded to each item on a scale from 1 (Strongly Disagree - SD) to 5 (Strongly Agree - SA). The results can be seen in Table 9.

TABLE 9: LEARNING OUTCOMES AND SATISFACTION SURVEY – LIFESTYLE AND SELF-EFFICACY

Subscale Items	SD/Disagree	Neutral	Agree/SA	System Mean (n)
I made improvements on the specific issues for which I sought counseling	8%	13%	79%	3.95 (1055)
I have started to live a healthier lifestyle in at least one area (e.g. sleep, diet, exercise, alcohol/drug use)	8%	27%	65%	3.75 (1055)

Subscale Items	SD/Disagree	Neutral	Agree/SA	System Mean (n)
I have improved my ability to manage stress	12%	27%	62%	3.63 (1055)
I am better prepared to work through future concerns and achieve my goals	9%	20%	71%	3.81 (1055)
I increased my self-confidence and/or self-esteem	13%	31%	56%	3.58 (1055)
The counseling process helped me understand cultural, family, ethnic, and/or community differences	15%	39%	46%	3.43 (1055)
I have gained a greater understanding of myself or a clearer sense of identity	10%	22%	69%	3.82 (1055)
I increased my ability to think clearly and critically about my problems	8%	17%	74%	3.87 (1055)
I improved my communication skills	10%	27%	64%	3.72 (1055)
Total Subscale				**3.73 (1055)**

Students were asked to report their level of satisfaction with counseling services. Students responded to each item on a scale from 1 (Strongly Disagree - SD) to 5 (Strongly Agree - SA). The results can be seen in Table 10.

TABLE 10: LEARNING OUTCOMES AND SATISFACTION SURVEY – COUNSELING SATISFACTION

Items	SD/Disagree	Neutral	Agree/SA	System Mean (n)
The office staff were helpful in providing information and direction	3%	8%	89%	4.30 (1028)
This counselor displayed sensitivity/acceptance to individual differences (e.g. culture, gender, ethnicity, etc.)	2%	6%	92%	4.51 (1027)

Items	SD/Disagree	Neutral	Agree/SA	System Mean (*n*)
This counselor helped me clarify my concerns and provide guidance	6%	6%	88%	4.35 (1027)
This counselor supported me in making my own decisions and reaching my personal goals	4%	8%	88%	4.37 (1027)
The counseling environment was warm and inviting	3%	6%	91%	4.48 (1027)
It is important for me to have counseling services located on campus	1%	4%	95%	4.70 (1026)
I would return to the counseling center again	5%	6%	89%	4.50 (1027)
I would recommend counseling services to a friend	5%	4%	91%	4.53 (1027)
Total Subscale				4.46 (1028)

Students were asked to rate their level of agreement with statements related to academic outcome factors. Students responded to each item on a scale from 1 (Strongly Disagree - SD) to 5 (Strongly Agree - SA). The results are summarized in Table 11.

TABLE 11: LEARNING OUTCOMES AND SATISFACTION SURVEY – ACADEMIC OUTCOMES

Items	SD/Disagree	Neutral	Agree/SA	System Mean (n)
Counseling has increased my academic motivation and/or class attendance	22%	47%	33%	3.16 (1053)
Counseling has helped me to focus better on my academics	18%	36%	46%	3.34 (1053)
Counseling has helped with my academic performance	18%	41%	41%	3.26 (1052)
Counseling has helped me stay at school	19%	39%	42%	3.29 (1053)

Total Subscale	3.26 (1053)

Students were asked to rate their level of agreement with statements related to change in academic performance after utilizing counseling services. Students responded to each item on a scale from 1 (Strongly Disagree - SD) to 5 (Strongly Agree - SA). The results are summarized in Table 12.

TABLE 12: LEARNING OUTCOMES AND SATISFACTION SURVEY – RETROSPECTIVE ACADEMIC FUNCTIONING ITEMS

Items	SD/Disagree	Neutral	Agree/SA	System Mean (n)
Prior to counseling, I was struggling with my academics	49%	17%	34%	2.78 (1053)
Prior to counseling, I was thinking of leaving school	66%	11%	23%	2.31 (1053)

Students were asked to rate the availability of appointment times. Students responded to each item on a scale from 1 (Strongly Disagree - SD) to 5 (Strongly Agree - SA). The reported ability to schedule appointments can be seen in Table 13.

TABLE 13: LEARNING OUTCOMES AND SATISFACTION SURVEY – APPOINTMENT TIMES

Item	SD/Disagree	Neutral	Agree/SA	System Mean (*n*)
I was able to get my first appointment in a timely manner	13%	10%	77%	4.04 (1027)
I was able to get follow-up appointments in a timely manner	12%	14%	75%	4.01 (1026)

Students were asked to report their overall satisfaction with counseling services. Students responded to each item on a scale from 1 (Poor) to 5 (Excellent). Overall satisfaction results are summarized in Table 14.

TABLE 14: LEARNING OUTCOMES AND SATISFACTION SURVEY – OVERALL SATISFACTION

Item	Poor	Fair	Good	Very Good	Excellent	System Mean (*n*)
Overall effectiveness of counseling in helping with my problems	6%	10%	30%	34%	20%	3.52 (1019)
Overall quality of the services I received	3%	7%	15%	33%	42%	4.04 (1019)

Students were asked to report how their well-being changed from before utilizing counseling services to after. Students responded to each item on a scale from 1 (Poor) to 5 (Excellent). The reported change in well-being can be seen in Table 15.

TABLE 15: LEARNING OUTCOMES AND SATISFACTION SURVEY – RETROSPECTIVE CHANGE IN WELL-BEING

Item	Poor	Fair	Good	Very Good	Excellent	System Mean (*n*)
My level of well-being when I started counseling	36%	43%	16%	3%	2%	1.90 (1019)
My level of well-being now	5%	19%	42%	29%	6%	3.12 (1019)

Utilizing the results from Table 15, the responses from student well-being were used to report percentage of students who improved, declined, or did not change in well-being while utilizing counseling services. The reported change in academic factors can be seen in Table 16.

TABLE 16: LEARNING OUTCOMES AND SATISFACTION SURVEY – PERCEIVED CHANGE FROM START OF COUNSELING

	Decline	No change	Improvement
System Survey % (1019)	2% (22)	20% (207)	78% (790)

Students were separated by those who reported that they were struggling with their academics and those who were not to compare how counseling affected academic performance. Students responded to each item on a scale from 1 (Strongly Disagree - SD) to 5 (Strongly Agree - SA). The reported effectiveness of counseling support can be seen in Table 17.

TABLE 17: LEARNING OUTCOMES AND SATISFACTION SURVEY – EFFECTIVENESS OF COUNSELING SUPPORT

Scale Items		SD/Disagree	Neutral	Agree/SA	System Mean (*n*)
Counseling has increased academic motivation and/or class attendance	Struggling	50 (14%)	95 (27%)	210 (59%)	3.56 (355)
	Not Struggling	186 (27%)	323 (46%)	189 (27%)	2.96 (698)
	Total (average)				**3.16 (1053)**
Counseling has helped me to focus better on my academics	Struggling	50 (14%)	86 (24%)	219 (62%)	3.63 (355)
	Not Struggling	137 (20%)	293 (42%)	268 (38%)	3.18 (698)
	Total (average)				**3.34 (1053)**
Counseling has helped with my academic performance	Struggling	50 (14%)	97 (27%)	208 (59%)	3.56 (355)
	Not Struggling	142 (20%)	330 (47%)	225 (32%)	3.10 (697)
	Total (average)				**3.26 (1052**
Counseling has helped me stay at school	Struggling	45 (13%)	96 (27%)	214 (60%)	3.65 (355)
	Not Struggling	154 (22%)	314 (45%)	230 (33%)	3.11 (698)
	Total (average)				**3.29 (1053)**

Students were separated by those thinking of leaving school at the beginning of counseling and those who were not to compare whether counseling services impacted retention. Students responded to each item on a scale from 1 (Strongly Disagree - SD) to 5 (Strongly Agree - SA). The reported effect of counseling services on retention can be seen in Table 18.

TABLE 18: LEARNING OUTCOMES AND SATISFACTION SURVEY – EFFECT OF COUNSELING ON ACADEMIC RETENTION

Counseling has helped me stay at school.	SD/Disagree	Neutral	Agree/SA	System Mean (*n*)
Thinking of Leaving	35 (14%)	33 (14%)	176 (72%)	3.82 (244)
Not Thinking of Leaving	168 (20%)	377 (47%)	268 (33%)	3.13 (809)
Total (Average)				**3.49 (1375)**

COVID-19 COUNSELING SERVICES OUTCOMES

The Learning Outcomes and Satisfaction Survey (LOS) had an additional section created this year to measure the students' perceptions of the response and services offered during the pandemic.

Students were asked to respond to a series of questions related to whether they received counseling services during the COVID-19 pandemic and the degree to which they were impacted by COVID-19 related events. Of the 1,375 participants, 756 (55%) responded to the COVID-19 attendance question. The results are presented in Table 19. A total of 291 (39%) survey participants attended a form of counseling service during the COVID-19 pandemic.

TABLE 19: COVID-19 – COUNSELING ATTENDANCE

Did you receive counseling during the COVID-19 pandemic??	% (n)
Yes	39% (291)
No	61% (465)

The following items present only the responses of the 291 who attended counseling services during the COVID-19 pandemic

Students were asked to report the method by which they received counseling services during the COVID-19. The results are presented in Table 20.

TABLE 20: COVID-19 – PLATFORM UTILIZED FOR COUNSELING

Which closely describes the counseling services you received?	% Reporting
Most or all counseling appointments were in-person	14%
About an even split between in-person and telehealth appointments	12%
Most or all counseling appointments were telehealth appointments	74%

Students were asked to report the degree of positive outcomes from utilizing counseling services received during the COVID-19 pandemic. Students responded to each item on a scale from 1 (Strongly Disagree - SD) to 5 (Strongly Agree - SA). The results are summarized in Table 21.

TABLE 21: COVID-19 RESPONSE ITEMS- TELE-COUNSELING OUTCOMES

Subscale Item	SD/Disagree	Neutral	Agree/SA	System Mean (n)
Helped me in completing my schoolwork	8%	30%	61%	3.65 (209)
Positively impacted my well-being during the pandemic	4%	5%	91%	4.19 (208)
Helpful in supporting my wellbeing	4%	19%	77%	4.05 (142)

Students were asked to report the degree to which they would like to have telehealth services offered in the future. Students responded to each item on a scale from 1 (Do not Desire) to 5 (Strongly Desire). The response is summarized in Table 22.

TABLE 22: COVID-19 RESPONSE ITEMS – APPEAL FOR TELE-COUNSELING

Subscale Item	Do Not Desire	Neutral	Strongly Desire	System Mean (n)
Telehealth should be offered in the future	8%	47%	45%	2.69 (268)

Students were asked to report the frequency at which they accessed their campus counseling center's web-based resources. The response is summarized in Table 23.

TABLE 23: COVID-19 RESPONSE ITEMS- ONLINE SELF-CARE RESOURCE USE

How often did you access online resources on the counseling website	% Reporting
Daily	1%
A few times a week	4%
Once a week	7%
A few times a month	18%
Once a month	13%
A few times a year	22%
Never	34%

Students were asked to report the degree to which they believe they have been provided adequate strategies for self-care during the COVID-19 Pandemic. Students responded on a scale from 1 (Definitely No) to 5 (Definitely Yes). The response is summarized in Table 24.

TABLE 24: COVID-19 RESPONSE ITEMS- SELF-CARE STRATEGIES

Subscale Item	No	Neutral	Yes	System Mean (n)
Has your time in counseling provided you with adequate strategies for self-care?	4%	7%	86%	4.31 (283)

Students were asked to report the degree to which they were positively or negatively impacted regarding their sleep cycle and stress levels. Students responded to each item on a scale from 1 (Negatively Impacted) to 5 (Positively Impacted). The reported impact is summarized in Table 25.

TABLE 25: COVID-19 RESPONSE ITEMS- PANDEMIC OUTCOMES ON MENTAL HEALTH

Subscale Item	Negatively Impacted	Did not Change	Positively Impacted	System Mean (n)
How would you rate the impact of the pandemic crisis on your sleep?	64%	20%	13%	2.23 (283)
How would you rate the impact of the pandemic crisis on your stress levels?	78%	5%	12%	1.87 (283)

Students were asked to rate their resiliency during the COVID-19 Pandemic. Students responded to on a scale from 1 (Extremely Non-Resilient) to 5 (Extremely Resilient). The reported impact is summarized in Table 26.

TABLE 26: COVID-19 RESPONSE ITEMS- PERSONAL RESILIENCE

Subscale Item	Not Resilient	Resilient	System Mean (n)
How would you rate your personal resilience?	14%	83%	4.46 (282)

Students were asked to rate their perceived level of support during the COVID-19 Pandemic. Students responded to each item on a scale from 1 (Definitely No) to 5 (Definitely Yes). The results are summarized in Table 27.

TABLE 27: COVID-19 RESPONSE ITEMS- PERCEIVED SUPPORT

Subscale Item	No	Might or Might Not	Yes	System Mean (n)
Have you felt supported during this time?	9%	12%	77%	4.08 (283)
Do you feel you have adequate support services available to you currently?	8%	12%	77%	4.05 (283)

FIGURE 1: COUNSELING CENTER UTILIZATION

Counseling centers nationwide experienced a 30-40% increase in utilization between 2009 and 2015 (Center for Collegiate Mental Health, 2016). UW System counseling centers experienced a 41% increase during that time period despite flat enrollment (presentation to the Board of Regents, 2019). The graph below shows trends for UW System counseling centers from 2015-16 to 2019-20, and represents an additional 15% increase, again in the context of flat or even declining student enrollment. Utilization dipped slightly in 2019-20, most likely due to the COVID-19 pandemic that caused campuses to send students home 2 months early in the spring semester. This resulted in a short-term pause in services as centers worked swiftly to begin offering services remotely via telehealth.

UW System Counseling Utilization

Y-axis: # of Student Clients (8000 to 16000)

Year	# of Student Clients
2015-16	12348
2016-17	13072
2017-18	13625
2018-19	14740
2019-20	14243

Legend: UW System
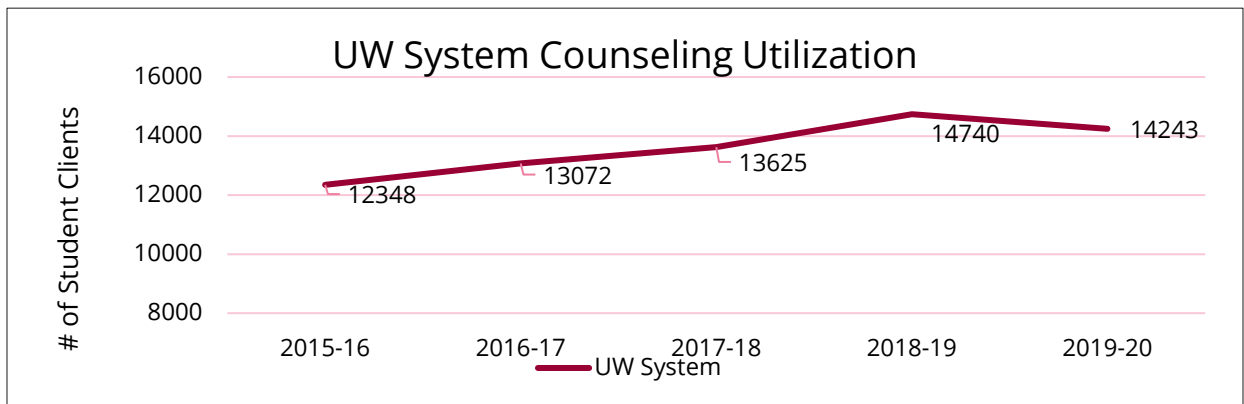
FIGURE 2: 5 YEAR TREND: RATIO OF COUNSELORS TO STUDENTS

According to the International Association of Counseling Services (IACS) Standards for University and College Counseling Services (2010), "Every effort should be made to maintain minimum staffing ratios in the range of one FTE professional staff member (excluding trainees) for every 1,000-1500 students, depending on services offered and other campus mental health agencies." Figure 2 displays the ratio of counselors to students across the UW System.

Ratio of Counselors to Students

Y-axis: # of Student per FTE Counselor (900 to 2100)

Year	# of Student per FTE Counselor
2015-16	1809
2016-17	1662
2017-18	1513
2018-19	1448
2019-20	1426

Legend: UW System
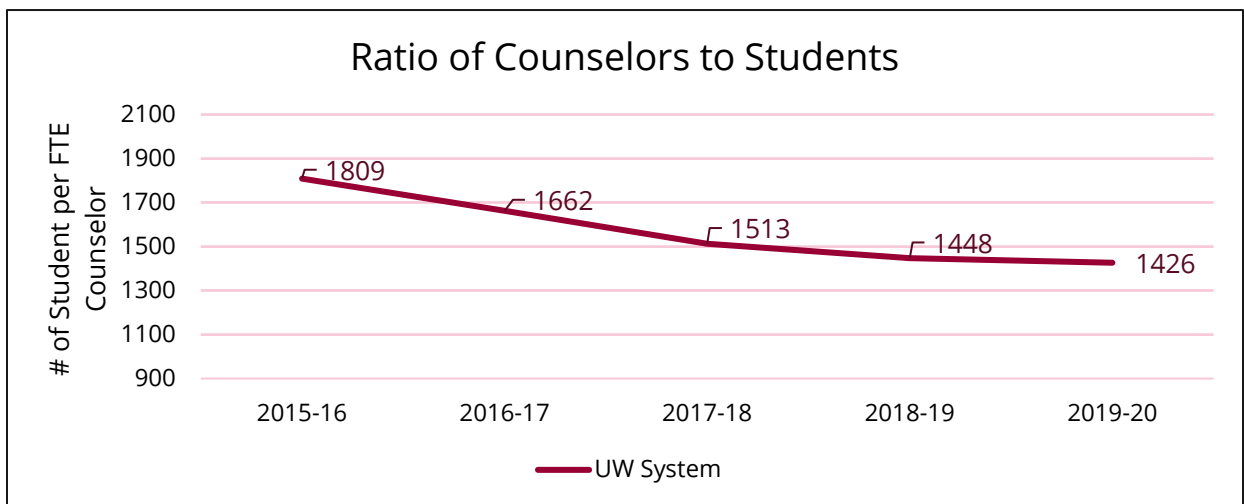
To illustrate the variability of the counselor to student ratio across the UW System, Table 28 displays the 5-year trend of counselors to students by campus. Overall, most campuses have improved on their ratio over time, with 8 of 13 now meeting the 1:1500 ratio; however, only 2 currently meet the 1:1000 recommended ratio.

TABLE 28: 5 YEAR TREND: RATIO OF COUNSELORS TO STUDENTS BY CAMPUS

Campus	2015	2016	2017	2018	2019	Trend
UW-Eau Claire	1599	1526	1312	1544	1100	
UW-La Crosse	1706	1573	1566	1568	1229	
UW-Madison	1636	981	951	830	708	
UW-Milwaukee	2952	2252	2187	2134	1991	
UW-Oshkosh	1441	1356	1349	1403	1105	
UW-Parkside	2224	2138	2084	2045	2150	
UW-Platteville	2543	2177	1739	1616	1474	
UW-River Falls	1554	1598	1595	1344	1291	
UW-Stevens Point	1434	1443	1212	1145	1512	
UW-Stout	1558	1697	1364	1270	949	
UW-Superior	1321	1577	947	918	1339	
UW-Whitewater	1737	1626	1855	1558	1751	

Appendices

APPENDIX A: CLIENT INFORMATION FORM – DEMOGRAPHIC DATA

	UW System Population	System Survey (n = 4090)	CCMH (n = 207,818)
Academic Status (%)			
Freshman/ First year	21%	25%	21%
Sophomore	19%	24%	21%
Junior	17%	24%	23%
Senior	24%	22%	21%
Graduate/Professional Degree	12%	3%	14%
Other	7%	2%	1%
Gender Identity (%)			
Woman	54%	68%	64%
Man	46%	29%	34%
Transgender	-	1%	<1%
Self-identify	-	2%	1.5%
Race/Ethnicity (%)			
White	79%	86%	65%
Asian American/ Asian	4%	3%	9%
Multi-racial	3%	3%	5%
Hispanic/ Latino(a)	6%	4%	9%
African American/Black	3%	3%	10%
American Indian or Alaskan Native	<1%	1%	1%
Self-identify	-	1%	2%
Native Hawaiian or Pacific Islander	<1%	<1%	<1%
Sexual Orientation (%)			
Heterosexual	-	74%	77%
Bisexual	-	14%	2%
Self-identify	-	4%	3%
Questioning	-	4%	12%
Lesbian	-	1%	3%
Gay	-	3%	3%
GPA [Mean (SD)]	-	3.07 (0.80)	-
International Student (% Yes)	6%	1%	6%
First Generation Student (% Yes)	32%	27%	23%
Age [Mean (SD)]	-	20.56 (2.78)	40
US Military Service (% Yes)	1%	2%	2%
Traumatic/Stressful Military Experience [% Yes (n)]	-	25% (24)	29% (472)
Student Athlete (% Yes)	-	13%	8%
Transfer Student (% Yes)	-	19%	21%

Appendix A: Client information form – demographic data continued

	System Survey (n = 4090)	CCMH (n = 207,818)
Current Housing (%)		
On-Campus residence hall/ apartment	54%	37%
Off campus apartment/house	43%	59%
On/off campus co-operative housing	1%	1%
On/off campus fraternity/sorority house	1%	2%
Other	1%	1%
Living Arrangement (%)		
Roommate(s)	77%	69%
Alone	19%	13%
Spouse, partner, or significant other	23%	10%
Parent(s) or guardian(s)	13%	10%
Family other	5%	5%
Children	1%	2%
Other	1%	1%
Relationship Status (%)		
Single	59%	61%
Serious dating or committed relationship	39%	34%
Married	1%	4%
Divorced	<1%	0.3%
Civil union, domestic partnership, or equivalent	<1%	0.4%
Widowed	--	>0.1%
Separated	<1%	0.3%

Appendix A: Client information form – demographic data continued

	System Survey (N = 4090)	CCMH (n = 102,276)
Financial Status (%)		
Always stressful	13%	13%
Often stressful	23%	21%
Sometimes stressful	39%	36%
Rarely stressful	20%	22%
Never stressful	5%	8%
Registered Disability (% Yes) **If yes, which category- check all that apply (%)**	12%	9%
Attention Deficit / Hyperactivity disorder	31%	43%
Deaf or Hard of Hearing	4%	4%
Specific Learning Disability	15%	13%
Mobility Impairments	5%	4%
Neurological Disorder	--	--
Health Impairment / Condition	11%	11%
Psychological Disorder / Condition	31%	31%
Visual Impairments / Difficulty Seeing	2%	4%
Traumatic Brain Injury	3%	3%
Cognitive Difficulties/Intellectual Disability	4%	4%
Difficulty Speaking/Language Impairment	1%	1%
Autism Spectrum Disorder	5%	5%
Other	16%	15%

Appendix A: Client Information form – Demographic Data Continued

	System Survey (N = 4090)	CCMH (n = 102,276)
Religion (%)		
Christian	31%	32%
Catholic	14%	15%
Agnostic	16%	15%
Atheist	10%	9%
Self-identify	4%	3%
Buddhist	1%	1%
Jewish	<1%	2%
Muslim	<1%	2%
Hindu	<1%	1%
No preference	24%	20%