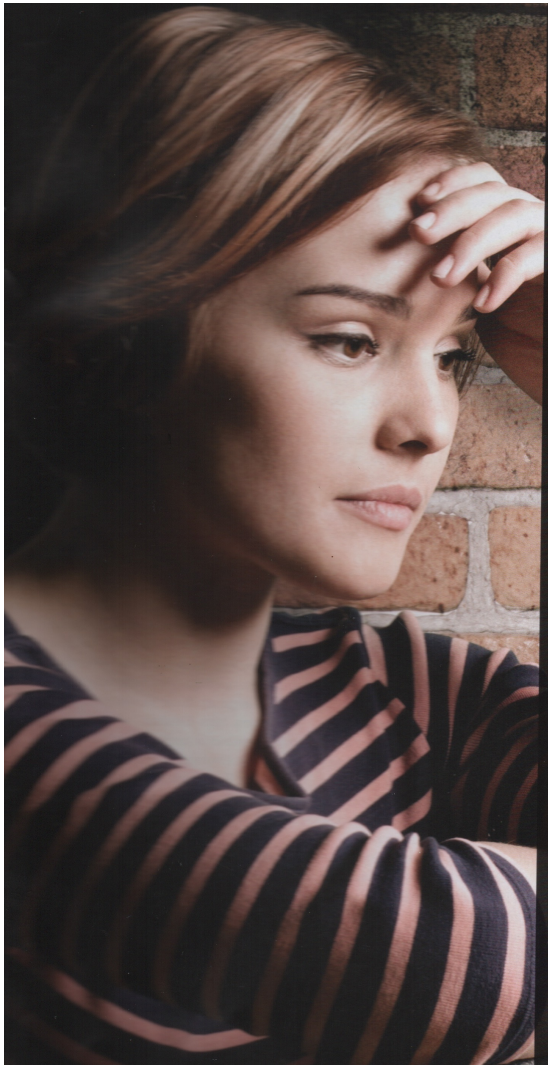


“I am tired of waking up in the morning. I am tired of walking to class. I am tired of not being passionate about the things I used to be passionate about. I am tired of making my bed. I am tired of brushing my teeth. I am tired of showering. I am tired of looking at my grades and thinking, “I can't do this, maybe I should switch majors or drop out of school.” I am tired of crying myself to sleep in my dorm room every night.”



Colleges Struggle to Meet Mental Health Demands

BY SHERYL RICH KERN

That's how MJ (not her real name), a University of NH (UNH) sophomore, describes her battles with depression in a lengthy email.

She has close friends, supportive professors and a great guy in her life. Then why is she in her dorm room crying herself to sleep every night? Her seemingly safe surroundings do nothing to dispel the sensation of a life spinning out of control. Last year, she contemplated suicide. But rather than devise such a plan, she walked into the UNH Counseling Center. An intake coordinator put her on a waiting list.

She soon got an appointment. However, “I would be assigned to a different psychologist each time I came,” she writes. With each new therapist, she gave a rundown of her symptoms, time and again. “Annoyed and dismayed by how the counseling program worked, I decided to cancel my next appointment and left the center.”

Typically, a UNH student receives an average of five therapy sessions at the UNH Counseling Center. After the initial intake session, about 65 percent of students continue with the clinician they meet at intake, says Linda Guttman, associate director of clinical services. But for a variety of reasons, including schedul-

ing, a student's gender/race/sexual orientation preference for a therapist, or the student's own choice, others may transfer to another clinician and typically stay with that clinician. "If a student requests the same clinician, we are happy to try to meet that request for intake or therapy," Guttman says.

Many students like MJ are dealing with mental health issues, and that has college counseling centers struggling to keep up with student need for services.

The UNH Counseling Center is seeing a 60 percent spike in students requesting services compared to a decade ago, says Guttman. National data is comparable. Penn State's Center for Collegiate Mental Health found demand for counseling at colleges nationwide grew five times faster than average enrollment. The past five years of data suggest students seeking services are more likely to have suicidal thoughts and exhibit self-injurious behaviors.

During the 2015-16 academic year, the UNH Counseling Center serviced 1,224 students and sent 42 to the hospital. Add the rising college enrollments and the UNH Counseling Center is, like many on-campus mental health centers, racing to keep up with demand. To offer group therapy sessions, individual counseling and crisis services, the UNH Counseling Center is staffed with 11 staff psychologists, three doctoral interns and three post-doctoral fellows. The center also has a consulting psychiatrist.

So why are students facing these mental health issues? College counselors in NH point to an influx of students with pre-existing diagnoses like autism or attention deficit disorder. Previously, these students would not have attended college. Others emphasize that mental illness is less tainted with shame, allowing people to seek help.

Between 33 and 38 percent of students using the services of the UNH Counseling Center have been prescribed psychotropic medications, says Guttman. The most recent annual survey conducted by the Association for University and College Counseling Centers Directors (AUCCD) shows that 47 percent of students seek treatment for anxiety or depression, and a fifth are contemplating suicide. Violent incidents on campuses nationwide contribute to anxiety, say many experts. And while social networks bolster support system, they also foster friendships that are more superficial



COURTESY OF ALLISON SONIA

Allison Sonia, far right, with members of Keene State College's chapter of Active Minds

Counseling at College

MJ's struggles were not her first. In high school, she took Lexapro, a selective serotonin reuptake inhibitor prescribed for depression and anxiety.

For students like MJ, extensive monitoring, particularly with medications, is beyond the scope of what most campus centers offer. And the shortage of psychiatrists in the seacoast "is a problem for all mental health professionals who practice here," says Guttman.

Not surprisingly, staffing shortages can create issues with scheduling. Kimberly Young, a 29-year-old grad student in literature at UNH, sought help during a rocky marriage. During couples counseling, the therapist helped her navigate the dynamics of the relationship, says Young, who eventually divorced.

But when she wanted to arrange individual counseling, she found the hours limiting. "Normally they would schedule a time I wasn't near campus," says Young, who lives in Dover, "and that was most of the time since I only had class once a week. I would drive all the way in and get frustrated."

A little more than half of college counseling center directors who responded to the AUCCD survey anticipate hiring more staff to meet the crunch. Similarly, the UNH Counseling Center is adding a 12th psychologist to its roster for this fall.

Sheila Lambert, director of the Wellness Center at Southern NH University (SNHU) in Manchester, says helping students starts with outreach.

At the semester's start, counselors host a "friends helping friends" event in SNHU freshmen dorms, where they display materials on depression, suicide and substance abuse. "This is an opportunity for counselors to meet the students in their own space in a non-threatening way," says Lambert. "The

casual conversations open up doors to students who may follow up with counseling."

Since Lambert arrived in 2008, the department has grown from only one university counselor to two university counselors, a senior counselor and an assistant director, all who see students with mental health and substance abuse issues. The counselors treat on average six students a day. Just in the last year, Lambert says the center experienced a 58 percent increase in demand for counseling services and a 100 percent increase in after-hours emergency calls.

Pamela Graesser retired this spring from her role as director of counseling and wellness at Rivier University in Nashua. She began with the college in 1991. That was back in the day when students came to her office to discuss squabbles with roommates.

No longer are these the run of the mill encounters, says Graesser, who saw dramatic increases in anxiety after 24/7 media reports on terrorism, beginning with Sept. 11, 2001. "Their world became scarier after Virginia Tech and Columbine. And now it's the only world they know."

Lack of Coping and Adaptability

Access to cell phones and WiFi means people can learn anything about anyone, anywhere. Getting a ride via Uber or Lyft, or directions from Google maps when lost creates the expectation gratification is immediate.

Imagine the response when a professor doesn't get back to a student right away, says Graesser. Many of today's college students have no "frustration tolerance," she says.

Brian Quigley, director of Keene State College's (KSC) Counseling Center in Keene, agrees, noting some students lack coping skills: "Their parents desperately want them to succeed," he says, and nurture their talents with coaches and tutors.

“They’re used to winning and getting trophies,” he says. That may help build confidence, says Quigley, but not the resilience they need when “they hit the real world.”

Quigley says society is facing a “loneliness epidemic” as ubiquitous social media creates a wider network of “friends” that often are an illusion of companionship. For students stumbling to develop personal relationships, technology hinders other more personal means of contact.

Peer Support

For some in college, the angst to appear confident and competent provokes heart-stopping palpitations and sweaty palms.

KSC senior Allison Sonia wants to help. Sonia is a psychology major from Lee and president of the KSC chapter of Active Minds, a nonprofit devoted to raising awareness of mental health issues among college students. “We face a lot of pressure to find jobs and make money in today’s economy,” says Sonia, with a nod towards a post-graduation life steeped in tuition debt.

Sonia turned to Active Minds after two high school friends attempted suicide. Those events sparked her efforts to educate

people about the effects of mental illness.

“As common as mental illness is, it shouldn’t be taboo,” says Sonia, who promotes open discussions about anxiety and depression. In April, the KSC chapter host-



COURTESY OF CHARLIE HAYCOCK

Stop the Stigma members Kirstin Pesaresi, left, and Chelsea Bonollo make latex glove stress balls for an event at UNH.

ed a panel on mental illness and the stigmas associated with it. The group also works with the college counseling center to help classmates intervene when they see warning signs of eating disorders and suicidal tendencies among their peers.

UNH has a similar student group called “Stop the Stigma.” Charlie Haycock of

Derry, who graduated this past May, was its president. Haycock says he remembers a summer between sophomore and junior year when he struggled to get out of bed. “As time went on, I had feelings of inadequacies. I made a plan to kill myself. But then I snapped out of it and sought the help of a local therapist.” Haycock says his experience is more widespread than most students realize.

Haycock credits the counseling center for generating programs like Kognito, an online training program for suicide awareness. Susan Horne, a UNH visiting assistant professor of decision sciences, offers Kognito for extra credit. In two years, 600 students accepted the assignment, and Horne says she receives positive feedback about it.

She recalls a young woman who after taking the Kognito course, said she needed counseling to avoid harming herself. That was the last Horne saw of her until 2015 when, Horne says, “She said the program saved her life.”

Meanwhile, Guttman braces for the center’s busiest month—September, when “our phones are ringing off the hook.” ■



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