

## Introduction

The Student Services Survey was initiated by the Counseling staff of the Student Center for Health and Counseling to collect data from BSU students regarding the causes of the 50% drop in demand for counseling services during the Fall 2011 Semester. Two major changes occurred this semester that are assumed to play some role in the drop in demand: the SCHC was relocated to Cedar Hall, and the SCHC began billing for counseling services.

The survey was sent via email to all BSU students enrolled during the Fall 2011 semester for one or more on-campus classes, approximately 3700 students. The survey ran from 11/28/2011 through 12/11/2011. A total of 545 students responded, yielding a 14.7% response rate.

## Survey Findings

The results of this survey suggest that several factors contributed to the decline in demand for counseling services this semester. These factors are summarized and described below.

1. Some students are not aware that counseling services are available on campus.

The survey asked "*Does BSU have counseling services available on campus?*" 88% of respondents correctly answered yes; 12% answered no or don't know. This compares to 92% of respondents who correctly knew that medical health services are available on campus, with only 8% who were not aware of the availability of these services.

2. One fourth of the student respondents were not aware of the location of the SCHC.

Question 3 asked "*Do you know where the Student Center for Health and Counseling (SCHC) is?*" 73.9% said yes, 26% said no.

3. The majority of students were not aware that SCHC is now billing for counseling services.

Two thirds of the student respondents were not aware that SCHC began billing for counseling services, 31% answered yes to the question asking if you have to pay for any counseling services you receive, 22% said no, and 47% didn't know.

4. Students' lack of information about their health insurance coverage was apparent.

A surprisingly high 91% of student respondents indicated that they have health insurance, but only 33% of these students indicated that their health insurance covered mental health services, 6% said no, and 61% didn't know whether their policies provided mental health coverage.

The other 9% who do not have health insurance were asked why they do not. Over half of these, 57%, said they would like to have insurance but it's too expensive; the others gave a variety of reasons including that they have free services available through the Indian Health Services, that their parents lost their coverage, and that they have applications pending for Medical Assistance or Minnesota Care.

5. Although not directly relevant to the decline in demand for counseling services this semester, the survey asked if students were aware that BSU is mandating health insurance coverage beginning next semester. This question elicited a large number of angry and oppositional comments. 94% of respondents were aware of this new policy, only 6% were not.
6. In an attempt to determine what percentage of all enrolled students were likely candidates for counseling services, the survey asked "Have you ever considered or been recommended for counseling/mental health services?" 29% - 159 students - responded yes, 71% said no. Of this 29%, 70% (112 students) actually sought such services. And of those 112 students, 38% (42 students) received counseling services here at the SCHC.
7. Only a relative minority of students who were potential candidates for counseling services declined services or obtained them off campus due to financial reasons related to SCHC's new policy of billing for services.

Of those students who were potential candidates for counseling services but chose not to seek such services, the survey asked them to explain why they declined services. Only 6 of the 40 students, 15%, responded that they chose not to go for financial reasons (too expensive, no insurance or inadequate mental health coverage, can't afford it).

Of the 70 students who did seek counseling services but did not go to the SCHC for such services only 6 (9%) went elsewhere for services for financial reasons (too expensive, no insurance, health insurance didn't cover it or had unaffordably high deductibles or copays), although presumably they would have had to pay for such services with an off-campus provider), although presumably they would have had to pay for such services with an off-campus provider.

8. Although a very small number of student respondents reported that they received counseling services at the SCHC this semester (18 out of 545 total respondents – 3%), 90% of all student respondents believe that it is important to have counseling services available on campus.

*How important is it to have counseling services available on campus?*

Extremely important – 153/28%  
Very important - 201/37%  
Somewhat important - 134/25%

Not very important – 33/6%  
Not at all important – 18/3%

9. Respondents were offered an opportunity to add any additional comments or suggestions. 90 students gave responses (16.7%). Of these responses, 19 (21%) commented about the expense or affordability of counseling services, offering additional evidence that charging for counseling services was a contributing factor in the decline in demand for services this semester: (*“Counseling should be free...Making students pay for the service will turn students away that need the help but can’t afford it...it discourages them especially when in a time of need... They don’t want their parents to know...I am distraught and frustrated to think that such a valuable service may be unavailable because of adding charges to a once free service. If possible, please revert this!”*)

The largest number of the comments, 41 of 90 (45%), expressed anger and opposition to the mandatory health insurance policy.

### **Summary and Conclusions**

The findings of this survey suggest that there are a number and variety of reasons contributing to the very significant drop in demand for counseling services this semester. No single reason appears strongest. Survey results provided only limited evidence to support our hypothesis that the drop was due to the new fee for services policy.

Lack of health insurance does not appear to be a major factor in causing the drop in demand, given that 91% of respondents report having health insurance, although few knew whether they had coverage for counseling services. However, the cost of insurance, the cost of deductibles and copays, and the confidentiality concerns for students covered on parents’ policies were all cited as reasons for declining to seek counseling services.

A more surprising finding was that the move to Cedar Hall this semester was a strong factor in the decline in demand for services, with a quarter of the respondents reporting that they don’t know where to find the SCHC.

The timing of this survey shortly after students were officially and individually informed of the mandatory health insurance policy starting in Spring 2012 semester appears to have elicited many very strong comments and complaints. Although our survey was not directed toward this policy, the new mandatory health insurance requirement is closely identified with health and counseling services and to that extent this policy may also be a contributing factor in the decline in demand for counseling services.

Completed by:  
Lawrence Hanus MA LP  
Clinical Director of Counseling Services