The COLLEGE and UNIVERSITY COUNSELING CENTER

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ALLEN E. IVEY
RICHARD G. WEIGEL

STUDENT PERSONNEL SERIES No. 11

AMERICAN COLLEGE PERSONNEL ASSOCIATION
A division of the American Personnel and Guidance Association
THE COLLEGE AND UNIVERSITY COUNSELING CENTER

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The monographs in the Student Personnel Series are available from
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1607 New Hampshire Avenue, N. W., Washington, D.C. 20009

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ACKNOWLEDGMENTS

THE SURVEYS PRESENTED in this monograph were supported by Grant OE-5-10-302 of the U.S. Office of Education. We are grateful to the Journal of Higher Education for permission to reprint material in Chapter 7 which was originally published in the October 1966 article, "The Counselor in the Small College." We also wish to thank the Rocky Mountain Behavioral Science Institute, Inc., for permission to reproduce the Counseling Services Assessment Blank.

We would further like to express our appreciation to a number of individuals for the time and effort they contributed to the preparation of this monograph. Ralph Berdie, Dave Danskin, Bill Gilbert, Tom Magoon, John McGowan, Ted Volsky, and Ed Williamson all helped to form the surveys with their comments and criticism. Many other directors and former directors contributed long hours in bull sessions at annual meetings of the Counseling Center Administrators' Conference, the American Personnel and Guidance Association, and the American Psychological Association. The comments of Jim Hawkes, Wes Morrill, Chuck Warnath, and John Wine were particularly discerning and valuable. In addition, we would like to thank the many counseling directors who participated in the surveys.

We are particularly grateful to Carol Dulaney, who helped to construct the original surveys, tabulated data, programmed the computer, constructed tables, proofed manuscripts, and cheerfully and efficiently assisted us in many ways. We also wish to thank Ruth Edwards and Jo Cervantes who typed the manuscript again and again, and to Virginia Weigel for her critical editing of it.

Our final thanks go to our wives, Betty Oetting, Betty Ivey, and Virginia Weigel, for helping us through the years when we were administering counseling centers, and who have expressed their own gratitude with sighs of relief as we moved on to become mere professors.

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CHAPTER 1

The Counseling Center

Although counseling in the college or university setting has been the subject of a number of recent books (e.g., Heston & Frick, 1968; Kemp, 1964; Siegel, 1968), there has been no attempt to focus on the primary agency through which the great portion of campus counseling is done. The literature tends to deal with counseling theory, career guidance, testing, educational skill development, psychotherapy, and similar topics. This monograph focuses instead on the agency that provides these services—the counseling center.

One goal of this monograph is to present an information resource about the counseling center as it exists today, to examine the personnel, clientele, and physical facilities of the counseling center as well as the theoretical models dictating the services provided. In addition, future directions for the counseling center are suggested that stress its potential for becoming “...the center of campus life and activity” (Penny, 1969, p. 960).

The Need for Information Exchange

To be most effective, the administrator of any agency must have the opportunity for cross-fertilization of ideas with professional colleagues sharing common interests and concerns. The counseling center administrator is no exception. To meet this need for communication, administrators of counseling centers from across the United States have met at an annual invitational conference since 1952 to discuss problems and issues in the administration of their centers. Directors have wanted to learn about the structure and functions of other centers. They have felt the need to compare their present agency situation with that of others, and to compare projections for future years. Such information can often provide helpful “ammunition” in the counseling center administrator’s perpetual struggle for additional staff and financing. More importantly, it suggests innovative services and procedures to optimize the center’s ongoing role in the college and university setting.

An indication of the growth of counseling centers and the increasing need for information exchange is reflected in the roster of the Counseling Center Administrators’ Conference, which has risen from 50 to 60 in 1952 to over 175 in 1968. This increase undoubtedly represents not only an increase in the number of counseling centers, but also the increasing variety and complexity of problems faced by the counseling administrator with the mushrooming of institutional size.

Recently, several scattered attempts have been made to place comparative administrative data in the hands of counseling center directors through mailed surveys or through professional literature. Often such data pertained to a specific topic. For example, Robert Callis (University of Missouri) and Charles Warnath (Oregon State University) have collected and distributed comparative salary data during recent years. By contrast, surveys conducted by Albert (1968), Clark (1966), Congdon and Lothrop (1962), Glazer (1964), Goertgen and Strong (1962), and Nugent and Pareis (1968) have dealt with a somewhat broader spectrum of administrative variables. The data bank, or the yearly collection and dissemination of some counseling center administrative data from 60 selected institutions, has been undertaken by Tom Magoon (University of Maryland) as a project of the Commission on Counseling (VII) of the American College Personnel Association. All such exchange of information has been welcomed by counseling center administrators.

This monograph was developed to further meet the need for information exchange among administrators of counseling centers. In particular, it was designed to present in one source information pertinent to many broad issues in agency administration and planning.

Sources of Data

The primary sources of data were two surveys—one asking institutions whether they provide counseling facilities, the second asking the counseling director to
report on staffing patterns, administrative issues, and functions served by the center.

The first survey was conducted during the summer of 1965. Questionnaires were sent to the presidents of the 1,155 colleges and universities in the United States conferring the bachelor's degree (with the exception of a few specialized schools training in only one limited area, such as chiropractic or optometry). Each president was asked to indicate the name of the individual responsible for counseling on his campus. This questionnaire is presented in Appendix A. Seventy-five percent (N = 869) of the institutions responded, with 603 providing the name of the counseling director.

The second questionnaire was constructed from specific questions generated at the Counseling Center Administrators' Conference (see Appendix B). During the spring of 1966 this questionnaire was mailed to the 603 counseling directors identified by the first survey. Second and third follow-up letters were sent to those administrators not replying. The usable return was 47 percent (N = 286). Evaluation of the return did not suggest any particular sampling bias.

The interpretations, commentary, and projections have been aided by the authors' experience in the administration of counseling centers, and also by discussions with other counseling center directors both before and since the surveys. The value framework underlying our comments should probably be made explicit. We feel that the counseling center should not be an isolated service, dealing with problems only after they have become severe. Rather, it should function actively to provide remedial, preventive, and developmental programs for the entire campus community. Our occasional intolerance should be interpreted as simply an outgrowth of these feelings.

Who Has Counseling Centers?

One of the first findings gleaned from the surveys was the availability of college and university counseling services in the United States. As noted, of the 869 colleges and universities responding to the first questionnaire, 69 percent (N = 603) indicated that they did have such an agency. In similar surveys, Albert (1968) and Nugent and Pareis (1968) found that 71 percent and 59 percent, respectively, of the institutions that responded had a counseling center.

In addition, many other schools indicated that they were in the process of establishing such a center. Several schools sent extensive materials indicating either a well-developed faculty advising system or a series of personnel services that overlapped the counseling function. Interestingly, a few institutions with counseling facilities whose directors we knew sent replies to the first survey stating that they had no center, or listed faculty advising instead of counseling. The counseling centers on these particular campuses had not been very effective in publicizing their existence or their functions, at least not to the president or his assistants.

As Table 1 indicates, a positive relationship existed between the size of the institution and the reported existence of a counseling facility. In the smallest schools almost half indicated no service, while more than 90 percent of the institutions with an enrollment of over 4,000 had a counseling center. This relationship is probably even more powerful since over two-thirds of the institutions that did not respond to the ques-

<table>
<thead>
<tr>
<th>Size of Institution</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>Percent</td>
</tr>
<tr>
<td>0–1,000</td>
<td>153</td>
<td>54</td>
</tr>
<tr>
<td>1,001–1,999</td>
<td>135</td>
<td>62</td>
</tr>
<tr>
<td>2,000–2,999</td>
<td>74</td>
<td>73</td>
</tr>
<tr>
<td>3,000–3,999</td>
<td>43</td>
<td>84</td>
</tr>
<tr>
<td>4,000–4,999</td>
<td>38</td>
<td>90</td>
</tr>
<tr>
<td>5,000–5,999</td>
<td>23</td>
<td>85</td>
</tr>
<tr>
<td>6,000–9,999</td>
<td>63</td>
<td>90</td>
</tr>
<tr>
<td>Over 10,000</td>
<td>74</td>
<td>96</td>
</tr>
<tr>
<td>Total</td>
<td>603</td>
<td></td>
</tr>
</tbody>
</table>

As Table 2 indicates, there was no relationship between the geographic distribution of the colleges and universities and the existence of a counseling facility. Counseling, as a function of higher education, seems equally accepted across the country. It may be ob-
served that although the differences are not great, the northeast, traditional center of American higher education, tends to have the lowest percentage of schools with counseling centers. The northeastern United States, however, also has more small colleges, which probably accounts for this slight difference.

<table>
<thead>
<tr>
<th>Area</th>
<th>Yes</th>
<th>Percent</th>
<th>No</th>
<th>Percent</th>
<th>Total</th>
</tr>
</thead>
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<td>152</td>
<td>62.81</td>
<td>90</td>
<td>37.19</td>
<td>242</td>
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<tr>
<td>Midwest</td>
<td>112</td>
<td>70.89</td>
<td>46</td>
<td>29.11</td>
<td>158</td>
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<tr>
<td>Central</td>
<td>53</td>
<td>75.71</td>
<td>17</td>
<td>24.29</td>
<td>70</td>
</tr>
<tr>
<td>Mountain</td>
<td>30</td>
<td>83.33</td>
<td>6</td>
<td>16.67</td>
<td>36</td>
</tr>
<tr>
<td>West Coast</td>
<td>67</td>
<td>70.53</td>
<td>28</td>
<td>29.47</td>
<td>95</td>
</tr>
<tr>
<td>Southwest</td>
<td>53</td>
<td>77.94</td>
<td>15</td>
<td>22.06</td>
<td>68</td>
</tr>
<tr>
<td>South</td>
<td>57</td>
<td>67.06</td>
<td>28</td>
<td>32.94</td>
<td>85</td>
</tr>
<tr>
<td>Mid-Atlantic</td>
<td>79</td>
<td>68.70</td>
<td>36</td>
<td>31.30</td>
<td>115</td>
</tr>
<tr>
<td>Total</td>
<td>603</td>
<td>266</td>
<td>869</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note.—See Appendix C for states represented in each area.

<table>
<thead>
<tr>
<th>Size of Institution</th>
<th>Number of Institutions</th>
<th>Percentage of Total Enrollment Counseled</th>
</tr>
</thead>
<tbody>
<tr>
<td>0–1,000</td>
<td>52</td>
<td>.58</td>
</tr>
<tr>
<td>1,001–4,999</td>
<td>144</td>
<td>.34</td>
</tr>
<tr>
<td>5,000–9,999</td>
<td>53</td>
<td>.24</td>
</tr>
<tr>
<td>10,000–14,999</td>
<td>23</td>
<td>.27</td>
</tr>
<tr>
<td>15,000–19,999</td>
<td>5</td>
<td>.29</td>
</tr>
<tr>
<td>20,000 and up</td>
<td>9</td>
<td>.16</td>
</tr>
<tr>
<td>Total sample</td>
<td>286</td>
<td></td>
</tr>
</tbody>
</table>

How Many Students Use Counseling Centers?

In the second survey, counseling center directors were asked to estimate or report the proportion of students who used the counseling facility during their academic career. In institutions with counseling agencies, these estimates varied from 2 percent to 99 percent.

As indicated in Table 3, an inverse relationship between the size of the institution and the percentage of students seen by the counseling center emerged. In this case, the smaller institution lives up to its reputation for greater individual contact with the students. In schools of fewer than 1,000 students, over half of the enrollment will see a counselor. This percentage drops off rapidly to about one-fourth for larger schools, and remains relatively constant except for universities of over 20,000 students, where it drops to about 15 percent.

Summary

More and more, our colleges and universities are recognizing that students need on-campus professional counseling. The acceptance of the counseling facility as an integral unit of the campus has spread to over two-thirds of the institutions of higher education, distributed relatively equally across the United States and encompassing as many as 80 percent of all students. There is, however, a positive relationship between the size of a school and the availability of a counseling facility, quite possibly as a function of expense. Nevertheless, a greater proportion of students at smaller colleges are more likely to use counseling services than are their peers at larger universities.

The increasing number and size of counseling centers, as well as their expanding functions, point to the need for ready information exchange between counseling center administrators.
CHAPTER 2

The Counseling Center Administrator

The counseling center is not, of course, a completely autonomous entity. As any service or agency in the college or university, its niche in the administrative structure of the institution is strictly circumscribed. This chapter examines the typical placement of the counseling center within that structure. The counseling center director, who is responsible to higher administration for the operation of the center, is also described. His many duties, not all of which are administrative, are examined, as is his tendency to overwork.

Administrative Organization of the Counseling Center

In order to determine the administrative structure, the counseling director was asked to diagram the direct line of authority for the counseling service. Some relatively clear patterns emerged from the data. Counseling is generally administered through student personnel, and the director of counseling usually reports to the dean of students. Rarely are alternative routes found. In a few schools the director reports to an academic dean, while in a handful of small institutions counseling is part of the psychology or education departments. Except for the rare situation in which the center is primarily a training facility for a department offering the doctorate in counseling, counseling psychology, or clinical psychology, counseling is almost never under the aegis of an academic department in the larger universities. A similar pattern of counseling center administration is reported by Albert (1968).

Figure 1 illustrates the most common pattern of administrative organization: A counseling director reports to a dean of students who, in turn, reports to a vice president for administration. The dean of students may report directly to the president in some cases, particularly in smaller institutions. It should also be observed that although the dean of students has been given the title of vice president in some institutions, the same administrative channels appear to remain in effect.

Directors have been relatively well satisfied with administrative arrangements, and few complaints regarding this area were noted in the survey. Similarly, in the Nugent and Pareis (1968) survey, only 18 percent of the counseling directors surveyed felt they would like to change administrative structures. Nevertheless, the typical administrative structure has led to serious problems on some campuses. Unfortunately, this structure tends to isolate counseling personnel from the academic faculty, and counseling comes to be seen as an ancillary service having only secondary educational relevance. As a first step in facilitating a rapprochement between the goals of counseling and the rest of the academic community, counseling personnel must recognize educational relevance as the major goal of their services. As stated by the University of Texas Ad Hoc Committee on Student Counseling (1966), "... the principal task of the University is educational, not primarily that of providing health services, important though their expansion is." With such a focus, changes in the administrative structure could evolve and lead to closer communication between the classroom teacher and counseling personnel.
TABLE 4
Counseling Director's Educational Level in Relation to the Size of the Institution

| Size of Institution | N   | PhD |   |   | EdD |   |   |   | MA |   |   |   | BA |   |   |   | N  |   |   |   | Percent |
| 1–999               | 52  | 14  | 27|   | 13  | 25|   | 23| 44|   | 2  | 4 |   |   |   |   | 288| 126| 44|   |   |   |   |
| 1,000–4,999         | 144 | 64  | 44|   | 34  | 24|   | 46| 32|   | 0  | 0 |   |   |   |   |   |   |   |   |   |   |
| 5,000–9,999         | 55  | 24  | 44|   | 21  | 38|   | 10| 18|   | 0  | 0 |   |   |   |   |   |   |   |   |   |   |
| 10,000–14,999       | 22  | 14  | 64|   | 6   | 27|   | 2 | 9 |   | 0  | 0 |   |   |   |   |   |   |   |   |   |   |
| 15,000–19,999       | 5   | 4   | 80|   | 1   | 20|   | 0 | 0 |   | 0  | 0 |   |   |   |   |   |   |   |   |   |   |
| 20,000 and up       | 10  | 6   | 60|   | 2   | 20|   | 1 | 10|   | 1  | 10|   |   |   |   |   |   |   |   |   |   |
| Total               | 288 | 126 | 44|   | 77  | 27|   | 82| 28|   | 3  | 1 |   |   |   |   |   |   |   |   |   |   |

Internal organization of counseling centers varies and depends so greatly on the services they offer that it is almost impossible to generalize about them. Most larger centers have one or more assistant or associate directors whose responsibilities range from general administration to specific and limited activities such as supervision of training, research and testing, or residence hall programs. Although in larger centers they may be responsible to an assistant director for service or for administration, staff counselors typically report to the director.

The Counseling Center Director

The counseling center director is a very busy, highly trained specialist. Here we will first give consideration to his educational background and his ongoing professional memberships, then make an inventory of his many duties. While there are great differences in appointments and duties, the one commonality is that the job requires more than 40 hours a week: Almost all directors appear to be operating on an overload basis!

EDUCATION

The majority of counseling directors responding to the survey hold the doctor's degree, and most of these have the PhD. A significant number, however, have an MA, whereas only a very few indicated a BA. Table 4 shows that the size of the institution is related to the academic degree the director holds. As the size of the institution increases, the degree is more likely to be a PhD than an EdD—except in schools with a strong teacher training emphasis, where the director is more likely to have an EdD.

As seen in Table 5, there are minor regional differences in the backgrounds of counseling directors, with southern institutions more frequently having directors with a master's degree.

PROFESSIONAL MEMBERSHIPS

The American Personnel and Guidance Association appears to be the primary professional organization counseling directors belong to. According to Table 6, however, a high percentage of those with a PhD belong to the American Psychological Association.

TABLE 5
Counseling Director's Educational Level in Relation to Geographical Areas

<table>
<thead>
<tr>
<th>Area</th>
<th>PhD</th>
<th></th>
<th>EdD</th>
<th></th>
<th>MA</th>
<th></th>
<th>BA</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Northeast</td>
<td>30</td>
<td>51</td>
<td>10</td>
<td>17</td>
<td>17</td>
<td>29</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Midwest</td>
<td>28</td>
<td>45</td>
<td>15</td>
<td>24</td>
<td>19</td>
<td>31</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Central States</td>
<td>11</td>
<td>33</td>
<td>11</td>
<td>33</td>
<td>11</td>
<td>33</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Mountain States</td>
<td>9</td>
<td>41</td>
<td>7</td>
<td>32</td>
<td>6</td>
<td>27</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>West Coast</td>
<td>21</td>
<td>58</td>
<td>8</td>
<td>22</td>
<td>6</td>
<td>17</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Southwest</td>
<td>6</td>
<td>23</td>
<td>11</td>
<td>42</td>
<td>9</td>
<td>35</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>South</td>
<td>5</td>
<td>20</td>
<td>8</td>
<td>33</td>
<td>11</td>
<td>46</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Mid-Atlantic</td>
<td>16</td>
<td>62</td>
<td>7</td>
<td>27</td>
<td>3</td>
<td>12</td>
<td>0</td>
<td>0</td>
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TABLE 6
Counseling Director's Educational Level in Relation to Professional Memberships

<table>
<thead>
<tr>
<th>Degree</th>
<th>APA</th>
<th></th>
<th>APA</th>
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<th>APA &amp; APA</th>
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<tr>
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<td>101</td>
<td>80</td>
<td>85</td>
<td>67</td>
<td>64</td>
<td>51</td>
<td>4</td>
<td>3</td>
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<td>EdD</td>
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<td>48</td>
<td>64</td>
<td>83</td>
<td>30</td>
<td>39</td>
<td>6</td>
<td>8</td>
</tr>
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<td>MA</td>
<td>14</td>
<td>17</td>
<td>58</td>
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<td>BA</td>
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<td>33</td>
<td>2</td>
<td>66</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
ADMINISTRATIVE DUTIES

There is a direct relationship between the size of the institution and the amount of time the director spends in the administration of the center (see Table 7). Slightly more than 10 percent of the director's time is required in the smallest schools, while almost 50 percent of his time is needed in the largest institutions. A rough estimate of the average percentage of time required for administration by counseling directors can be obtained by multiplying the school enrollment by .0015 and adding 10 percent. Of course, individual requirements will vary around this estimate depending on local situations.

COUNSELING DUTIES

Very few counseling directors (including those at the smallest institutions) serve as full-time counselors. As might be expected, moreover, the amount of time a director spends counseling tends to decrease as the size of the college or university increases (see Table 8). The mode for all directors is 50 percent except in the largest institutions. Thus the large majority of directors see counseling as one of their responsibilities, and many spend considerable time at this activity. The number of client interviews that a director holds varies, even when the percentage of time in counseling is accounted for. For example, Table 9 indicates that the mode for directors who say they spend about a quarter of their time in counseling is 20–24 interviews per week. This number would be more characteristic of a full-time counselor's load. Thus, directors who report less counseling time have heavier work loads than those who have more time to conduct the same number of interviews.

<table>
<thead>
<tr>
<th>Percent of Time Counseling</th>
<th>Number of Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>10–14</td>
<td>2</td>
</tr>
<tr>
<td>15–19</td>
<td>3</td>
</tr>
<tr>
<td>20–24</td>
<td>4</td>
</tr>
<tr>
<td>25–29</td>
<td>5</td>
</tr>
<tr>
<td>30–39</td>
<td>6</td>
</tr>
<tr>
<td>35–40</td>
<td>7</td>
</tr>
</tbody>
</table>

TABLE 9

Counseling Directors' Client Interviews Per Week

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1–999</td>
<td>51</td>
<td>12.7</td>
<td>22</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1,000–4,999</td>
<td>143</td>
<td>12.6</td>
<td>22</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5,000–9,999</td>
<td>53</td>
<td>21.5</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10,000–14,999</td>
<td>23</td>
<td>30.8</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15,000–19,999</td>
<td>4</td>
<td>38.7</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20,000 and up</td>
<td>9</td>
<td>45.2</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TABLE 7

Time Counseling Directors Commit to Administration

<table>
<thead>
<tr>
<th>Size of Institution</th>
<th>N</th>
<th>Mean Percentage for Those Indicating Administrative Time Commitment</th>
<th>Percentage Indicating No Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>1–999</td>
<td>51</td>
<td>12.7</td>
<td>22</td>
</tr>
<tr>
<td>1,000–4,999</td>
<td>143</td>
<td>12.6</td>
<td>22</td>
</tr>
<tr>
<td>5,000–9,999</td>
<td>53</td>
<td>21.5</td>
<td>2</td>
</tr>
<tr>
<td>10,000–14,999</td>
<td>23</td>
<td>30.8</td>
<td>0</td>
</tr>
<tr>
<td>15,000–19,999</td>
<td>4</td>
<td>38.7</td>
<td>0</td>
</tr>
<tr>
<td>20,000 and up</td>
<td>9</td>
<td>45.2</td>
<td>0</td>
</tr>
</tbody>
</table>

TABLE 8

Time Counseling Directors Commit to Counseling

<table>
<thead>
<tr>
<th>Size of Institution</th>
<th>N</th>
<th>Mean Percentage for Those Indicating Counseling Time Commitment</th>
<th>Percentage Indicating No Counseling</th>
</tr>
</thead>
<tbody>
<tr>
<td>1–999</td>
<td>53</td>
<td>51.87</td>
<td>00.00</td>
</tr>
<tr>
<td>1,000–4,999</td>
<td>139</td>
<td>48.85</td>
<td>3.47</td>
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<tr>
<td>5,000–9,999</td>
<td>53</td>
<td>42.32</td>
<td>00.00</td>
</tr>
<tr>
<td>10,000–14,999</td>
<td>22</td>
<td>29.23</td>
<td>4.35</td>
</tr>
<tr>
<td>15,000–19,999</td>
<td>5</td>
<td>25.00</td>
<td>00.00</td>
</tr>
<tr>
<td>20,000 and up</td>
<td>7</td>
<td>10.00</td>
<td>22.22</td>
</tr>
</tbody>
</table>

TABLE 10

Time Counseling Directors Commit to Staff Meetings

<table>
<thead>
<tr>
<th>Size of Institution</th>
<th>N</th>
<th>Mean Percentage for Those Indicating Meetings</th>
<th>Percent Indicating No Staff Meeting</th>
</tr>
</thead>
<tbody>
<tr>
<td>1–999</td>
<td>33</td>
<td>6.36</td>
<td>28.33</td>
</tr>
<tr>
<td>1,000–4,999</td>
<td>101</td>
<td>5.47</td>
<td>29.37</td>
</tr>
<tr>
<td>5,000–9,999</td>
<td>47</td>
<td>5.51</td>
<td>12.96</td>
</tr>
<tr>
<td>10,000–14,999</td>
<td>22</td>
<td>8.14</td>
<td>4.35</td>
</tr>
<tr>
<td>15,000–19,999</td>
<td>5</td>
<td>7.20</td>
<td>0.00</td>
</tr>
<tr>
<td>20,000 and up</td>
<td>8</td>
<td>10.75</td>
<td>11.11</td>
</tr>
</tbody>
</table>

STAFF AND COMMITTEE MEETING DUTIES

The time counseling directors spend in staff meetings is presented in Table 10. Almost half of the directors in institutions with an enrollment under 5,000 report that they spend no time in staff meetings. This probably means that the staff is small enough that such meetings are informal, and occur as the need arises. Interestingly, about a fourth of the directors in larger institutions also indicate no time in this activity, suggesting the possibility that they have made staff meetings the responsibility of an associate or assistant director. Among those indicating some time commitment to staff meetings, the mean amount is about 8 percent regardless of school size. This probably represents the traditional weekly staff meeting.
In addition, over 75 percent of these directors spend some time each week in administrative and faculty committee meetings. Among those with committee involvement, the mean time spent was about 9 percent, regardless of the school’s size. While 9 percent may seem a small proportion of the director’s load, it actually represents almost a half day devoted to weekly committees.

RESEARCH DUTIES

A significant research commitment by counseling directors is most frequent in the institutions ranging from 5,000 to 15,000 students, as presented in Table 11. It is possible that directors in smaller institutions are more heavily involved in counseling, and that there is less pressure for publication. Similarly, the administration of the center in the largest institutions may be so time-consuming that research time must be minimal for the director.

<table>
<thead>
<tr>
<th>Size of Institution</th>
<th>N</th>
<th>Mean Percentage for Those Indicating Some Research</th>
<th>Percent Indicating No Research</th>
</tr>
</thead>
<tbody>
<tr>
<td>1–999</td>
<td>23</td>
<td>11.65</td>
<td>54.90</td>
</tr>
<tr>
<td>1,000–4,999</td>
<td>68</td>
<td>9.06</td>
<td>52.78</td>
</tr>
<tr>
<td>5,000–9,999</td>
<td>40</td>
<td>10.08</td>
<td>24.53</td>
</tr>
<tr>
<td>10,000–14,999</td>
<td>21</td>
<td>11.05</td>
<td>8.70</td>
</tr>
<tr>
<td>15,000–19,999</td>
<td>3</td>
<td>8.33</td>
<td>40.00</td>
</tr>
<tr>
<td>20,000 and up</td>
<td>5</td>
<td>13.60</td>
<td>44.44</td>
</tr>
</tbody>
</table>

As might be expected, Table 12 indicates that directors with PhD’s are most likely to be involved in research. Somewhat fewer EdD’s and even fewer directors with MA’s spend time in research. Among all those individuals who commit some time, however, the mean is about 11 percent, and there are no real differences that relate either to degree or to size of institution.

<table>
<thead>
<tr>
<th>Degree</th>
<th>N</th>
<th>Mean Percentage for Those Indicating Some Research</th>
<th>Percent Indicating No Research</th>
</tr>
</thead>
<tbody>
<tr>
<td>PhD</td>
<td>74</td>
<td>11.07</td>
<td>35.09</td>
</tr>
<tr>
<td>EdD</td>
<td>46</td>
<td>9.72</td>
<td>38.67</td>
</tr>
<tr>
<td>MA</td>
<td>38</td>
<td>8.58</td>
<td>51.22</td>
</tr>
</tbody>
</table>

TEACHING DUTIES

Directors at even the smallest institutions are apparently not teachers assigned part-time to the role as counseling director. Even in institutions with an enrollment of less than 1,000, about half do no teaching at all, and almost all are scheduled less than one-third of the time as teachers (Table 13). In schools ranging from 1,000 to 10,000 students, about a third of the directors do not teach; the rest teach less than half time. In larger universities, almost none teach over one-fourth of the time, although two-thirds or more of the directors do teach. For those who teach, the usual course load is three to six semester hours per semester in institutions with enrollments of less than 10,000 students, whereas teaching one course per year is more frequent in larger institutions.

As can be readily seen, counseling directors are invested in such a myriad of diverse activities it is not surprising that so many of them complain of being overloaded. The director’s dedication to his profession is undoubtedly reflected in the considerable time he continues to spend in counseling per se. However, counseling directors may also suffer from the common management flaw of being unable to pass on duties, responsibility, or authority to other members of their staff. In the rapidly expanding university and counseling center, it is clear that increased size necessarily means that more time must be dedicated to administration. This time must come from other activities. Either the director must partially withdraw from counseling, an alternative many would not prefer, or he must pass on some administrative responsibility to others. When the institution becomes large enough, there is good evidence that both will be necessary.

Summary

Counseling directors are typically administratively responsible to a dean of students, who is responsible to
a vice president for administration, who finally reports to the president. This structure is generally well accepted by counseling directors, but may have a tendency to lead to estrangement between academicians and counselors. The solution to this problem would appear to be a focus on the educational relevance of the counseling experience.

Most directors hold the doctorate, particularly if they represent a larger institution. They spend part of their time in counseling, frequently assigning 50 percent of their time to this function. Many of them also devote one-fourth of their time to teaching. The proportion of time needed for center administration depends primarily on the institution's enrollment. A number of counseling directors are active in research, most of them in institutions with enrollments of 5,000 to 15,000. Such activities as staff meetings, committee meetings, and supervision take up the remainder of their time. The director is almost invariably overworked, but much of this may be caused by his personal need to continue to counsel, combined with an inability to delegate responsibility.
CHAPTER 3

The Counselor and the Client Caseload

By far the great majority of professional counseling done on the college or university campus is undertaken by staff counselors. This chapter examines the counselor and his duties, how he allots time to his varied activities, and the nature of his client caseload. Difficulties in providing adequate case coverage are explained, as are a variety of closely related administrative issues.

The Staff Counselor

The staff counselor has traditionally been the line-worker of the counseling center—the staff member whose primary responsibility is actual client contact. Consideration will be given to his educational background, his professional identity, and his changing role.

EDUCATION

Table 14 indicates that the highest degree held by slightly over half of staff counselors is the master’s. About 40 percent hold the doctorate, one-fourth of these having EdD’s. Nearly 10 percent have only a BA, although most of these appear to be interim or training appointments.

There appear to be two different kinds of master’s level appointments. In institutions of under 5,000 students, the highest degree held by over 60 percent of the counselors is the MA, and most of these appointments are apparently as full-time counselors. Intermediate-sized institutions tend to have higher numbers of EdD’s as staff, and also include many permanent staff with MA degrees. The teachers colleges and new universities that recently were teachers colleges are likely to fall in this category. At larger institutions, there are some regular appointments for master’s level personnel, but many of these appointments are graduate assistantships or temporary staff appointments.

PROFESSIONAL MEMBERSHIPS

As was noted for counseling directors, the American Personnel and Guidance Association appears to be the primary professional affiliation of staff counselors, although professional identification is strongly related to academic degree. Table 15 shows that most of those with PhD’s belong to the American Psychological Association. By contrast, those with the EdD or MA are more likely to belong to the American Personnel and Guidance Association.

<table>
<thead>
<tr>
<th>Size of Institution</th>
<th>PhD</th>
<th>EdD</th>
<th>MA</th>
<th>BA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td></td>
<td>Percent</td>
<td>Percent</td>
<td>Percent</td>
<td>Percent</td>
</tr>
<tr>
<td>1–999</td>
<td>70</td>
<td>18</td>
<td>1</td>
<td>46</td>
</tr>
<tr>
<td>1,000–4,999</td>
<td>283</td>
<td>55</td>
<td>31</td>
<td>66</td>
</tr>
<tr>
<td>5,000–9,999</td>
<td>161</td>
<td>52</td>
<td>22</td>
<td>77</td>
</tr>
<tr>
<td>10,000–14,999</td>
<td>137</td>
<td>59</td>
<td>18</td>
<td>54</td>
</tr>
<tr>
<td>15,000–19,999</td>
<td>55</td>
<td>23</td>
<td>1</td>
<td>30</td>
</tr>
<tr>
<td>20,000 and up</td>
<td>160</td>
<td>64</td>
<td>6</td>
<td>72</td>
</tr>
<tr>
<td>Total:</td>
<td>866</td>
<td>271</td>
<td>79</td>
<td>445</td>
</tr>
</tbody>
</table>

15
### TABLE 15

Educational Level of Counseling Staff in Relation to Professional Memberships

<table>
<thead>
<tr>
<th>Degree</th>
<th>APA</th>
<th>APA &amp; APA</th>
<th>No Response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>Percent</td>
<td>N</td>
</tr>
<tr>
<td>PhD</td>
<td>190</td>
<td>70</td>
<td>108</td>
</tr>
<tr>
<td>EdD</td>
<td>37</td>
<td>46</td>
<td>49</td>
</tr>
<tr>
<td>MA</td>
<td>77</td>
<td>15</td>
<td>198</td>
</tr>
<tr>
<td>BA</td>
<td>1</td>
<td>1</td>
<td>12</td>
</tr>
</tbody>
</table>

### DUTIES

The primary responsibility of most staff counselors has traditionally been individual counseling. As the functions of counseling centers have broadened, however, staff counselors have increasingly had the opportunity for involvement in such activities as group counseling, supervision and training, research, consultation, orientation, exit interviewing, etc. The trend now is for the counselor to spend less time seeing individual clients in his office and more time in diversified counselor activities outside the interview room. This shift is becoming apparent in some of the larger counseling centers and in many training programs.

As indicated for counseling directors, many staff counselors have a commitment to classroom teaching, and hold joint appointments in an academic department—usually psychology or education. The findings of Nugent and Pareis (1968) suggest that approximately 65 percent of staff counselors are so engaged. Few of these appear to be teachers assigned part-time to the role of staff counselor.

The varying time commitments of staff counselors to numerous activities may lead to difficulties for the director as he seeks to set reasonable individual counseling loads, while seeing that the needs of the client population are met. The nature of this caseload is our next topic.

### Client Caseload

The mean number of students seen in counseling centers annually was found by Clark (1966) to be 12 percent of the student body. This proportion is surprisingly consistent with estimates from a decade ago (Farnsworth & Oliver, 1959; Robinson & Brown, 1961). Regardless of the planning that goes into the scheduling of this number of clients, the director perennially has difficulty in providing adequate case coverage while continuing the staffing of his other ongoing programs.

### AVERAGE NUMBER OF WEEKLY APPOINTMENTS

The number of appointments required for a full-time counselor in a week varies greatly from one center to another. Part of this variability is a function of dissimilar length of counseling interviews, although the 50- to 60-minute appointment is most common (Table 16). For interviews of this length, approximately half of the centers schedule between 20 and 30 appointments per week for a full-time counselor. This particular range of weekly appointments was also found to be modal by Nugent and Pareis (1968). If the counselor is functioning only in a service capacity, providing dyadic counseling, this load does not seem excessive. It allows time for discussion among counselors, a reasonable amount of reading, preparation of case records, and other professional activities.

### TABLE 16

<table>
<thead>
<tr>
<th>Length of Interview in Minutes</th>
<th>Number of Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>10-14</td>
<td>0 1 1 2 1 0</td>
</tr>
<tr>
<td>15-19</td>
<td>3 0 1 2 1 3</td>
</tr>
<tr>
<td>20-24</td>
<td>7 3 6 10 5 17</td>
</tr>
<tr>
<td>25-29</td>
<td>4 4 13 10 9 8</td>
</tr>
<tr>
<td>30-34</td>
<td>12 26 37 26 12 3</td>
</tr>
<tr>
<td>35-40</td>
<td>2 4 0 7 6 1</td>
</tr>
<tr>
<td>40-49</td>
<td>0 0 0 1 0 0</td>
</tr>
<tr>
<td>50-59</td>
<td>0 0 0 0 0 0</td>
</tr>
<tr>
<td>60-69</td>
<td>1 0 0 0 0 0</td>
</tr>
</tbody>
</table>

The counselor’s caseload should depend on both the amount or type of counseling and the other services he is providing within the center or for another department. When the counselor is assigned duties other than counseling on an ongoing basis, his caseload should be revised.

### OUTSIDE-THE-CENTER DUTIES

It is difficult to determine just how much reduction in caseload should be made when the counselor is teaching a course. The obvious answer is to reduce the load by the amount of time that the teaching load represents. If the course credit is for three hours and the usual departmental load is nine credits, the caseload is reduced by one-third. While superficially equitable, this kind of mathematics may be entirely inappropriate. The course load in a department is predicated on a number of other factors, including undergraduate and graduate advising, departmental and univer-
sity committees, thesis supervision, etc. If the teaching assignment includes these functions, then the reduction in load is appropriate; if not, the caseload and counseling center responsibilities can be somewhat greater. A situation where certain counseling center activities such as supervision or consultation are taken into account in establishing the caseload may also exist. Teaching a course may not reduce the counselor’s workload at the center in these areas at all. If the counselor's other responsibilities in the center continue to be the same regardless of whether he is teaching, his caseload should be reduced more than might be indicated by the teaching assignment.

WITHIN-CENTER DUTIES

The director must first establish priorities for the various services the center can provide. Duties are then assigned to staff counselors based on these priorities. Adjustments of counselors’ caseloads need to be made based on the varying demands of within-center duties and responsibilities. Proper supervision of other counselors is particularly time-consuming. Administration of any type of program (e.g., testing, outreach, orientation) requires a great deal of time, as any director can testify! Increasingly, consultation with other campus agencies or groups may demand a large time investment. Where these or similar responsibilities exist, the counselor’s caseload should be adjusted accordingly.

One recurring problem is counselors’ requests for adjustment of their caseloads to release some of their time for research. As a part of graduate training, many counselors are taught that research is “good” and that they should be involved in it. Unfortunately, not all counselors are actually able to produce good research, and many of these unsuccessful researchers rationalize their failure by claiming that their directors give them insufficient time for their projects. By contrast, one director suggests that staff who are fundamentally interested in research will do it whether or not time is officially made available; other staff will not complete research no matter how much time they are given! Moreover, the practice of “giving” time for research would appear to set an unfortunate precedent. If research is a reasonable function of the counseling center, then counselors with capability and interest should be assigned to it. Otherwise, it is up to the counselor to provide his own time or to locate a setting where he can better meet his research needs.

The director will probably derive maximal effectiveness and morale from his staff if he establishes some basic guidelines for his own caseload, and evaluates the duties of each staff counselor against that standard. If case assignments do not appear capricious but are based on real assignments of duties that clearly require time commitment, the staff should generally be satisfied.

PRESSURES TO INCREASE CASELOAD

Almost every director experiences pressure to increase counseling time. Several factors are responsible for this demand. First, institutions almost invariably grow faster than the counseling facility. Moreover, the ability to provide service seems itself to lead to increased demand for service; it seems impossible to ever catch up. Indeed, Clark’s (1966) survey indicated a mean ratio of 1 counselor to 3,000 students, and Nugent and Pareis’ (1968) survey indicated that only 41 percent of the counseling centers have been able to attain or adhere to the recommended ratio of 500–1,000 students per counselor. More recently, Magoon (1969) has reported that for the 60 schools in the 1967–68 ACPA Data Bank, the ratio for large schools ranged from 1:842 to 1:7,000, with a median of 1:2,100. For small schools the ratio ranged from 1:370 to 1:9,800, with a median of 1:1,530. These results may indicate some improvement in the situation, but more likely reflect differences in the ACPA Data Bank’s sample, since it consists almost entirely of those directors involved in the Association of Counseling Center Administrators.

Moreover, as the year progresses some counselors develop a steadily increasing number of long-term cases. Toward the end of the year their schedules tend to become filled with many of the same clients each week. At the same time, stress on the students tends to increase during the year, increasing the demand for services. This demand is particularly apparent if there have been crises on the campus. The problem is further complicated at schools where less time is available for counseling during the latter part of the year because of counselors’ commitments to interviewing high school seniors, appearing at career days, and so forth.

Any or all of the pressures noted can lead to demands for counseling services that are difficult for the director to meet. Such demands may come not only from potential clients themselves, but also from faculty and administrators. In seeking to adjust to these pressures by reassessing the priorities he has assigned to various services, the director should be wary of seriously distorting the activity pattern of the center. Some alternative solutions to the handling of this problem are next considered.

THE WAITING LIST

When counselor time is no longer adequate to meet client demands for service, a waiting list is the most frequent outcome. Unfortunately, the waiting list soon becomes a problem because it has a tendency both to
perpetuate and to lengthen itself once developed! This effect is caused by the methods used to select from it those students who will be seen first. For example, cases that appear to need help most imminently are often chosen first from the waiting list or are given priority over others. Unfortunately, such cases also tend to take more counselor time than others. Thus, selecting the serious cases from the waiting list leads to lessened ability to deal with the larger number of students, many of whose problems are critical to their future planning albeit not an emergency.

Allowing counselors to select cases from a waiting list is an alternate plan leading to the same outcomes. Counselors frequently choose those cases they feel they will enjoy or be most comfortable with, and subsequently continue these clients in counseling longer than they would others. Again, the list lengths. Even taking students' names from the waiting list in the order in which they first came for counseling has inherent difficulties. Not all students are still interested in counseling when their turn comes, and the ones who are, definitely are not a random sample. They include the dependent clients, the emotionally troubled clients, and others with potentially long-term cases.

Students who do not want or need counseling after a waiting list delay are likely to include those who have developed hostility toward the agency (who are now too angry to return), those with study or exam-taking problems (where it is now too late for help), vocational cases (where a decision had to be reached), defensive individuals (who now have an excuse to stay away), and the crisis cases (where the crisis is now past and tension reduced). In such cases, one might feel that he had saved the counselors’ time, since the student was apparently able to solve his problem without counseling. Many of these students, however, have a lack of meaningful closure on their problems and frequently appear at the counseling center on a later occasion with deeper concerns.

The only real advantage of the waiting list is that it provides direct evidence that the counseling service needs more staff. Directors have stated more than once that they and their staff have put in extra hours to counsel the students that needed help, only to fail once again in obtaining the staff increases that they needed. Only when they have given up and allowed a waiting list to develop have they been given new staff positions. The counseling director who is sensitive to the needs of students and committed to helping them perhaps too frequently extends himself and his staff beyond capacity in order to meet immediate needs. In the long run, accepting a heavy caseload must interfere with personal and professional development, and may actually interfere with the ability to provide adequate service. It establishes an expectancy that the center will somehow deal with the problem despite an inadequate staff, and the staff needs of other departments may receive priority.

Sometimes intake-counseling procedures assist in avoiding some of the problems of the waiting list. With such a program, clients are seen by a counselor for a short screening interview a few days after requesting counseling services. Such a procedure has the advantages of expediting referrals, selecting-out those with crisis or emergency problems, reducing the number of missed appointments, and giving each individual some personal contact with a counseling staff member. Sinnett and Danskin (1967) suggested a modification to this procedure, called a “walk-in” intake. In this approach, sometimes called an “instant intake,” the client participates in an intake interview within a half-hour of entering the counseling center and requesting counseling services. Initial findings suggest that this procedure is very helpful in avoiding the development of a waiting list.

LIMITING THE NUMBER OF SESSIONS PER CLIENT

Some centers have sought to lower their time investment in each client by setting a limit on the number of interviews for which a student is eligible. Clark (1966) found that one-third of the centers he studied used such a procedure, whereas Nugent and Pareis (1968) found only 9 percent of their sample limited contact in this manner. Moreover, Clark’s data indicated that for centers with such limitations, the mean limit on number of sessions was 22.2; Nugent and Pareis found it to be only 10.6. It is difficult to ascertain whether these apparent differences reflect a trend over time or merely a sampling difference.

In either case, limiting the number of sessions per client is unlikely to be a major source of relief for caseload pressures since the distribution of the average number of interviews per client is extremely skewed. For example, Clark’s (1966) data indicated a mean of 3.31 interviews per client, Magoon (1969) found a mean of 3.5, and Nugent and Pareis (1968) showed that 74 percent of clients are seen for no more than 6 sessions, with 90 percent seen for no more than 10 sessions. For a few clients, however, the number of interviews does extend beyond their fair share of the facilities intended to be provided for all students.

THE SETTING OF FEES

The charging of fees for counseling almost always arises from the relationship of the number of students involved in long-term treatment and the amount of counselor time occupied by them.

Proponents of the fee system feel that long-term clients should share the cost of their treatment, or alternatively, perhaps less long-term treatment would
occur if fees were required for it. In addition, they suggest that the payment of a fee may motivate clients to use therapy more effectively. Those opposed to fees generally indicate that requiring payments is unfair to the poor student; that collecting fees is inappropriate to the counseling role; that students should not have to pay since the service is provided for them (often through general fees paid by all students); and that requiring a fee might keep the student who needs help from obtaining it.

The statements made by proponents of the fee system suggest that clients may remain dependent on counselors and see them longer than necessary. The counselor may, in fact, encourage such a relationship for many reasons: (a) because he enjoys it; (b) because he needs dependent clients; or (c) because his image as a therapist is better if he has many long-term clients. The client may wish to maintain the relationship because of dependency needs, because he enjoys talking about himself, or because he doesn’t really want to work on his problems. Using a fee system to change these aspects of counseling appears to be both artificial and inappropriate. These client or counselor problems are characteristic of poor counseling. The attack, therefore, might better be made on the basic problem of improving the quality of counseling rather than creating a fee system designed to enforce better counseling.

The question of client motivation may be more important. In social work agencies, fee-paying clients were less likely to undertake therapy after an intake interview, but were more likely to remain in therapy and to profit from treatment than were non-fee-paying clients (Goodman, 1960). It is tempting to feel that those who were not ready for therapy did not enter treatment, and those who did were motivated more highly, evidenced by their paying the fee. It is possible, however, that fee-paying clients were already from higher socioeconomic strata and hence more likely to benefit from treatment. Those who did not enter treatment might have profited as well had it been offered them.

Perhaps the best pragmatic reason for charging fees is that it may allow a center to carry at least some long-term clients. An institution faced with high counseling costs, and seeing those costs as deriving from a few long-term cases, might be forced to establish a policy sharply limiting the number of interviews per client. If a center can state that long-term clients are at least paying part of their own way, it may be in a better position to avoid such a policy, remaining free to decide whether or not a case should be continued.

In point of fact, however, very few counseling centers have adopted a fee system. Nugent and Pareis (1968) found that only 4 percent of the centers charged students for counseling, although over 19 percent charged for testing.

**VARIETIES OF SESSION LENGTH**

To one who assumes that the 50-minute hour is traditional in counseling and psychotherapy, the variation in length of counseling center interviews is striking. As was noted in Table 16, just less than half of the centers surveyed had 50- to 60-minute appointments. The range in length of appointments was from 15 minutes, used by five centers, to 90 minutes, used by one. Twenty percent of counseling centers have 30- or 35-minute appointments, another 20 percent use 40- to 45-minute appointments.

The university class “hour” is even more traditional than the therapeutic “hour”; hence the 50-minute appointment is most frequently used because it fits into class schedules. Many centers, however, have developed approaches calling for different appointment lengths, and have been able to integrate them into the college schedule.

Such changes have been suggested for a variety of reasons—some theoretical, some pragmatic. Contrary to what one might expect, an increased ability to see more students is not always the outcome of shortening session length. For example, one common reason for employing a 40-minute interview in a setting where the class hour is 50 minutes is to give counselors time to prepare adequate case notes and reports. With a 40-minute scheduled appointment, however, clients and counselors frequently run overtime. The counselor knows some time is available before the next appointment or class period, and the immediacy of the interview and the client's problems seem to take precedence over the administrative schedule. It should also be noted that the counselor who tends to fall behind on case notes does so even with the shorter interview period. Nevertheless, those centers that function this way feel the approach is realistic and helpful in emphasizing the importance of adequate notes and record-keeping to the counselor.

The 30-minute appointment is being tried in several different settings. In some cases, the center primarily handles test interpretations and vocational counseling. In others, the center is involved in a wide range of counseling activities, including long-term treatment of emotional problems. In both cases, the pressure of a heavy client load combined with a feeling of ineffecutal use of time in the longer interview resulted in the development of the shorter interview period as a tentative solution. It should be noted that in a few centers, the number of interviews per week for each counselor was almost doubled as the interview length was shortened!

A few centers reporting very short interview periods indicate that a major portion of their activity is the interpretation of freshman tests administered by the college. They see a high proportion of the entire freshman class for brief interpretations, and typically
schedule longer appointments when further interpretations are needed or when emotional problems are encountered.

Generally, director's reports suggest that the shorter interview is quite successful in educational-vocational counseling, although one director noted that the number of appointments for cases involving problems in studying tended to increase. He felt that shorter appointments spaced over a longer period may actually be more effective in dealing with such problems.

Nevertheless, reports of the effectiveness of the shorter interview with emotional problems are mixed. Many students show the "hand on the door" syndrome, suddenly coming to critical material as the interview is ending. Shortening the interview seems to bring them to the point sooner. In other cases, counselors complain that the shorter appointment does not provide enough time to develop rapport or to delve into complex problems. Despite these objections, directors at most of these centers apparently plan to retain the shorter interview.

Discussions with some directors who have developed different schedules suggest that the center is typically pleased with the particular schedule that they are using. Session length clearly interacts with the kind of functions served by a center, the staff's philosophy of counseling, and the caseload pressure. Since the modified schedules grew out of local conditions and were developed to meet these conditions, it is not surprising that a good deal of satisfaction has been experienced.

Summary

The highest degree held by slightly over half the staff counselors is the master's, although nearly 40 percent hold the doctorate. While most counselors spend the majority of their time in individual counseling, there is a trend toward committing more counselor time to diversified counselor activities outside the interview room. Two-thirds to three-fourths are also engaged in teaching and hold academic appointments.

Counseling directors often find it difficult to provide adequate case coverage for the approximately 12 percent of the student body seen in the counseling center each year. The most typical caseload for a full-time counselor is 20 to 30 weekly appointments of 50 minutes, although the number and length of appointments varies considerably. Counselors' caseloads are partly determined by other responsibilities both outside and within the center. Yearly and seasonal pressures to increase the caseload are often felt by the director and occasionally passed on to the counselors. Other attempts to control the caseload include altering session length, charging students for counseling, limiting the number of counseling sessions allowed, and, if all else fails, implementing a waiting list.
Academic Rank and Salaries

With today's fierce competition for qualified counselors, it is essential that the director be able to offer positions with benefits comparable to those provided by academic departments. Three factors that are particularly important in attracting and retaining staff are faculty status, academic rank, and salary.

Faculty Status of Counselors

The 1966 Conference of University and College Counseling Directors approved the following statement on the faculty status of counselors:

College and university counseling centers perform a variety of essentially educational functions. Working in confidential relationships with individuals and with groups, they help students deal realistically and effectively with their personal academic, and social concerns and values, and they assist students to develop and grow toward appropriate educational and vocational goals.

Recognizing the importance of these functions for the education of students, most colleges and universities accord counseling center staff members opportunity for full faculty status, whether or not they also teach in formal classroom settings. Members of this Conference of University and College Counseling Directors endorse the policy of full faculty status (however arranged, but including academic rank, tenure, and comparable salary) for counselors whose training and experience is equivalent to that of other faculty members.

The policy of according counselors comparable faculty status and benefits is important to colleges and universities for at least three reasons: (1) easier recruitment of counseling center staff with appropriate academic training, (2) greater participation of counseling center staff in policy-making by the faculty, and (3) wider acceptance by faculty and students of counseling services.

Most well-trained, experienced counselors expect faculty status in addition to adequate salary, good working conditions, and opportunities for service, research, and/or teaching. Many counselors are psychologists with doctorates earned in settings that included teaching and research as well as service; usually they expect to continue contributions to these facets of higher education.

Because of their special training, their knowledge of the developmental needs of college students, and because they work closely with college students, counselors have a unique contribution to make to faculty policy-making. As full-fledged members of the faculty, counselors can collaborate with other faculty in developing policy to meet the changing needs of college students.

Finally, faculty status for counselors is important as an aid in assuring the cooperation of other faculty members and acceptance by them of the many functions performed by counseling center staff. Many students who come to the counseling center are referred by the faculty. When counselors are considered "part of the administration," they may be viewed as "making decisions about students," rather than equals who are working in somewhat different ways toward helping achieve optimum benefits from their educational experience.

The conference of counseling directors respectfully suggests that a policy of full faculty status for counselors with appropriate training and experience is advantageous both to students and to the college or university.1

Each counseling director would do well to seek to implement the goal of full faculty status for counselors on his campus.

Academic Rank

As has been noted, at least two-thirds of counseling directors and counselors are involved in teaching. Nugent and Pareis (1968) suggest that even a greater number (77 percent) hold academic rank. Before automatically requesting or establishing academic rank or joint appointments, however, the counseling director should carefully consider the functions that such appointments might serve in his particular setting.

1 The many suggestions made by conference members are gratefully acknowledged by the committee: William A. Cass, Director, Student Counseling Center, Washington State University; William M. Gilbert, Director, Student Counseling Bureau, University of Illinois; Paul T. King, Director, Testing and Counseling Service, University of Missouri; Charles F. Warnath, Director, Counseling Center, Oregon State University; Ralph M. Rust (Chairman), Coordinator, Counseling Center, San Francisco State College.
ADVANTAGES AND DISADVANTAGES

As indicated in the Directors' Conference statement, there are several legitimate reasons for counselors to hold academic rank; to those it should be added that titles do have an impact! Moreover, a staff member's job mobility may depend partly on his holding academic rank.

However, academic respectability does not automatically accompany academic rank, particularly on one's own campus. More often than may be admitted, the counselor with rank is low in prestige and is viewed as a second class citizen. When teaching part-time, he is often given responsibility for those courses that are considered to be only marginally academic, such as Mental Health, Applied Psychology, or Elementary Guidance. While his background may be highly appropriate to this assignment and he may be a very capable teacher, he must also demonstrate to members of the department that he is a competent professional outside these areas. If he does not, the counselor may be treated as an interloper. In fact, he may find that he actually holds "limited" academic rank (Nugent & Pareis, 1968), and is not eligible for the same vacations, tenure, sabbaticals, etc., his departmental colleagues enjoy. Even further difficulties may arise if university policy also demands agreement by both the counseling director and the department head on salary increments. In all these cases, the center might lose a highly capable counselor because the academic appointment that was supposed to provide rewards became a punishment situation.

As noted in Chapter 3, the director must decide if he is prepared to deal with the intricacies of adjusting each counselor's caseload according to the ongoing services he is providing to the academic department. Even more serious problems may arise from the counseling director's own academic rank or joint appointment. As counseling director he can typically meet with the department head as an equal. If he is also teaching in the department, his role may become slightly confused.

Given these potential situations, the counseling director must make every effort to determine the attitudes of the department chairman and staff members before committing himself or his staff to academic appointments.

OBTAINING ACADEMIC RANK

Two prevalent difficulties in obtaining academic rank for counseling staff are: (a) that the academic qualifications of many counselors are not comparable to those of faculty members at their institution; and (b) that the counseling service is traditionally a part of student personnel services, and personnel staff frequently do not hold rank.

The problem of comparability of academic qualifications could be resolved if training programs graduated sufficient numbers of counselors with advanced degrees, and if, in addition, counseling directors hired staff with academic degrees appropriate to the character of their institution. In that case, only the EdD or the PhD would be selected for larger universities, while some undergraduate colleges and junior colleges might also hire staff with the MA. If counseling staff members have degrees equivalent to faculty, the center is in a good position to request rank.

Unfortunately, the supply of counselors and counseling psychologists is limited, and many counseling staff members do not have extensive academic training. Quite clearly, these members should not be considered for academic rank.

Where staffing patterns must include both master's and doctoral level counselors, the director might define differential roles for counselors and clearly indicate that academic rank will be held only by the senior or supervisory members of the staff with advanced degrees. A better solution is to attempt to be much more selective in the staff's academic requirements. Ideally, requirements would be as high and as restrictive as those of local academic departments.

The role of counseling as a part of personnel services can present a more difficult consideration for the dean of students. He is frequently under pressure from all personnel staff to obtain academic rank and privileges, and many of the arguments presented by the counseling director apply to all personnel staff. The major factor that sets counseling staff members apart (at least at the larger institutions) is the advanced degree. Through his degree, the counselor is identified with an academic discipline and is qualified to take an academic position. By contrast, other personnel staff are not as frequently in this position. Their duties often do not require academic backgrounds equivalent to the faculty's. Equivalence of academic training again should be the critical criterion.

COOPERATION IN COUNSELOR TRAINING

Most universities with both counselor training programs and counseling centers enjoy satisfying reciprocal professional relationships. In a few institutions, however, the lack of staff cooperation has been particularly unfortunate. In these schools, the center is not used in counselor training in any way, and counseling center staff members do not hold joint appointments with the department. This is often the result of past conflicts that led to dissociation of the center from all departmental activities. In such cases, the training needs of the graduate students should merit further consideration, both by the department and the counseling center.
Salaries

In discussing salary considerations with directors and staff, it is clear that the principle of equity is fundamental to satisfaction with salary. The counselor first compares his salary with that of other members of the counseling center, second with professional colleagues at other institutions, and third with the faculty and staff in other departments at his institution. If the director or the staff member sees his own salary as equitable, he is usually relatively satisfied, regardless of the gross amount. This may hold even though the center as a whole tends to draw lower salaries than the rest of the institution. In many counseling centers, however, salary considerations are complicated by either joint appointments with other departments or by strong personal and professional identification with other departments, particularly psychology and education. Therefore, counseling staff are likely to compare themselves with several different people, and may be dissatisfied if they fare badly in any comparison.

Very frequently, the comparison of counseling and academic salaries leads to complaints within the counseling staff. These complaints are often made when the 12-month salary of the counseling staff is found to be less than the 9-month salary plus summer-session pay of faculty members with similar backgrounds. The argument usually offered—that the 12-month salary offers greater security—does not have much impact for the staff member who is constantly bombarded with requests from other institutions to teach in highly remunerative summer institutes or summer-session programs. That increments based on a 12-month salary do not seem proportional to increments based on a 9-month salary is another common complaint. The absolute size of an equitable increase appears to frighten some administrators, and counseling staff on 12-month appointments tend to drop back further each year.

The attraction of new staff members is dependent on the institution’s ability to compete financially with other schools. In order to set appropriate salaries, it is necessary to have an idea of the salary range for counseling staff at comparable colleges or universities. While it is possible to learn what other schools are offering through the salaries quoted in current ACPA and APA employment bulletins, institutions advertising are clearly not a random sample. Many advertised positions are for recent graduates and it is difficult to estimate appropriate salaries for experienced personnel. In earlier years, salary surveys by Callis (University of Missouri) or Warnath (Oregon State University) helped to fill this need. More recently, the salary summaries included in the ACPA Data Bank provide helpful current information. For example, Magoon (1969) indicated that, on the average, centers from larger universities anticipated the necessity of offering $500 more to new doctoral-level counselors in 1969 than in 1967–68, or $11,500 (12 months). His data also suggest that $500 is the typical yearly raise for counselors at these larger institutions. However, a small sample of larger universities indicates that successful staff averaged almost $1,000 a year in raises from 1964 through 1968, regardless of whether the appointment was for 9 or for 12 months.

In some institutions, salaries for beginning people may, over a period of time, tend to move closer to salaries for experienced staff despite supposedly adequate increases for experienced personnel. Hiring a newly trained and inexperienced counselor at nearly the salary of an experienced staff member will almost invariably lead to serious morale problems.

These points are among many mentioned by counseling directors in viewing the very real problem of hiring and maintaining staff. Data and informal information suggest that the principle of equity has not always been applied to counseling staff salaries, which may be one important reason so many counselors leave the field for other positions. The financial reward system within counseling does not encourage a competent staff member to remain within the service-oriented field.

COUNSELING DIRECTORS: SALARY AND ADVANCEMENT

Data from the survey generated some useful general relationships pertaining to counseling directors’ salaries. There were some minor regional differences; for example, the South tended to have lower salaries. The differences within each area, however, were far greater than those between areas. As might be expected, larger institutions tend to pay higher salaries. Directors holding the PhD tend to earn more than those holding the EdD, but this is probably because more of the larger institutions hire a PhD as director. With few exceptions, salaries of directors holding master’s degrees are considerably lower than those with doctorates.

The capable director of counseling who sees his role as specialized and does not desire broader administrative responsibility appears to be in a fortunate position. Salaries for directors in many institutions are among the highest paid to faculty. Either within his own institution, or by transferring to another university, the director can advance in salary without changing his role.

In terms of opportunity for advancement, counseling directors again appear to be in an excellent position. For example, many directors have moved to positions in higher administration, such as dean of students or vice president of extradivisional affairs. The possibility of such a move appears to be particularly great for the competent director. As has been noted,
among the personnel services counseling is somewhat unusual in requiring advanced degrees as evidence of professional proficiency. The counseling director is, therefore, more likely than other staff in personnel services to hold the doctorate required for an administrative position. An exception to this would be in the medical services, but the specificity of the medical role generally prevents promotion from this area to general administration. A partial survey of those counseling directors who also hold the title of dean of students suggests that this position is more frequently attained by the EdD than the PhD. The director with a PhD is likely to hold a degree in clinical or counseling psychology, and may be viewed both by himself and the administration as serving a specialized role similar to the director of medical services. By contrast, the director holding the EdD may be more involved with general student personnel functions, and may be a more logical candidate for such a position.

Rather than representing a general trend, a move to an academic department or to a position in institutional research appears to result from the particular interests of the director. The directors who make such moves tend to stress their interest in research or teaching, and frequently indicate that they will make less salary in the new position. But further discussion suggests that this salary cut may be more artificial than real, and reflects a comparison of 11- and 9-month appointments in which potential summer earnings are not considered.

COUNSELORS' SALARIES

Survey data indicated that salaries paid to staff counselors are related to such factors as 9- versus 12-month appointments, academic degrees, and institutional size.

Nine- versus 12-month appointments. Within the counseling service, staff are paid either on a 9- or a 12-month basis. Nine-month appointments are for the standard academic year. Twelve-month appointments generally include one month of vacation (usually August), but may or may not give the counselor vacation time during academic holidays. In a few instances, senior staff with 12-month appointments are given an additional month for research or writing.

Theoretically, the difference between the salaries accompanying 9- and 12-month appointments should be at least two-nineteenth (18 percent); survey data, however, indicated that the difference between the salary schedules was closer to 10 percent. Counselor concerns about the financial inequity of the 12-month appointment appear to be justified.

One reason for proportionately lower 12-month salaries among doctoral-level staff appears to be the attitude of the administration and the director toward the functions the counseling staff perform. The staff may be seen as personnel workers whose primary role is providing services to students, or they may be seen as academicians serving a vital role in the educational process. The 12-month appointment appears to be associated more frequently with the former role. The administration may attempt to attract and maintain such staff with the smallest possible financial investment. By contrast, institutions providing nine-month appointments may identify counseling staff with faculty more often than with personnel services. In this event, institutions may be more competitive in seeking exceptional candidates, and could be expected to pay more for their services.

Academic degrees. The majority of counseling staff with doctorates have the PhD, and salaries for PhD's are generally somewhat higher than those of EdD's. As was noted for counseling directors, this is probably because the better-paying larger institutions are more likely to hire the PhD.

The demand for service personnel is clearly seen in the number of counseling staff with MA's. There are almost as many master's as doctoral staff holding 9-month appointments, and there are nearly twice as many master's as doctoral staff holding 12-month appointments. As noted in Chapter 3, the majority (51 percent) of counselors in our colleges and universities hold the master's degree. The actual proportion of counseling performed by staff holding this degree becomes even greater when joint appointments are considered, since doctoral staff are far more likely to hold a part-time teaching or research appointment than are their fellows.

Although they overlap to some extent, salaries for appointments at the master's level—including appointments for full-time counseling and for temporary trainee and intern positions—are considerably below those paid at the doctoral level.

Institutional size. The larger institutions tend to pay higher salaries to doctoral-level staff than do smaller schools, although this effect is not as pronounced as with counseling directors' salaries. By contrast, the relationship between size of institution and salary is inverse for master's level staff: Higher salaries tend to be paid in the smaller institutions, particularly to staff with nine-month appointments.

Several factors may be important in explaining these salary patterns. At many large institutions, the only master's-level appointments are as trainees or interns, and such temporary positions traditionally provide little more than subsistence wages. In smaller schools, master's level appointments are more likely to be full time. In such institutions, the MA is frequently all that is required for an academic appointment, and the counseling staff may thus be in a good position to compete for salary increments with academic staff who are also at the master's level. By contrast, the
doctorate is viewed as a prerequisite for advancement in the majority of larger institutions, and master's level staff may not be in a competitive position. It should be noted that a few counseling centers at the larger institutions value some of their master's level staff highly and pay them accordingly.

The smaller institution, in trying to meet its service needs, may do well to evaluate whether its best interests will be served by hiring master's or doctoral-level staff. A counselor with an MA and demonstrated competence may cost as much as a staff member with a doctorate. Yet while it looks better on the record to have doctoral staff, the smaller school may have difficulty retaining PhD's because of steadily increasing financial competition from large institutions. On the other hand and with rare exceptions, the staff member with the MA making a good salary in a smaller school will not improve his situation by changing schools. The small college counseling director willing to hire new staff every year or two can probably continue to fill his positions with PhD's. But if he is seeking permanent staff, he may be better off to consider experienced master's level counselors—particularly those presently at rapidly growing institutions where the master's was acceptable in the past but where the doctorate is now necessary for advancement.

Summary

In order to attract and retain qualified counseling staff, the director must be sensitive to counselor requests for faculty status, academic rank, and equitable salary. Some such requests may be thwarted by administration if counselors lack adequate academic credentials or if they are perceived as performing service rather than educative functions. The director must exercise care in establishing joint appointments, focusing on the functions that such appointments might serve in his particular setting.

As might be expected, directors and staff with the PhD earn more than those with the EdD, who in turn earn more than those with the MA. Salaries are positively related to institutional size for counselors with the doctorate, but negatively related for those with the master's. Salary differentials between 9- and 12-month appointments may again reflect administrative perceptions of the functions that counseling staff perform.
CHAPTER 5

Physical Facilities

The constant race for adequate space on the college and university campus has left many counseling centers located in old dormitories, World War II (or even World War I) barracks, or simply in overcrowded situations. With continued growth in college enrollment, this situation is unlikely to improve unless counseling directors take a particularly active position in requesting and planning new facilities. As an aid to such planning, this chapter presents some general considerations for somewhat more ideal counseling facilities.

Location

A prime consideration is the campus location of the counseling center. Informal studies have shown, for example, that the distribution of academic majors among counseling clientele is related to the location of the center. Every effort, therefore, should be made to place the physical facility in a location easily available to as many students as possible or to those students most likely to need counseling. Regardless of where the center is located, however, there will still be student groups who have less exposure to it than others.

In a mail survey of 120 colleges and universities, McLean (1967) found that 91 percent of the responding counseling centers were centrally located on campus, but that only 10 percent of those were housed in separate buildings. When counseling centers were housed in facilities with other offices, McLean found that 35 percent shared space with instructional services, 31 percent with administrative offices, and 14 percent with personnel services.

A well-marked central location would seem to afford the best overall exposure. Many counseling directors agree that associating the center with administrative offices is not ideal; some directors report that students are hesitant to use the service for problems they feel might lead to administrative or disciplinary action.

One participant at the Directors Conference in 1965 presented his plans for sharing a building with the campus medical service. The directors as a group were extremely negative about this proposal, partly because of pressure many of them felt from medical personnel who questioned their capability and challenged their role in student mental health and partly as a defensive reaction: they felt the director of medical services would try to take over counseling. Aside from these reactions, the directors felt the image of the center would, of necessity, become that of a treatment center for psychiatric problems. While counseling psychologists see treatment as one function they serve, they also feel they have other campus functions that would suffer from this image.

According to one director, location in a central classroom building is less disruptive than might be expected, although heavy traffic can at times create confusion and excessive noise. Where only a certain group of courses are taught in a particular classroom building, locating the center there might seriously curtail the center’s exposure to groups that do not take those courses.

Counseling directors have also expressed mixed feelings about close physical association with psychology or education departments. While such a location may increase communication and help identify counseling staff as faculty, association with either department may also create a particular image for the counseling service—an image that might lead students to seek help only for certain problems.

While the central location may be the most favorable, there are probably situations where campus traffic patterns would suggest other alternatives. For example, on a campus where exposure to a large commuter enrollment is seen as highly important, the center might be located near the edge of campus, between the parking areas and the classrooms. A location along the main traffic pattern of the campus might be desirable where the campus is almost entirely dormitory residential. A number of institutions that are beginning to consider the role the student union plays on campus locate these facilities along traffic flow areas.
Counseling centers should consider a similar approach to location.

Space Planning

Within the center, the allocation of space obviously depends on the type of program the center is expected to carry out, but some needs are relatively common regardless of special activities.

THE COUNSELING OFFICE

The four primary aspects that must be considered in planning a counseling office are privacy, size, soundproofing, and ventilation.

Privacy. It is essential that all counseling offices give the client a clear feeling of privacy. Flimsy partitions or walls that do not reach the ceiling not only may lead the client to feel that his privacy is not really respected, but may also lead to unwitting violations of confidentiality. Even one student overhearing staff members talking about another student or hearing and passing on something that another student told a counselor in confidence can create a situation that can destroy an entire student body's trust in the counseling service.

The senior staff must have private offices. They may be called on at any time to provide emergency service, consult with parents and administrative staff or, more important, consult with junior staff on a counseling problem. Junior staff members and professional colleagues are not likely to ask for privacy to talk over a case, but will frequently drop in casually to discuss a problem if privacy exists. Just as the faculty member has unique needs for classrooms and laboratories, so the counselor needs a private office to function effectively.

Size. Counseling offices should be bright, cheerful, and comfortable, but do not need to be large to meet these criteria. A room used only for dyadic counseling and not as an office should be seven by eight feet at the absolute minimum. A very small desk or table, and chairs for each person, will leave little space in a room this size. The actual minimum size for a counseling office should probably be 8 by 10 feet. This space is not large, but it is sufficient to allow for a desk, bookcase, small table, and three comfortable chairs. Another chair can be squeezed in occasionally, say when the counselor meets with both parents and the student. If the room has no windows it must be larger. Windows, even when curtained, give a feeling of openness. In fact, when a room is found to be too small for a feeling of comfort, a dummy window, artificially lighted behind curtains, can make sensitive clients more comfortable.

Small counseling rooms have given rise to serious problems for client, counselor, and counseling service.

In one case, a female client of a young, inexperienced, and very sincere counselor reported to her parents that she felt he was trying to seduce her. A few weeks later a similar report was made by another girl to her residence hall counselor. The counselor was being supervised carefully, and the responses of the girls fit into a general defensive pattern relating to intense sexual guilt. Nevertheless, two almost identical reports within two weeks demanded serious investigation. Several sessions between the supervisor and the counselor led to the counselor's growth and development as well as new insight into his own needs and the subtle ways in which he communicated them. But the girl's reactions were still troublesome until the supervisor happened to stop by the counselor's office. He found himself seated in a corner, under an overhanging ventilation duct, with his knees within inches of the knees of the counselor. When the counselor leaned forward to make a point, the feeling of being enclosed, and without a way out, was very clear. The reactions of the girls suddenly made more sense. Rearranging the counselor's room to take the client out of the corner improved the counselor's relationships with his clients considerably. (Incidentally, the underlying reasons for the original placement of furniture by the counselor were also considered with him. While this proved to be an excellent learning situation for the counselor, it could have led to serious consequences under other circumstances.)

Soundproofing. Adequate soundproofing is one of the major problems encountered in counseling service facilities. Even in new buildings, sound is easily conducted through heating and air-conditioning ducts and cold air returns. Sound-absorbent materials, including drapes, ceiling tiles, and carpeting, should be used in actual counseling areas. These materials not only reduce sound transmission, but lessen echoing within the room and result in a generally lower sound level. Conversations with the client then tend to be quieter and sound transmission to other areas is reduced. Where a forced-air system is in use, the ducts into the rooms should be relatively large. White noise from small ducts can force the counselor and client into loud conversations. The masking noise from nearby duct may drop off rapidly with distance, while the louder voices may be carried into other areas.

Ventilation. Ventilation is clearly also an important factor, particularly with some student populations. One of the critical problems in ventilation may prove to be cold air return. Heating ducts are frequently installed where an already existent area has been cut up into smaller offices, but the cold air return may be handled by door louvers or by openings into a large common duct. Since these louvers or ducts are excellent sound channels they may need to be covered, but this cuts down ventilation. Such construction should be avoided if at all possible.
One difficulty counseling directors encounter in obtaining adequate facilities is that the necessities for counselors may be luxuries for other faculty. The private office is zealously sought after, and carpeting and drapes are simply not available to teaching faculty in most settings. The director must somehow convince the administration that the private, quiet, reasonably spacious, and well-ventilated interview room is as necessary for adequate counseling as the classroom is for teaching.

GROUP ROOMS

The necessary number, size, and characteristics of group rooms depend on the functions they are expected to serve. Will the rooms be used for group therapy? Psychodrama? Staff meetings? Or some combination of these functions? In addition, how many people will ordinarily be expected to participate in each type of group meeting? What type of seating will be needed for each function? What is the capacity of the building’s ventilation system?

In all but the smallest centers it is highly advisable to plan two rooms for group meetings. One of these rooms might be larger than the other, and each should lend itself to different functions. The minimum size for a group room should be at least 12 by 15 feet. Even then, ventilation must be excellent, and there will be little room for tables or larger chairs. Approximately 10 people will be able to meet with moderate comfort in a room this size if a great deal of movement is not necessary.

OTHER AREAS

Depending on the center’s programs, space should also be made available for individual and group testing, secretarial-clerical help, a reception and waiting area (perhaps including an occupational library), a supply-work room, locked storage, and space for training or counselor observation. Additional areas may be needed in centers that perform other functions (e.g., a reading lab).

Inventive Physical Facilities

The preceding discussion presents a very traditional approach to planning for counseling center location and physical facilities. This is not to suggest, however, that all counseling centers must follow the typical model of receptionist area, reading and waiting room, and a series of offices. Too many counseling centers resemble medical clinics.

As some centers plan for expanded facilities, and larger centers look to the problem of decentralization, more inventive and flexible uses of space should be considered. One university in a mild climate exemplifies a more imaginative facility. Situated on the edge of the campus near a large parking lot and dormitory traffic, the facility is located in three decentralized office units, each with a group counseling room plus individual office units. One unit serves as a reception area. Also included are several outdoor areas designed for group counseling. The manner in which counseling facility and university atmosphere blend is particularly outstanding.

A similar approach to the planning of facilities might be suggested for more counseling centers. Does a particular facility “blend” with the prevailing campus climate and atmosphere? Does it lend itself to the particular variety of services the center wishes to provide? The best facility on one campus may be a highly efficient traditional receptionist-office pattern. In another university or college, a location in the student union, open areas for informal discussion, sliding walls between offices, and other innovations may be useful. From the client’s point of view, physical facilities and the use of space say a good deal about what to expect from the center.
CHAPTER 6

Services Provided and Models for Services

A wide variety of activities are engaged in by counseling center staff, ranging from depth psychotherapy, to the training of graduate students, to the provision of developmental services for students. This chapter suggests that many alternatives exist for a counseling program in the American college or university.

The survey asked directors to check, from an extensive list, those services offered by their center. No two counseling centers checked identical patterns of service. The size of the institution, the character or philosophy of the administration, and the nature of the goals defined by the staff all seem important in determining the kind of services offered. However, in discussing the evolution of their counseling service with the directors, it seems clear that the central factor in determining the model of counseling and the services provided is the director’s attitude. This has been particularly apparent where the expectations of the institution have conflicted with the ideas of the director. Even in these settings, the direction of the center follows the emphasis and interests of the director’s model, although if discrepancies remain too great, the director has been dismissed.¹

This chapter summarizes the activities and emphases of counseling centers and concludes with a summary of common models used by these centers.

¹ Ralph Berdie (University of Minnesota) has pointed out that the position of the counseling service in this regard is much like that of the academic department of the university a few years ago. The head of the department was able to provide a distinctive leadership and shape the department in the image he felt appropriate. Today, the department head is rarely in this position. Faculty are highly aware of their own rights and privileges, and most decisions about the curriculum and the role of the department are made relatively democratically. In many academic situations today, the department head is a relatively junior member, who takes on an administrative responsibility for a few years as part of his professional duties but can do very little to actually shape the department. A few counseling services are beginning to show a similar democratic pattern. They are all fairly large, and many of their professional staff who hold the doctorate also teach.

Services Provided

As should be expected, counseling remains the primary endeavor of the counseling service. Table 17 presents the percentages of counseling centers of each size performing the 13 functions of academic, personal, disciplinary, and religious counseling posed in the survey.

COUNSELING FUNCTIONS

Academic counseling. Almost all counseling services (93 percent) provide counseling for study problems and for choice of major field (87 percent). The proportion of centers in larger schools providing counseling for choice of major is 92 percent (Clark, 1966). The very few counseling services that do not offer these standard services are found in smaller institutions.

Seventy-four percent of these services do not attempt to counsel all students on academic probation. Larger institutions rarely attempt this undertaking, but approximately a third of smaller institutions indicate that they counsel all such students.

Personal counseling. Almost all institutions, regardless of size, provide counseling for personal problems (96 percent). There is a sharp reduction in the number of centers that provide short-term counseling for severe emotional problems (77 percent), and a further reduction in those providing long-term counseling (27 percent).

As noted in the survey and also by Nugent and Pareis (1968), approximately 50 percent of the counseling centers provide group counseling. This service is somewhat more frequently provided at larger institutions.

Although almost 33 percent of all centers do provide such a service, smaller institutions are less likely to provide assistance to the faculty member with personal problems. Similarly, smaller schools are less likely to provide counseling for a student’s spouse, although 40 percent of all centers provide this help.
TABLE 17
Percentage of Counseling Centers of Each Size Performing Counseling Functions

<table>
<thead>
<tr>
<th>Institution Size</th>
<th>Functions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,000–4,999</td>
<td>Academic Counseling</td>
</tr>
<tr>
<td>5,000–9,999</td>
<td>Counseling for study problems</td>
</tr>
<tr>
<td>10,000–14,999</td>
<td>Counseling for choice of major field</td>
</tr>
<tr>
<td>15,000–19,999</td>
<td>Counseling for all students on academic probation</td>
</tr>
<tr>
<td>and up</td>
<td>Personal Counseling</td>
</tr>
<tr>
<td></td>
<td>Counseling for personal problems</td>
</tr>
<tr>
<td></td>
<td>Short-term counseling of severe emotional problems</td>
</tr>
<tr>
<td></td>
<td>Long-term counseling of severe emotional problems</td>
</tr>
<tr>
<td></td>
<td>Group counseling</td>
</tr>
<tr>
<td></td>
<td>Counseling the faculty regarding personal problems</td>
</tr>
<tr>
<td></td>
<td>Counseling student's spouse</td>
</tr>
<tr>
<td></td>
<td>Disciplinary Counseling</td>
</tr>
<tr>
<td></td>
<td>Provide disciplinary counseling</td>
</tr>
<tr>
<td></td>
<td>Evaluate all disciplinary cases</td>
</tr>
<tr>
<td></td>
<td>Evaluate referred disciplinary cases</td>
</tr>
<tr>
<td></td>
<td>Religious Counseling</td>
</tr>
<tr>
<td></td>
<td>Pastoral or religious counseling</td>
</tr>
</tbody>
</table>

Disciplinary counseling. Approximately 20 percent of counseling services are involved with disciplinary counseling. Such duties are more frequently performed at the smaller institution. Only in the smaller schools are all disciplinary cases evaluated. Referred disciplinary cases are evaluated at more centers; however, this occurs primarily at smaller institutions.

Religious counseling. Less than 20 percent of the institutions surveyed provide religious counseling, and a disproportionate number of these institutions are sponsored by religious groups.

SERVICE FUNCTIONS

In addition to counseling, the center has traditionally been involved with a variety of service-oriented activities. Table 18 shows the percentages of centers of each size performing the 20 service functions of remedial services, pre-college student contact, personnel services, testing, and evaluations posed in the survey.

Remedial services. One-fourth of counseling services provide a remedial reading program for students. However, it is likely that a much larger proportion provide individual help to students with such problems.

Very few schools provide tutoring in subject areas through the counseling center (8 percent), and the few that do are located at smaller institutions. Over two-thirds of counseling services (69 percent) provide counseling for the faculty in regard to student problems.

Pre-college student contact. Pre-college counseling is provided by 41 percent of the centers; the majority of larger institutions provide such a service, while the majority of smaller ones do not. A few centers at smaller institutions are also involved in recruiting students (10 percent).

Roughly a third of the counseling centers are involved in summer orientation programs, with centers at larger institutions doing so more frequently than those at smaller institutions. By contrast, Clark (1966) reported that 73 percent of the counseling centers at large institutions participate in orientation programs. However, it must be inferred that this includes programs occurring after school is in session.

Personnel services. Many smaller counseling services actually appear to be student personnel services, handling many kinds of personnel functions. Larger institutions have apparently separated most of these functions from those of counseling.

Testing. Over two-thirds of counseling services are responsible for freshman testing. Similar results have been noted by Albert (1966), who found that 80 percent of the schools he surveyed routinely tested freshmen for academic aptitude and 60 percent tested for personality variables.

In smaller schools it is likely that machine test scoring for academic departments is unavailable, while in somewhat larger schools it is available and is the responsibility of the counseling service. In the largest institutions, a separate organization probably provides this service.

Evaluations. In some institutions, the counselor apparently plays an administrative role in reaching deci-
<table>
<thead>
<tr>
<th>Institution Size</th>
<th>1-999</th>
<th>1,000-4,999</th>
<th>5,000-9,999</th>
<th>10,000-14,999</th>
<th>15,000-19,999</th>
<th>20,000 and up</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Remedial Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Remedial reading</td>
<td>17</td>
<td>23</td>
<td>28</td>
<td>33</td>
<td>33</td>
<td>50</td>
<td>25</td>
</tr>
<tr>
<td>Tutoring in academic subject areas</td>
<td>9</td>
<td>10</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>8</td>
</tr>
<tr>
<td>Counseling the faculty regarding student problems</td>
<td>66</td>
<td>72</td>
<td>68</td>
<td>63</td>
<td>0</td>
<td>70</td>
<td>69</td>
</tr>
<tr>
<td>Pre-College Student Contact</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-college counseling</td>
<td>32</td>
<td>32</td>
<td>59</td>
<td>54</td>
<td>83</td>
<td>80</td>
<td>41</td>
</tr>
<tr>
<td>Recruiting students</td>
<td>35</td>
<td>12</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>Summer orientation</td>
<td>28</td>
<td>31</td>
<td>38</td>
<td>46</td>
<td>67</td>
<td>40</td>
<td>34</td>
</tr>
<tr>
<td>Personnel Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student loans</td>
<td>34</td>
<td>14</td>
<td>2</td>
<td>8</td>
<td>0</td>
<td>0</td>
<td>14</td>
</tr>
<tr>
<td>Student scholarships</td>
<td>38</td>
<td>17</td>
<td>2</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>16</td>
</tr>
<tr>
<td>Foreign student advising</td>
<td>42</td>
<td>27</td>
<td>13</td>
<td>17</td>
<td>0</td>
<td>10</td>
<td>25</td>
</tr>
<tr>
<td>Supervise residence hall counselors</td>
<td>38</td>
<td>24</td>
<td>4</td>
<td>0</td>
<td>33</td>
<td>0</td>
<td>15</td>
</tr>
<tr>
<td>Off-campus housing</td>
<td>23</td>
<td>14</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>11</td>
</tr>
<tr>
<td>Dean of women’s office</td>
<td>25</td>
<td>17</td>
<td>4</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>14</td>
</tr>
<tr>
<td>Dean of men’s office</td>
<td>26</td>
<td>18</td>
<td>4</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>15</td>
</tr>
<tr>
<td>Advising campus student organizations</td>
<td>36</td>
<td>21</td>
<td>2</td>
<td>8</td>
<td>17</td>
<td>20</td>
<td>19</td>
</tr>
<tr>
<td>Responsibility for fraternities</td>
<td>17</td>
<td>9</td>
<td>0</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>8</td>
</tr>
<tr>
<td>Testing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Freshman testing</td>
<td>72</td>
<td>69</td>
<td>77</td>
<td>71</td>
<td>50</td>
<td>40</td>
<td>70</td>
</tr>
<tr>
<td>Machine scoring for academic departments</td>
<td>2</td>
<td>16</td>
<td>40</td>
<td>50</td>
<td>33</td>
<td>30</td>
<td>21</td>
</tr>
<tr>
<td>Evaluations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Evaluating all admissions</td>
<td>19</td>
<td>8</td>
<td>38</td>
<td>8</td>
<td>0</td>
<td>10</td>
<td>9</td>
</tr>
<tr>
<td>Evaluating borderline admissions</td>
<td>34</td>
<td>35</td>
<td>43</td>
<td>25</td>
<td>17</td>
<td>30</td>
<td>26</td>
</tr>
<tr>
<td>Recommend readmission after withdrawal for all emotional problems</td>
<td>38</td>
<td>34</td>
<td>32</td>
<td>25</td>
<td>17</td>
<td>10</td>
<td>32</td>
</tr>
</tbody>
</table>

31

Outreach programs. More recently than the survey, increasing interest in “outreach-developmental” programs sponsored by counseling centers has been noted (Morrill, Ivey, & Oetting, 1968). These programs take place outside the counseling center, and undertake to involve different segments of the university population (e.g., student groups, administration, and faculty) in interactions that should lead to personal development or growth. In their 1969 survey, Morrill and Oetting (in press) found more centers involved in such programs than they expected existed a few years ago. Nevertheless, the percentage of counseling centers actively engaged in these programs still tends to be relatively low. Seventy-four centers (19 percent of the 397 responding) provide drug education programs. Fifty-three centers (13 percent) teach some type of personal development course, either for credit or non-credit, and 51 (13 percent) provide human relations training. Thirty-six (9 percent) run student-faculty interaction programs, while 17 (4 percent) have programs to improve teacher effectiveness. If these programs represent the beginning of a major change in orientation toward the type of service to be provided by the counseling center, the director must be aware of the immediate implications for almost every aspect of planning, from physical facilities through staffing patterns.

**RESEARCH AND TRAINING**

In addition to counseling and other service functions, some counseling centers have been heavily invested in programs of research and training. Table 19 shows the percentages of centers of each size performing the six functions of research and training posed in the survey.

Research. The majority of counseling services do some research: Nugent and Pareis (1968) found 34 percent so engaged, whereas Clark (1966) found 60 percent of the centers at large institutions involved in research. Most counseling services conduct studies of student characteristics within their own institution, while fewer are involved in research on academic achievement and counseling. Smaller schools are less likely to be involved in research on counseling. In these small institutions, only a few are involved in any research other than that focusing on student charac-
**TABLE 19**  
Percentage of Counseling Centers of Each Size Performing Research and Training Functions

<table>
<thead>
<tr>
<th>Institution Size</th>
<th>Functions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>Research Studies of student characteristics within the institution</td>
</tr>
<tr>
<td></td>
<td>Research on academic achievement</td>
</tr>
<tr>
<td></td>
<td>Research on counseling</td>
</tr>
<tr>
<td></td>
<td>Research consultant to other departments</td>
</tr>
<tr>
<td></td>
<td>Evaluation Supervise practicum students from psychology</td>
</tr>
<tr>
<td></td>
<td>Supervise practicum students from education</td>
</tr>
<tr>
<td>1–999</td>
<td>1,000–4,999</td>
</tr>
<tr>
<td>57 49 68 83 67 50 57</td>
<td>14,999</td>
</tr>
<tr>
<td>15 24 43 46 17 30 28</td>
<td>19,999</td>
</tr>
<tr>
<td>8 13 36 58 33 60 22</td>
<td>and up</td>
</tr>
<tr>
<td>9 18 38 54 50 30 24</td>
<td></td>
</tr>
<tr>
<td>11 15 28 42 33 50 20</td>
<td></td>
</tr>
</tbody>
</table>

Characteristics. Research consultation to other departments is provided by 24 percent of all schools, again most frequently at the larger institutions.

Training. As might be expected, larger schools are more frequently involved in training and supervision, although a surprising number of centers in smaller institutions also indicate that they supervise trainees. Overall, between 20 and 30 percent of the centers appear to do some practicum supervision. Similarly, Albert (1968) found that 18 percent of the institutions he surveyed used graduate students as professional trainees, auxiliary counselors, or research assistants, while Nugent and Pareis (1968) found 33 percent of institutions had trainees. In a survey limited to larger institutions, Clark (1966) found that 47 percent of the counseling centers had trainees. (In these institutions some interns are undoubtedly reported among the trainees.) Institutions are generally more likely to be involved with supervision for education than psychology departments, probably because there are fewer training programs in psychology.

**SUMMARY**

Counseling centers continue to be involved in counseling functions, noncounseling service functions (many of which are quite new), and research and training functions. The organization of specific activities into inclusive models of operation will be considered next.

**Counseling Center Models**

A number of common models of counseling emerge from the study of services offered by counseling centers. Chapter 7 on the counseling center in the small college discusses models that occur in smaller institutions. The following models are stereotypes, and probably do not exactly describe any one center. They illustrate, however, the essential characteristics of many of the different types of existing centers.

**THE VOCATIONAL GUIDANCE MODEL**

The center that operates on the vocational guidance model views testing and vocational choice counseling as its primary functions. Clark (1966) found that 71 percent of counseling centers accept this position. Remedial reading and study help programs are often part of the counseling center's program. The center is typically involved in the freshman testing program, and may provide interpretation of freshman tests for large numbers of students. It may also operate an extensive freshman orientation program that provides test interpretation and help in selecting a major. Therapy is viewed as the role of the medical service or of the psychology department.

Staff of the center tend to have training in education and may have experience in high school guidance. The director is more likely to hold the EdD than the PhD, and may have a master's degree in school administration or guidance. A full-time psychometrist is generally essential because of the many group and individual tests assigned.

The vocational guidance center is able to see many students during the year. Traditionally, the student has a preliminary interview, tests are assigned, and he returns to take tests from the psychometrist. During a second interview, tests are interpreted and related to the student's present status and future plans. Good counseling leads to a developmental plan that consists of choosing a program or major that lets the client further explore his potentialities with a good chance for learning and eventual success. The student may also be "counseled out" when his abilities are clearly not sufficient to allow success. In this case, possibly successful alternative plans that meet his interests and needs are made. Less frequently the client will return for a third or fourth interview when a difficult decision must be made. While emotional problems that interfere with planning are not ignored, and counseling tries to help the student in seeing through these problems, long-term psychotherapy is not provided. Stu-
The chief advantage of the vocational guidance center probably lies in its ability to provide extensive counseling for numerous students in a very important area—that of selecting a college major. Essentially, the student is on his own in implementing the plans that derive from counseling, and for many students this attitude may be healthy in the long run. The major disadvantage lies in the emphasis on testing and test interpretation as the core of the counseling process. Test interpretation may provide personal reinforcement and strong support for the defense mechanisms of the bright intellectualizer, and may serve to fixate him in his defensive pattern. The testing and interpretation procedures may also prevent a real problem from emerging in many cases. Centers that provide greater variety in counseling note that a large percentage of clients who present a problem of choice of major or vocation use this as a nonthreatening way of approaching a counselor. If the counselor offers them an opportunity to ventilate their feelings, they will frequently open up and discuss the relationship problems causing their discontent.

The traditional guidance model seems inappropriate for many college women. For most men, the vocational role is a highly important aspect of future development. For many women, the vocational role and the matching of abilities and interests to the tasks involved may have a minimal impact on future adjustment patterns. Their interpersonal relationships, and the ability to deal with them successfully, may be of equal or greater eventual importance than the occupation they select. As counseling centers become increasingly aware of career patterns of women, however, new trends may emerge. Important among these trends is the fact that many college women will work for a few years before and during marriage. A period follows during which the woman has children and either works less or not at all. After children are grown, college women frequently reenter the employment market. This complex career pattern clearly deserves special consideration within the vocational counseling field.

THE PERSONNEL SERVICES MODEL

The counseling service that functions as an entire personnel service occurs almost exclusively in smaller schools. Larger institutions tend to develop specialization in different areas, and separate these functions from the counseling center as they become large enough to warrant separate staffing. In the smaller school, the counseling service may be responsible for any or all of housing, financial aids, foreign student advising, probationary and disciplinary referrals, college orientation, student center operation, freshman testing, test scoring, student recruitment, residence hall counselor supervision, and any other functions that are not directly related to academic teaching.

Staff members of such a center frequently have degrees in education. The staff is usually small, consisting of a director and at the most, one other full-time person, or two or three part-time workers. The director himself does much of the work involved in these activities. This model is discussed in detail in Chapter 7.

THE ACADEMIC AFFAIRS MODEL

Although the counseling service that functions almost entirely in an academic role is rare, it does exist and warrants comment here. In this case, the counseling service is treated almost like a division of the university. It does not teach courses, but it is closely identified with other academic functions. When students enter the university, they may be assigned to a counselor who assists them in registering, planning a program, or selecting a major. The staff may serve as academic advisers for lower division students or for students who are indecisive about a major. Students failing courses or placed on probation are required to report to the counseling service or may be assigned to a counselor who will serve as their academic adviser. Counseling may also be responsible for determining admissions or readmissions to the institution.

The staff of such a center may vary considerably in training and background, but is more likely to be oriented toward guidance rather than psychotherapy. Counseling is often seen solely as supporting the institution's academic goals, and working to return the student to effective classroom functioning as rapidly as possible. If return is not possible within reasonable limits, the student may be counseled out or dropped from the institution. Emotional problems tend to be referred to other agencies.

The major advantage of this type of center is its close tie with the academic process. Since the goal of the center is clear, and its importance is likely to be agreed upon by the faculty, a center of this type may achieve a high level of support from faculty and administration. One disadvantage lies in the tendency for such a center to have considerable involvement in administrative decisions about students. Counseling that involves student evaluation at the same time can be fraught with problems. Another disadvantage is that unless other facilities are available or dealing with students' emotional and personal development problems, the center cannot provide help when it is badly needed. The staff and center tend to be identified with academic problems (not problems of living and relating to others), and students are left on their own with conflicts that may be more severe and eventually more damaging than those that derive from the classroom.
THE PSYCHOTHERAPY MODEL

The counseling service operating under the therapy model considers its primary function to be the treatment of emotional problems in students. There is little or no vocational guidance, and study problems are typically only of concern if interference due to emotional disturbance is indicated. If the center exists in a smaller institution, vocational problems are seen as something the student resolves himself, solves through interaction with faculty or residence hall advisers, or becomes capable of solving through psychotherapy. In the larger institution, vocational guidance may be provided by a separate testing center, either provided by the university or as part of the counselor training program in the department of education.

Staff in such a center may be psychiatrists, but are more likely to be clinical psychologists. A psychometrist has no real function in such a center and psychodiagnostic testing will usually be done by the counselor himself, if any testing is used at all.

The rationale for such a center at small, highly selective institutions may be the commitment of the institution to individualized instruction and the overcoming of any impediments to their educative process. These impediments may include a high percentage of emotional problems, and hence provision of therapy may be seen as an adjunct to the academic program. Since the cost of such a program per student is high, the institution must have a great deal of income from tuition or other resources to allow for providing the service.

The limitations of this model appear to be restrictions in the range of facilities available to the student, high cost, and the small number of students that can be treated. In one particular center where the analytic approach is generally accepted, the students report there is an early rush to get signed up for personal analysis, but later in the year there is little opportunity for treatment of any but emergency cases. While this is undoubtedly an exaggeration, it illustrates a basic problem of a center oriented around processes that require an extensive, individual time commitment to all students who enter the service.

In a few institutions for religious training, the center appears to operate on a similar theoretical basis but without clinically trained staff. There is some assumption that the choice of institution has already resolved the vocational problem, and counseling is seen as treatment for personal and/or religious conflicts. The director, who may have his degree in theology or in philosophy, functions as a personal counselor. If there is any other staff, they will be instructors assigned as part-time counselors. Despite the tendency to increase training of ministers and priests in counseling techniques, such counselors often may be attempting a task for which they are not adequately prepared.

THE TRAINING MODEL

The counseling service may be a part of an academic department where its primary function is to provide a clientele for training graduate students in psychology or education. The fact that a center is administratively under the aegis of a department does not mean that it is a training center since many departments, particularly in small institutions, do not offer counseling training programs. The chief characteristic of the training center is that almost all clients are seen by students rather than counseling staff or faculty. Therefore, the training center is found only at larger institutions with graduate programs in appropriate fields. In some cases, all counseling is completely under the control of the department. In others, another counseling service is available under the Dean of Students or a similar official.

By definition, the staff is comprised of academic appointees; faculty are responsible mainly for teaching, supervision, and training. In addition to practicum students, many graduate assistants generally work part-time as counselors. In most cases, a psychometrist administers group tests, while students usually do most of the individual testing. Facilities include recorders and one-way vision rooms, and a wide variety of services offered primarily to provide breadth in training.

The chief limitation of this center is probably that clients are seen by inexperienced counselors. If supervision is adequate, however, this may not be as severe a problem as it appears on the surface. The beginning counselor is highly enthusiastic and involved. He may make mistakes, may say the wrong thing at times, and may create unnecessary problems for himself and for his client. The same thing can even be said for the experienced counselor, although it hopefully occurs less often. However, if the fundamental relationship between the client and the counselor is good, both the counseling process and the client seem to survive this kind of blundering without damage. If they did not, even the most experienced counselors would soon be in great difficulty. The key is good supervision so that the counselor can change his approach, clear up his own defenses, or improve otherwise. In an extremely good situation, the client receives the benefit of the counselor’s youthful enthusiasm and interest, along with the supervisor’s mature judgment and experience.

The real problem is the inadequate counselor who is incapable of counseling and who sees clients during his training until his lack of ability is discovered and he is removed from the program. Even here, the training center may be in a good position: At least supervision leads to recognition of the inadequacy and facilitates early removal. An inadequate counselor who is a new full-time staff member may counsel for quite a
while before his inadequacy is discovered, and it may be even longer before he can be removed.

The real disadvantage of this model may be its tie to a single academic department and its needs. The university as a whole may have little influence on such a center. Its functions are determined by the needs of the trainees, not by the needs of the university. The cost of the training center, on the other hand, is moderate compared to the amount of potential service. The university may be in a position to develop ancillary services that meet its own additional needs, or fill in the gaps left by the services of the training center. The danger here is that the character of academic departments (as well as perceived training needs) changes with staff alterations over the years. The institution depending on a training center should monitor its services carefully so that overall service to students remains functionally complete.

THE CONSULTATION MODEL

One model currently being tried by a number of established centers as well as new centers is that of mental health consultant to the campus community. With its increasing emphasis on consultation and the use of community resources rather than provision of direct treatment, the consultation model is based on the concept that professionally trained people are too difficult to obtain and too valuable to use entirely for providing service. If they can be used instead to mobilize and shape the resources of the community, their effectiveness and their impact on individuals can be greatly increased. The counseling center attempts to move actively into the academic community and campus living areas to (a) try to prevent problems before they occur; (b) identify them early when they can be easily treated; and (c) facilitate the use of all of the university's resources for mental health and student growth, rather than isolating themselves in a "therapy" or "guidance" tower.

In one such center just getting under way, the plans include group meetings with students and faculty, planning changes in the advising system, as well as discussion and seminars. The center is expected to involve itself in consulting on the activities of the placement office, the student government and student clubs, and the academic program. In an operation of this type, the center needs to begin with a thorough study of the needs of the university community and the resources available to meet these needs. Solutions to these problems are then sought via utilization of the community's assets. The question is not "How can the counseling service help?" but "How can the resources of the university be mobilized to meet these needs?" The counseling center must consult, train, and assist in the development of the necessary skills or programs.

The staff of such a center must have abilities beyond those of the usual counseling service. They must be professionally competent and well trained to identify problem areas and see solutions. They must also be intelligent and capable of establishing good relationships with other faculty. But more than this, they must use these relationships to motivate faculty, students, and administrative staff in positive ways.

The major advantage of this type of center is its potential for influencing many aspects of the educational process. The attitude of meeting the needs of the institution, which is inherent in the model, is also likely to lead to creative and valuable programs and activities. The primary problem is that while theoretically this kind of program should require less staffing, it seems in actuality to lead to increased demands for staff time. Despite careful consultation to encourage involvement of others in student development and student problems, the process seems to lead to greater sensitivity and more interaction and communication with the consultee. This leads to more referrals for direct service and increasing pressure on the counseling center staff. This kind of response should not occur if an institution is meeting the mental health needs of students with severe emotional problems. Unfortunately, few are in this position and any program that increases faculty sensitivity to mental health problems and faculty receptivity to the student will increase identification of such problems.

Another difficulty that appears minor until the staff has to deal with it is the fact that those individuals on campus who tend to be destructive influences on students are most resistant to change. In addition, the institution itself may be strongly resistant to change, and the stereotype of counselors and their activities can create great resistance to the application of this model. Some community mental health centers have found it necessary to return to a direct service model because the community would neither accept nor support any other role. While institutions of higher education are ostensibly more willing to try new concepts, actually accepting such a concept in operation may be quite another matter.

THE RESEARCH MODEL

While it is essential that at least the larger counseling centers be research conscious and see research as an important function, the counseling center that views research as its primary function may develop into a distorted pattern. While this pattern does not hold true at any center now, one center at a major university took this path in the past. Since directors come from the academic community where research is sometimes valued above all else, and since directors are in a position to create centers based on their own values, it is possible that this path could be followed again.
The counseling service referred to above had been reasonably well established in the traditional model when a new director was appointed. This director was a highly capable researcher in a particular area that involved massive data collection and the need for extensive statistical analysis. He began by immediately channeling much of the effort of key staff members into this project. He also provided rewards and reinforcement within his service only for research efforts along this line; as staff left, he replaced them with individuals whose primary effort was devoted to this research. Eventually, a separate division was formed to continue this effort, moving it out of the counseling center. By this time a major university was left without an effective service. The remaining staff consisted of two persons, one with a part-time academic appointment, and a temporary director whose real job fell in an entirely different personnel area.

The research itself was a valuable effort that the university should probably have supported. However, it should not have become the central purpose of the counseling service. A counseling service must meet a broad spectrum of needs, and the available financial support must be used to meet all these needs as effectively as possible.

**THE TRADITIONAL COUNSELING MODEL**

It is actually somewhat of a misnomer to call any counseling model traditional. As we have made clear, there are so many different approaches that no one approach can represent counseling. Nevertheless, a small group of counseling directors have had a major influence on the shaping of the counseling service in American colleges. They have not only directed large and effective services for many years, but were instrumental in starting the original counseling center directors’ group. These central figures have developed strong, highly professional counseling programs on their own campuses. In addition, many other directors have come from their staffs, and have used their experience to create similar programs.

This type of counseling service functions as a separate campus agency. Its role is to provide vocational counseling, short-term treatment of emotional problems, and some longer term counseling. The center is neither a vocational guidance nor a therapy center, although it may provide both services to some extent. The general attitude might be characterized by a statement made by L. E. Drake of the University of Wisconsin: “Counseling is not therapy, but it is therapeutic.” Similarly, vocational counseling is not seen as a “test and tell” process, but a response to a personal problem with the focus on creating an ability to make vocational decisions. Educational, personal, and vocational counseling are seen as overlapping and requiring flexible, eclectic approaches from the counselor.

These centers are also characterized by a strong attitude taken toward confidentiality. The early directors had to fight for the privilege of keeping counseling confidential, and over the years the role of the center has been shaped by this attitude. This may be one of the reasons that such centers tend to function in relative isolation from other student personnel functions and from the academic community.

Counseling services of this type are strong campus agencies on their own and are generally not closely identified with a particular academic department (although some faculty may have joint appointments in psychology or education). Most centers provide internships and practicum experiences for students, but the primary goal is service; training experiences are provided with this primary goal in mind. Almost all of these centers also contribute research to the field, but again this is secondary to the provision of high quality service. The center usually has a well-developed testing service with one or more master’s level psychometrists administering and scoring standardized tests.

Perhaps the strongest single characteristic of this type of center is its continual emphasis on improving quality of service. Internal staff training and intra-staff supervision are constant and important parts of center functioning. Staff are expected to be up-to-date and knowledgeable about the literature and to constantly improve their skills.

These centers probably provide the highest quality of general remedial counseling offered to students anywhere. Their primary limitation is in the relative isolation from the rest of the university. This is also an important strength, allowing them to develop strong counseling programs with complete protection for the student. This isolation, however, may limit counseling to treatment of the individual student after the problem becomes so severe it forces the student to come for help. It is difficult for such a center to move into prevention programs without increasing its involvement with other campus agencies and thereby changing its role to some extent.

**Summary**

A wide variety of counseling, service, research, and training functions are performed by the counseling center as an expression of its underlying philosophy. These philosophies may be grouped into a number of common models that include the vocational guidance model, the personnel services model, the academic affairs model, the psychotherapy model, the training model, the consultation model, the research model, and the traditional counseling model. The central factors usually determining the model of a center, and hence the services provided, are the attitude and values of its director.
The Counseling Center in the Small College

There are almost as many different kinds of counseling programs as there are centers in small colleges. The small college still seems to offer the clearest opportunity for individual approaches; but analysis of the kinds of centers that have been established suggests a basic conservative attitude that has influenced their development. Even where innovation has been attempted, counseling centers seem to have merely assumed student personnel functions performed by other agencies on larger campuses. The professional counselor or counseling psychologist should encounter unusual opportunities in the small college for understanding and influencing the environment in which he works. Unfortunately, the institutional characteristics of the small college create limitations that may prevent him from achieving full effectiveness.

There is a dearth of literature to which the counselor in the small college can turn for guidance concerning his particular problems. Bixenstein (1959), Deutsch (1958), and Scott (1961) have reported on the development of their own counseling programs on small campuses. Their experience suggests that while the basic tenets of counseling remain the same, counseling objectives must be modified to fit the institutional model. On the small campus, the goals of counseling, the relations with faculty and administration, and the professional development of staff members on the small campus must be considered in somewhat different light from that in which they are viewed in the large centers more frequently described in the literature.

By definition, a small college has few faculty members, but it serves approximately the same functions and tries to provide as many services for the student as the large institution. Since most of the faculty are involved in administrative functions, there is likely to be a shortage of senior faculty members to head committees. The director of the counseling service will be called on to serve in many different capacities and on a number of committees. He will almost invariably be asked to serve when the committee is concerned with some aspect of student welfare that falls outside the academic realm.

The small college counselor will find his relations with faculty and administration better if he teaches a course or two (to understand what goes on in the classroom), participates in college activities (to show that he enters into campus life), and publishes frequently in professional journals (to demonstrate that he, too, is a scholar). But while this may help relations, it may not leave the counselor any time for counseling; and counseling is, or should be, a main function of a center. (In a survey of small colleges in the Pacific Northwest, Goertz and Strong (1962) found that counseling staffs were heavily involved in duties other than guidance and spent an average of only one-quarter to one-half of their time in counseling.)

The roles one director of counseling actually played during an academic year were director of counseling, director of housing, foreign student adviser, chairman of the Foreign Student Committee, chairman of the Residence Halls Committee, chairman of the Food Service Building Committee, and a member of the Medical Service Committee, Student Council Committee, and three selection committees. The two staff members also provided a remedial reading program and a test-scoring service, participated in 23 high school career events, taught sections of academic courses, and, incidentally, counseled students.

Nygren and Paar (1962) have reviewed the purposes of counseling centers. They believe that counseling personnel have been spreading themselves too thin and failing to keep an eye on their goals. Both suggest that counseling personnel should have a sharply defined direction and purpose. They should not attempt...
to do everything, but should do whatever they do well. There is definite debate as to the role of counseling in the small college.

POSSIBLE COUNSELING MODELS IN THE SMALL COLLEGE

The many different types of centers with highly divergent roles make it difficult to find a common objective that small college counselors can determine as their goal. A description of some types of centers reported in the survey will show how varied these counseling services can be.

The most common type of center (but not representative of even half the small colleges) is the student personnel center, where many or all of the functions performed by an entire division in a large institution are handled by a staff of one or two. This type of center is discussed further in the chapter on counseling models. Its major advantage is the close coordination of many different functions and a better overview of the students' entire life pattern in college. The major disadvantage lies in the role conflicts of the counselor. For example, as a university official concerned with loans and scholarships, he must use available funds for supporting students motivated and capable of success. As a counselor, he must obtain the student's trust and establish an atmosphere conducive to the student's free discussion of his motivational problems. Such role conflicts can be handled but cannot be resolved.

There is great variability even among centers that can be classified as general student personnel services. The pattern of services offered seems to depend more on what functions have been absorbed by other administrative staff and what is left for the counseling center than on any rational assessment of what functions the center should serve.

A continually recurring theme in reports on small college counseling services is that the closer communication patterns make the director a participant in many aspects of the student's environment. In the large institution, the counselor frequently sees himself as dealing with the student and what he brings to the counseling session. While certain records are available to him, such as financial aids or even course and grade transcripts, he rarely calls on these records in counseling the student. This is partly because of the difficulty in transporting and collating such records, but the counselor adapts to and generally accepts this limitation. None of the directors in larger institutions complained of difficulty in obtaining such information, even though many indicated it was highly impractical to try to obtain such information on their campuses. In the smaller schools, directors apparently felt such information was necessary, and commented on problems in administrative structure that made such data difficult to obtain.

Another type of center has evolved in a small group of eastern colleges where counseling staffs are in relatively close communication with themselves as having similar duties and problems, and provide a small group of centers with some consistent ideas about the goals of their profession. The centers are administratively within the psychology department and are headed by the department chairman. The staff (including the director of counseling) primarily consists of appointees in the department of psychology who teach one or more courses each semester. Staff members provide personal and vocational counseling, and are not particularly involved in other aspects of the university. The colleges are well-established, small liberal arts colleges, maintaining rather constant enrollment through student selection. This system seems to meet the institutional need for providing individualized service to students who are generally from the higher socioeconomic strata. A counseling service of this type has an advantage in offering its staff academic appointments, and in providing counseling that is not diluted by demands outside of the counselor's academic role. One disadvantage seems to be selection of counselors primarily because of their ability to contribute to the academic functions of the department rather than because of counseling background or abilities.

Some small centers reported that they had a part-time director (most frequently half-time) and used available staff from the psychology and education departments for counselors. One center, for example, listed six faculty members who contributed 5 percent of their time to counseling. The advantage of this type of organization is that the counseling staff consists of a total of 80 percent of a person, but the staff on 5 percent appointments see far more clients than such a small appointment would warrant. At first glance, this would appear unfair to the faculty involved. However, many faculty in these departments would provide help for students in any case, and the indication of a 5 percent appointment at least gives them formal recognition for this service. Where adequate financial support for staff is simply impossible to obtain, this kind of approach might at least provide a minimal service to the students.

The real disadvantage lies in the lack of control of the quality of service offered. Academic faculty, even in education and psychology, are not necessarily qualified by either temperament or training to serve effectively as counselors. Furthermore, their promotional opportunities and salary increases are based entirely on departmental criteria, not on counseling skill. The director can perhaps exercise control by selection, but the overall situation seems to offer little chance for a fully effective service.
A frequent attitude of the small college toward counseling is illustrated by one director who indicates that, although he provides study, vocational, and personal counseling, all faculty are available for counseling; therefore, this must be taken into account when estimating the counselor–student ratio. While this suggests a lack of sophistication on the director's part, it also reflects a common attitude of small college administration. In fact, several institutions stated that although they did not have a counseling service, the entire faculty provided this service. The small college frequently publicizes the close relationship between faculty and students as its major advantage, and this attitude may be a symptom of that kind of thinking. Even in larger institutions, however, many of the faculty feel that the counselor offers nothing that the faculty adviser does not already do. In the eyes of these faculty, everyone is a counselor; the professional is simply someone who gives advice or listens to people. It might help if counselors could describe their functions more adequately and could communicate this to other faculty members.

Another form of counseling service is prevalent in smaller theological colleges. Staffing may vary greatly, from part-time faculty with master's degrees in theology to full-time PhD's in psychology. Many of these centers provide students with advice or religious counseling, and most do not provide vocational testing of any kind. Where the counseling staff are primarily religious faculty, emotional problems either lead to dismissal from the institution or referral to external mental health resources, psychiatrists, or mental health agencies.

A completely different form of service is provided by a one-man center in a college of 1,400 students. The director is the only counselor; he has a secretary-psychometrist and a receptionist-occupational information assistant. This man sees about half the students in his college at some time during their education, covering the full range of counseling from study help and group reading programs to some long-term counseling. He also coordinates the faculty advising program and student volunteers to advisers, trains residence counselors, has a research grant, and publishes about one article per year. Though this is only a sample of his activities, it suggests the extent of his involvement in college affairs. His situation also illustrates another characteristic of small college centers: The organization is not absolutely rigid and depends as much on communication between individuals as it does on formal administrative charts. For example, he reports directly to the president, although his budget goes through the dean of students' office.

Another unusual center has a director serving one-third time, and uses the head residents from dormitories and a small part of three faculty members' time as counseling staff. This staffing pattern would give the counseling center considerable influence on the residence halls; but, where head residents were responsible for order in the halls and reporting of disciplinary matters, it might lead to considerable role conflict. In this situation, the director indicates that the counseling center does serve a number of disciplinary and administrative functions, and that it includes the offices of dean of men and dean of women. It also provides tutoring in individual subject areas and includes a chaplain on its staff. With the best of good will, it would appear that a center of this type would not only lead to immense conflict between norms within roles, but between roles themselves. In fact, it becomes difficult to consider such an organization as a counseling center, when it is so similar to traditional student personnel services.

This much role confusion is relatively rare, but clarity of role is not, in itself, the solution to the problem of the small college center. In one small institution the center is called a Career Development Center, and the director (and only staff member) spends one-fourth of his time in counseling, one-fourth in teaching, and half as director of placement. Counseling is generally oriented toward vocational goals and choices, thus providing a consistent set of goals and functions, although the director tries to offer some personal counseling when he has time. While this center is probably offering a valuable service, it is clearly a limited one. The director points out that another problem is occurring because the service is located among administrative offices, and students are reluctant to visit there.

While the small college may recognize its students' needs for professional help with emotional problems, it is frequently difficult for it to provide such service. The counseling service, with its many other functions and limited staff, must hire staff with training and interests in several areas. Highly trained counseling psychologists or psychiatrists are hard to find and often too expensive to retain on a full-time basis. There are several recent developments that suggest an alternative solution to the problem of providing a high-quality clinical diagnostic and treatment service with limited financial and personnel resources. Recent legislation has led to great expansion in community mental health centers. These centers are available in metropolitan communities as well as in many rural areas. One of the smaller colleges provides a thorough diagnosis and therapy service for its students through a contract with the local mental health agency. A full-time psychiatrist, two psychologists, a psychiatric social worker, and a social worker are available for student assistance. About 30 percent of their time is devoted to college students, and they average approximately 15 interviews per client. They see about 15 percent of the students at some time during their academic career.

Another recent development of interest to small col-
leges in highly populated areas is the mental health service organized specifically to contract with such institutions. It provides diagnosis, therapy, and other services that are generally partly paid through contract and partly through client fees. It is estimated that these units see about 10 percent of the students in colleges that do not provide a counseling service and about 1 percent in colleges that do.

Even though each counseling center in a small college tends to be unique, they share some common elements. For one thing, small colleges include those with restricted enrollment and limited growth plans, and those with very extensive growth potential that will soon be major institutions. The more stable situation seems to be related to a service-oriented or mental-health-oriented center. The pattern of the center is reasonably well established and has been consistent for several years. Where there is growth potential, this service is more likely to involve many student personnel functions, and the director frequently spends much of his time planning and organizing future programs. He also often reports that it is difficult to get others to attend to student problems. One states, for example, “All anyone can think about is buildings.” Under these circumstances the director may be more effective in the long run if he starts considering his institution as already large and begins to plan 5 to 10 years ahead. Despite these common factors, it is clear that small centers have had no consistent framework or model to help in planning for growth.

PLANNING COUNSELING FOR THE FUTURE OF THE SMALL COLLEGE

What, then, should the small college counseling center be? What should it do? To begin with, it should recognize that the counseling center cannot be all things to all people. A one- or two-man guidance staff cannot conduct a successful reading clinic and a vocational-guidance or test-scoring center and still serve a multitude of other functions.

Clearly, limited time and energy must lead to a decisive choice on the counselor’s part. Since his efforts must be confined within certain bounds, possibly the best way for him to maintain good relations with other groups is simply to be a “good” counselor and let the quality of his work speak for itself. Too few counselors try this approach, but counseling will only be a profession when all other activities are considered subordinate to its central function. Unless the small college counselor carefully defines his role, he will find less and less time for counseling.

Counseling should have a clear purpose and a definite direction that may best be served if they are consonant with the central purposes of the college. If the counselor works in a denominational school, he should be sensitive to religious pressures and sympathetic to the predominant campus value pattern. Similarly, in a secular institution with strong scholarly traditions, the counselor must have the cultural and educational background to comprehend the value conflicts inherent in the study of modern social thought. Empathy, however, should not lead the counselor to impose his or the institution’s values on the student. One weakness of many small colleges is a strong pattern of conformity and social pressure that does not allow students to express themselves. The counseling office may be the only place in a small college where the student will feel free to voice beliefs that differ from those of the group.

The goals of small colleges vary greatly. Within the limits of professional behavior, the counseling service should support the school’s primary goals. Dressel (1960) points out that merely by virtue of its size, the small college does not do a better job than the large one. He lists six basic student needs and places the intellectual needs first. Secondary needs such as social, economic, or vocational should not interfere with the main purpose of the college. Although the small college cannot provide all the services available at a larger school, it can probably meet students’ intellectual needs better. By discussing motivation, values, and personal difficulties with the student (or by creating programs that lead to this kind of discussion), the counselor can help him understand the intellectual purposes of college as well as use his ability in meeting them. Educational, vocational, and personal counseling should be directed toward resolving problems that divert the student, enabling him to return to the main track—academic proficiency.

It is especially important that the counseling staff maintain a clear and complete understanding of what the college expects of it. “The small college must seriously consider the extent to which it should provide specialized and individualized services as well as the extent to which it should admit or keep students who require such attention” (Dressel, 1960). If the institutional goals are such that intensive work with individual students is viewed as essential, and if a qualified staff is available, the small college can provide for long-term treatment of even the most severe emotional problems of the student. When the staff is limited, judgments must be made concerning the amount of time necessary to treat a given problem in relation to the benefit the student and the college may derive from the treatment. The decision will often conflict with the desire to help the student.

Both the counselor and the college should evaluate their plans for meeting students’ needs and determine the degree to which they are responsible for helping disturbed students. Should the counseling center give psychotherapy? An analysis of the real problem indicates that this is not the critical question. Good counseling is not simply giving students advice; it is a proc-
ess of assisting in the development and growth of a complex human organism. "Psychotherapy" is a descriptive term for a set of techniques that apply to the treatment of problems in human adjustment, and adequate counseling will call for many techniques that are a part of formal psychotherapy. The counselor who does not include them in his repertoire not only fails to help students solve personal and social problems they encounter, but also fails to function successfully in vocational or educational counseling. Counseling is not psychotherapy, but it is therapeutic.

The real problem facing the counselor is the extent of his commitment to the student. In the small college with a limited budget for counseling services, the efforts and energy of the counselor may be best expended on the normal student. In many colleges, senior administrators have established arbitrary rules to limit counseling. Frequently, the staff of the counseling service is directed to see no student more than a given number of times. This is a shallow policy that meets only the form of the problem, not its content. A real solution should be sought through careful analysis of the goals of the college, the needs of the students, and the limitations the college must put on its commitment to meet those needs. With a clear understanding of these necessary limits, the counselor can reach decisions in individual cases, refer the student to private or public mental health agencies when counseling is inappropriate, or even recommend withdrawal from college.

It is here that the possibility of a contract between the small college and an external mental health agency would be valuable. Although such an agency cannot adequately replace a counseling service because it is not an integral part of the educational process, it can provide a high level clinical resource for diagnosis and short-term therapy, paid for partly by the institution and partly by the student on a need basis. Furthermore, where extensive treatment is needed (and this is not seen as the institution’s responsibility), it is available if paid for by the student. When a student has financial need and treatment is essential, other resources such as the Vocational Rehabilitation Administration may be able to provide financial assistance.

Naturally, many of the problems with which students are confronted will touch on issues too complex for the small college counselor to handle, either because of pressure for time or lack of training in the treatment of severe emotional disturbance. In dealing with serious emotional problems, a close liaison between the counselor and the medical service is essential. A regularly employed psychiatrist can be of invaluable assistance as a referral and consultative resource, but only a few small colleges have a psychiatrist available as a staff member or a consultant. The absence of a regular psychiatric referral resource places a special responsibility on the college counselor because he does not ordinarily carry malpractice insurance and does not present to the concerned parents the charismatic image of the medical doctor. Occasionally, parents of disturbed students are disturbed themselves and may accept the opinion of a medical authority more readily than that of a counselor. Working together in the small college setting where the student’s welfare is of primary concern, the physician and the counselor can establish a close relationship that is advantageous to both. The medical man spends a considerable amount of time dealing with anxiety in his student patients. But since his services are usually available for only a few hours a day, the time he spends on each person is limited. He will find the counselor a valuable resource in his overall plan of treatment. In many cases, the student will benefit from consultation with both the counselor and the MD, particularly if he is suffering from the emotional concomitants of a physical condition or if general stress has created special physical problems.

In addition, the counselor should always be in close contact with the medical personnel so that he will be acquainted with the general state of campus health. An epidemic of mild virus infections or a sharp rise in the incidence of mononucleosis can lead to a sudden increase in the number of problems of anxiety or depression that bring students to the counseling service. In those colleges where neither medical nor psychiatric advice is available on campus, such assistance must be arranged on a regular, consultative basis.

The ease of communication on the small college campus provides the counselor with a splendid opportunity for establishing working relations with the faculty and the administration. Whereas the large institution may have to turn to in-service training institutes and formal meetings with other campus organizations to communicate counseling viewpoints, the main avenues on the small campus are the informal ones, such as coffee breaks. The counselor must use every opportunity to relate counseling philosophy to practical problems and to develop good rapport with all segments of the college.

Nevertheless, ease of communication is not an unmixed blessing even though the small campus almost demands it. Faculty members and administrative staff want to be kept informed of referrals. Since they are closely associated with their students, they think access to information might enable them to be helpful. Some counselors not only consider communication of this kind unnecessary, but believe that confidential information about students cannot be revealed, even to other faculty members (Bixenstone, 1959; Deutsch, 1958). Such an attitude creates barriers between the counseling staff and the faculty. If the instructor who asks the counselor for information because he sincerely wants to understand and help his students is met with
rejection and a discussion of ethics, he will turn to others for help in the future. There are benefits to be derived from taking a position that allows communication within the ethical limits of the situation. With the client’s permission, for example, the counselor could prepare a brief summary of the essential aspects of a case that would give the inquirer a better understanding of the student and his behavior. Confidential information would be withheld, but the summary would include a statement of the case, the counselor’s interpretation of it, and his recommendations. If the counselor has established a good relationship with the student, rapport and trust should be unharmed. This kind of circumspect and limited communication will help the counseling staff remain on good terms with the teaching faculty.

Unfortunately, it is not the student who is adjusting successfully to college that is likely to come to the attention of the faculty or administration, but the student who is failing or the one with emotional difficulties. When a student who has been referred for counseling resolves the situation, he fades into the background; the student with persistent problems stands out. Thus the advantage of working in a small college where close personal relations with the faculty lead to referral sometimes militate against the counselor. His colleagues know that certain students are not responding to counseling as they had hoped or expected. They tend to forget that the student was depressed, dependent, or aggressive when he entered counseling, and they hold the counselor responsible for the student’s behavior. At the very least, the counselor may appear inadequate in his job because his client has not improved. Since his status and prestige are at stake, he is placed in an extremely demanding situation. His professional ethics do not allow him to defend himself by revealing confidential information about his client. He cannot reveal, for example, that the emotional problems of a particular student are related to his home situation and will persist until his parents alter their behavior or he can change his environment. He cannot point out that because of family pressures and peer expectations, a student has been forced into a college setting, and that his need to extricate himself from the situation is manifested in continuing academic failure.

The emotional pressure on the counselor in this dilemma may lead him to change his counseling relations by avoiding involvement with students who have obvious problems or by trying to force superficially acceptable behavior on them. Either approach is poor counseling technique.

In the large institution, other professionally trained staff are available, and the counselor spends some of his time consulting with them. Their acceptance and understanding of his situation support him through the challenging stages that occur in counseling. On the other hand, the counselor in a small college is, professionally, a lonely man. He may have many friends but they cannot share his problems and his professional conflicts. Among the problems this counselor must face, loneliness is the greatest personal problem.

However, all is not trial and tribulation on the small college campus; satisfactions and rewards may far outweigh the shortcomings. First and foremost is the exhilaration of being part of a growing, intellectually challenging environment. Because the counselor can see the small college as a whole: (a) he is likely to be well informed about major administrative issues and decisions; (b) he knows more of the faculty than he could in a large university; and (c) he knows faculty members in widely diverse fields. He can readily discover their attitudes toward education and toward their students, and thus get a clear picture of the entire college and its role in shaping students’ lives. The small college forces the counselor into a wider view of counseling as an integral part of the educational process. He is not isolated in a separate office with a separate function, but deals with all levels of the institution.

In addition, the ease with which new problems and new ideas can be carried out is important. Instead of trying to communicate with an administrative monolith, he confers with a few persons who are responsible for the management of the small college and who are readily available for consultation and advice. For example, recently it took only three phone calls, completed in less than 15 minutes, to secure administrative approval of a five-week summer institute. The first call was to the dean of students to ask his consent; the second call was to the vice-president of academic affairs to arrange for credits and course offerings; and the third was to the vice-president for business to get information about the financial situation and the availability of housing. A written memo to confirm the calls completed the transaction.

The small college offers an excellent opportunity for personal and professional development. Although the counselor may miss the case conferences and the professional interchange of the large counseling clinic, he will counsel students on an amazing variety of problems and situations. As the only counselor, he will be forced to make decisions that might otherwise have been made by his superiors. He will have more responsibility and more opportunity to gain experience and exercise initiative than would have been possible in a large university.

To be sure, the advantages of the small college occasionally work in reverse. For example, the opportunity to take part in a wide spectrum of academic affairs sometimes leads to the assumption of responsibilities that interfere with the counselor’s main function.
Close contact with the faculty may result in some problems. The counselor must try to maximize the advantages that can be derived from a situation while keeping a close eye on the problems that may arise.

One approach to resolving many of the conflicts of the small college counselor is to use a simple rule of thumb: Counseling is the most important function of a counselor. Counseling does not necessarily mean only the clinical type of interview with the student. The counselor on the small campus is the only mental health expert available, and he must be concerned with as many aspects of mental health as he can, particularly primary and secondary prevention. Counseling, or consulting, with the residence hall personnel in order to improve their ability to deal with student problems and their ability to identify students who need referral is time well spent. Helping the faculty member develop a better understanding of student needs and bringing him into contact with students on a meaningful basis is a valuable activity. Defining counseling in this broad sense, however, the administrative decisions that the counselor must make should be based on two major goals: (a) to provide the most thorough and competent counseling he can; and (b) to provide as much counseling time as is practicable in his particular situation.
CHAPTER 8

Future Directions for Counseling Services

The survey of counseling in the United States indicates that counseling centers are seen as the basic resource for aiding college students in emotional difficulty and for providing certain traditional services, such as vocational counseling and study help. There are also strong indications that the rapid growth of universities and colleges, coupled with increased demand for psychological services, may make it impossible for counseling center staffs to provide adequate services to students.

This is particularly so if traditional approaches to counseling and mental health services are followed. This chapter explores some relevant dimensions that should be considered for the future of college counseling centers. Whether or not the directions suggested are the ones that should be followed is unimportant. What is important is that questions about the future role of counseling centers be raised.

A Problem for Today

The leisurely pace of yesterday that allowed a counselor to sit for hours in a face-to-face relationship with a student no longer exists on our campuses. The number of students in higher education is increasing rapidly, and the proportion of trained counselors available for helping them is falling far behind. A more important limitation derives from the fact that counselors are still being trained in old, possibly outdated techniques. Test interpretation, vocational information, individual relationship counseling, didactic analytic therapy, and clinical diagnostics may all be valuable tools; however, they do not provide an adequate answer to how counseling can serve students most effectively. Traditional procedures require many hours of counselor time for each student and are aimed at only a small proportion of the student body.

Almost all counseling directors realize the limitations of their service. Even helping students who appear at their doors is often almost too much of a load for them to handle. In nearly every center, the demand for help far exceeds available resources. Many centers have been forced to solve the problem by not publicizing themselves or their services. Other methods include waiting lists, rules such as limiting the number of interviews to an arbitrary number, and charge fees to discourage all but the most dedicated clients.

All of these adjustments may be symptomatic of a basic flaw in today's counseling procedures. Traditional techniques simply are not capable of meeting the demands of today's educational environment. There are not enough counselors and the help they give is too often only reparative of damage after it occurs. What is needed is a new kind of counseling program: one that increases the effectiveness of staff by improving their ability to analyze and deal with problems without massive staff-time commitments; one that extends into the campus community, identifying and using its mental health resources; and one that is as concerned with prevention and personal growth as it is with remediation and repair of damage.

Some Possible New Directions

There are three major trends that have implications for the type of counseling programs that should emerge in the future. Two emerge from recent developments in community mental health: the psychologist moving directly into the community, and the use of consultation as a major focus for mental health intervention. The third is a shift from a concept of treatment for emotional illness to a concept of counseling for personal development.

One major trend in the treatment of mental illness is the movement of the mental health center directly into the community. The mental hospital used to be viewed as an isolated unit, where custodial care and treatment were provided until the patient could return to his normal affairs. Bennett (1965) has stated that "The mental health frontier is shifting from the
amelioration of illness to preventive intervention at the community level. Traditional methods of patient care are being supplemented by new approaches to interpersonal problems and to the management of group tensions. The community itself is being taught to collaborate in creating health giving environments.” In many cases, mental health centers have begun to deal with prevention and early identification, and have tried to create changes in the structure of the community that lead to improved individual development and fewer eventual problems.

Similar changes are just beginning to take place in counseling and in student personnel services. For the most part, however, counseling centers are still primarily isolated places where students come for help. They still have not recognized their responsibility for being active agents of mental health intervention in the entire campus community. Just as the effective medical service should be involved in overall programs of environmental health and prevention, the counseling center should be actively involved in programs of personal development and primary mental health prevention.

Another major trend in community mental health that began as far back as the 30's is the emphasis on consultation as a major method for mental health intervention. Counseling staff frequently see themselves as the only resource for campus mental health. If this were true, the task of providing adequate service would be theoretically impossible. To be effective, future programming must begin to mobilize other community resources, not simply depend on professional staff. Consultation provides a major technique for improving the mental health impact of other individuals so that they become valuable resources. It has been part of the community mental health movement for some time, and should become increasingly important in programming.

There are four major resources for mental health within the university that should be used effectively. Besides the major resource found in the staff of the center, others include university faculty, residence hall and other personnel services staff, and the students themselves. The counseling service should encourage the active involvement of these other resources in the prevention, early identification, and treatment of problems through consultation and program planning.

Another new direction derives from the concept of developmental counseling (Oetting, 1967). College students should not be seen as stable, fully matured persons maintaining themselves in a stable society, but as changing individuals engaged in a series of developmental tasks critical to that growth. Some of these tasks are intellectual and lead to new techniques for solving problems, new ways of motivating oneself to concentrate and study. Others may be social and may lead to learning new ways of relating to others and new ways of dealing with unfamiliar environments. Still others are personal, leading to knowledge of self-limitations and capacities, and to the clarification of goals and understanding of emotional responses. A few of these developmental tasks, particularly those involving intellectual growth, may be assigned by faculty as part of course requirements. Others may be created by the demands of peer groups and by society as a whole, while still others may grow out of the individual’s own self-concepts.

Furthermore, the entire college experience can be viewed as a series of these tasks. The student who engages in and learns from these tasks becomes what a college graduate should be: a person with new skills and abilities, capable of assuming a responsible place in society and capable of continuing to learn from future developmental tasks. The student who is not capable of using these experiences for growth may fail or drop out, or may continue and finally graduate, but never use his full potential in college or in life.

Mental health can be defined as the ability to engage in and utilize these developmental tasks for personal growth. Therefore, a mental health problem is anything that prevents or interferes with the individual’s ability to use a developmental task. Thus, the student with a background that has not enabled him to learn earlier skills, whether interpersonal or intellectual, may not be capable of engaging successfully in the tasks of the present. The counseling service should then be concerned with providing experiences that will allow the student to learn those skills he lacks so that he can engage in and learn from tasks encountered in the university setting.

In another situation, an emotional crisis or emotional stress might interfere with the student’s ability to engage in appropriate developmental tasks. In that event, counseling would be concerned with reducing anxiety and helping the client develop greater capacity for tolerating stress.

There also might be situations where the developmental task that would be appropriate for continuing personal growth simply may not be available. Environmental deprivation of this kind would also be seen as a mental health problem. The counseling service should be concerned with encouraging faculty or others to provide the necessary experiences or, in the absence of other resources, might develop a program itself.

This developmental definition of mental health can be used both to view the overall goals of counseling and as an aid to planning programs for individual treatment. The focus of a program is not seen as “reorganization of the personality,” or as creating an “emotionally adjusted person.” Instead, the focus is on creating within the individual the ability to profit from the total college experience. This goal is not only reasonably clear, it is also in complete agreement with
and support of the university's goals. It is a goal with educational relevance, appropriate to mental health in the university setting.

These three major trends, movement into the community, consultation, and developmental counseling, suggest a number of new directions and new kinds of programs for counseling services.

Movement into the Community

Faculty tend to resent any intrusion into what they view as their domain: training students' intellects. Unfortunately, student personnel services have responded by attempting to set up a separate domain on their own, involving the social and personal life of the student. In doing this, both the faculty and the personnel services staff have created an artificial dichotomy. The student is a single developing organism. His behavior cannot be separated into cognitive and affective domains. He does not appear in the classroom as raw intellect, nor does he function in the rest of the campus environment in only social ways. There is increasing recognition of the need to bring greater impact to the entire educational effort, and many universities and colleges are now working with living and learning programs. Counseling staff have much to contribute these programs, but all too often have remained in the safe confines of their offices.

Residence halls and student centers are becoming involved in the university's academic programs. Faculty are developing greater concern with the quality of their teaching and are beginning to seek ways of increasing their impact on the student. One of these ways is to move out of the classroom and make educational efforts more relevant to the immediate concerns of the student. Psychologists and counselors can be immensely valuable in this effort.

While this movement is only beginning, it is already clear that it will be an important direction in college education. Where a counseling center has established itself rigidly in one of the service models, there will be a tendency to remain isolated and to adhere to its past pattern. Instead, the counseling center should plan an increasingly central role in the university's overall program. Surprisingly, this was suggested long ago as 1950 by Embree. That role will be particularly important if it accepts the mandate deriving from the developmental definition of its function. According to this definition, the counseling service is responsible for ensuring that students are able to benefit from their experiences, whether these experiences are intellectual, social, or personal. As the university expands its efforts, the counseling staff should be involved in planning, providing consultation on how to increase impact on the students, and building into new programs a means of identifying problems before they become serious.

This same definition suggests that, while the counseling service is not responsible for providing the developmental tasks of the classroom, it is concerned with anything that prevents the student from using these tasks for growth. The center should be providing consultation to teachers with a particular emphasis on identifying problems, reducing unnecessary stress, and providing remedial experiences for students with inadequate development. They may also be helpful to the professor by showing him new and better ways to communicate his course content. The same kind of involvement should occur with other campus programs. The counseling service should be involved in residence hall consulting, and should probably be working with students and student groups in every college setting.

In addition, the counseling service should be deeply involved in studies of the campus ecology. Its immediate concern would be evaluation of developmental experiences and their effect on the overall growth of the student. Further study should probably center around questions about the kinds of experiences that are unavailable, and the kinds of problems that prevent students from using effectively those developmental tasks that are present.

Consultation

The consultation model is well established in social work and in community mental health. There are two different forms of consultation: one focuses on the consultee and his problems or his own skills and the other focuses on the person the consultee is dealing with. Both types of consultation might be valuable in the university setting, depending on the problem and on the relationship between the consultant and consultee. The four major groups with whom the counseling service would consult are: administration, faculty, living area staff, and the students themselves.

FACULTY AND ADMINISTRATION

Faculty and administrative staff who come into contact with students in a myriad of situations and roles are most critical to student development. This group is the prime mental health and educational resource. Programs of consultation should be designed to help faculty and administrators increase their effectiveness in working with students both on a professional and personal level.

Developing an effective faculty-administration consulting program is a very large task, especially considering that counseling staff are hoping to work with individuals who often feel no need for assistance. Only
the most skilled, gradual, and well-planned consulting program can have any hope of succeeding. Yet the very difficulty of the task demands that even more strength be used to attempt it. This kind of innovative effort is required so that the total campus community becomes more of a mental health resource itself.

Experience has demonstrated that effectively implementing this type of program may be a delicate and time-consuming task. Relationships have to be built on a personal level, not via formal channels. In addition, the early stages of such consultation tend to lead to greatly increased referrals of students with problems. Unless backup help can be provided while the faculty member is developing confidence in his own ability to deal with student problems on a new level, he will reject any ideas about his personal interaction with students and return to dealing only with subject matter. On the other hand, if even one faculty member begins to respond to students in a new way and knows why and what he is doing, he may begin to communicate these attitudes to his colleagues and serve as an informal consultant himself. An example of a new approach could be through English composition courses taught during the freshman year. These courses include most of the beginning students, and require them to produce essays on many subjects, often of a highly personal nature. Preliminary work with faculty teaching these courses suggests that they are in a position to identify many problems before they become apparent in other ways. Faculty committed to the student’s welfare also spend considerable time talking to individual students, often about questions involving basic value systems, interpersonal conflicts, and topics that have more to do with general adjustment than skill in composition.

An effective consultation program that would teach the faculty the bases of counseling and improve their ability to deal with student problems can have long-term effects for many students. Time spent in consultation with these faculty should be repaid by the service they provide many times over during the many years they will be teaching. An effective faculty program should create a new mental health resource that will continue to function long after a formal consulting program is concluded. Other alternatives for faculty consultation can rapidly move beyond helping faculty and administration serve as better counselors. For example, Stanford’s Western Civilization faculty televised and videotaped classroom interactions. Faculty members then met with counseling staff to discuss the impact of lectures and class discussions. This approach was successful over a period of years and resulted in some marked changes in the teaching process for some individuals. This type of consultation involvement obviously takes considerable time and skill on the part of the psychologist, but illustrates the potentially important role of the counseling center staff.

Today’s administrator faces a multitude of problems and issues in dealing with students. Increasingly, counseling center staffs are being called on to provide research data on students or, more simply, personal and professional opinions regarding student issues. Counseling center personnel who have developed working relationships with administrators over a period of time are in a key position to help the university shape itself for maximum impact on the student’s personal growth. The concepts of primary intervention, developmental intervention, and crisis-planning discussed in the next section represent broad areas where counseling staff can assist the administrator in effective student planning.

LIVING AREAS

Residence halls are frequently the basic living unit for most freshmen on campus. They can provide either an opportunity for learning and developing or a destructive experience producing severe anxiety and stress.

One of the major efforts of a counseling service should be a more active and involved program of dormitory consultation, coupled with the creation of programs that lead to early identification of problems and the creation of a constructive, healthy environment. In the past, centers have provided programs for dormitory consultation. They have trained student and staff advisers, and have served as a source of referral when problems occurred. The training and consultation, however, have almost always been problem-and-referral oriented, and when problems occurred, they were treated outside of the residence halls by traditional methods. An effective consultation program in residence halls should lead instead to new educational programs within their walls, programs that help students in their personal and academic development.

The student spends less than one-fourth of his waking hours in class. The role of the residences and other living areas is obviously vital in his overall development. The counseling service should be consulting with residence hall staff, student union staff, and others involved in student life areas. The key concepts would be to plan programs for active mental health intervention where the student lives.

STUDENTS FOR STUDENT DEVELOPMENT

The students themselves should have increasing involvement in their own community, for change without involvement is usually minimal. Instead of being passive participants for whom programs are provided, they should be brought into the active process providing service for others. However, programs involving students must be carefully planned. For example, students should not play “therapist” to other students.
Nevertheless, there are many useful roles that they can fill, frequently better than a faculty or staff member. Not only does this reduce the cost of programs by providing help that does not require staff time, but it may also increase the effectiveness of programs because of the close identification with role models among students.

On one campus, selected students have been used successfully as assistants to academic advisers. At another institution, the students themselves established an advising center for helping other students select classes. They have also participated as members of groups for students with behavior problems, serving as role models and friends as well as helping with the treatment process (Osborn, James, & Oetting, 1967).

There is also some evidence that students often turn to other students with their problems, and that they select certain classmates for this kind of help. Those selected might be identified and their actual mental health impact studied. If positive, this may be a major mental health resource that should be carefully nurtured. If not, other means of intervention to prevent the development of growth-inhibiting problems should be considered.

Another important reason for involving many of the more capable and talented students in such helping roles is the possibility that this experience will provide them with high-level developmental tasks that they might not otherwise seek. Through training programs and the experience of helping in a mental health effort, badly needed graduates for the helping professions may be recruited.

The importance of student involvement cannot be overemphasized. The National and Regional Student Stress Conferences have shown problems that students feel in considering the relevance of the academic environment to their own perceived needs, and the communication barriers that they feel exist between generations. Any program that does not include active involvement of students would be only a partial and incomplete approach to campus mental health intervention.

Developmental Counseling

University students are in a developmental period in which physiological, emotional, and intellectual maturation all create considerable stress. The university compounds this stress through the challenges of both academic and social learning. It provides its students with the opportunity for both intellectual and personal development. But when the student cannot cope with the change, or when the pressure on him is more than he can bear, the academic community offers little help. The center works with the university and with the student to help the student cope with stress and maximize his ability to use to the fullest extent the opportunity that the university offers him for personal growth.

The center attempts to deal with varying degrees of student stress by four primary modes of operation: (a) primary prevention; (b) developmental intervention; (c) transitional support; and (d) crisis intervention. All these functions overlap in the center's different programs, but considering each separately helps to give focus to the specific program and to clarify its goals.

PRIMARY PREVENTION

The most desirable mode of operation for a counseling center (and the one usually ignored) is primary prevention—the elimination of conditions that create problems. The consultation and community mental health approach recommended for counseling centers represents a direct attempt to involve counseling staff more fully in primary prevention activities. Within this concept, the staff seeks to develop the campus as a total community that is interested and involved in both education and mental health.

To create change, the university must create realistic stress; the process of change itself produces stress throughout the entire school. One major goal of a counseling center should be to plan programs to provide students with skills, knowledge, and insights regarding the educational process that enables them to approach and solve problems as they occur. This counseling and consultation approach, based on creating the ability to solve problems rather than on actually solving problems, will enable persons to handle stress in the most useful manner.

Although the counseling center staff should be responsible for developing programs and consultation procedures with faculty and administration in order to minimize stress, it is clear that part of the human growth experience is the ability to live with stress and change. Therefore, the counseling center staff may occasionally find themselves in the crucial role of helping create and build stress into the college and university systems. Functioning in this manner, the counseling center staff should become a highly important change agent for university development.

DEVELOPMENTAL INTERVENTION

The college student is involved in a series of developmental tasks, activities that teach him new skills and behaviors and prepare him for active involvement in both his vocation and community and world affairs. Some of these developmental tasks are explicitly planned and provided for by the academic program. Others are implicit in the university environment and in the social and intellectual interactions of students...
themselves. Many students can use these tasks for growth; others fail to do so because their previous developmental pattern has been inadequate and they are not capable of undertaking the new tasks, or their early failures in attempting new tasks have been so punishing that they become unable to attempt them again. The counseling center should plan programs and resources for developmental intervention, helping the student with retarded development by providing an opportunity for him to catch up on unlearned skills so that he can participate in the college environment. Where previous failure has led to a pattern of avoidance, the center should plan experiences that provide reinforcement for positive behavior, allowing him to participate once again in the ongoing growth process.

Developmental intervention would include functions that in the past have been served by psychotherapy, relationship counseling, and vocational-educational counseling. These are all legitimate mental health programs, but their traditional use proved them too expensive in terms of staff time and frequently ineffective because the mental health goals of the activities are not clear. The counseling service should be concerned with creating innovative programs to intervene in the development of the student, and providing developmental tasks where necessary to improve his functioning or to remedy deficiencies. It should focus particularly on group programs where staff time per student is reduced, and on new techniques for improving the effectiveness and shortening the time span of individual treatment.

TRANSITIONAL SUPPORT

In learning to cope with new values and new attitudes and in learning new behavior patterns, stress may increase to the point where it interferes with learning. At this stage, the student needs help in reducing stress so that he can continue to grow and learn. When long-term stress begins to interfere with the student's ability to function adequately, the center provides resources for helping him talk through his problems and is responsible for creating an atmosphere that reduces anxiety, both in the center itself and in his living areas. It aids the student in gaining insight into his problems and helps him discover new ways to deal with them. The college student involved in the stresses of change is usually capable of benefiting from the developmental experiences in his environment. There may be times, however, when stress builds to the point where it temporarily interferes with adequate functioning. This may be particularly true of those students who have had problems and who have been involved in some form of remedial or developmental treatment.

The counseling center should be concerned with planning and implementing programs of transitional support that will provide means for reducing stress and returning the student to a state where he can continue to function adequately. These programs differ from developmental intervention programs in assuming that the student is basically capable of adapting, does not need change, but can benefit from temporary support. By offering such support at critical instances, deeper problems can be prevented and the student can continue to profit from the learning situation in college. By preventing problems that require longer terms of treatment, and by using faculty, students, and other resources for this kind of program, transitional support offers a means of improving service with minimal involvement of professional staff. Such programs might be organized on an informal basis, for example, by using students seen by other students as sources of assistance for transitional support, or by developing the requisite skills in residence hall advisers. Other opportunities for special programs (for instance, in the religious houses on campus) should be explored.

CRISIS INTERVENTION

High levels of stress over a long period of time do not lead to an increased ability to tolerate stress; on the contrary, they lead to a decreased ability to tolerate a sudden shock or sudden increased tension. When the student who is already under stress suddenly encounters a situation that he cannot handle, a severe emotional disturbance may be precipitated. Suicide attempts, psychotic reactions, or other maladaptive behavior may occur. The counseling center should plan programs for students and faculty that help them identify students who are reacting to crises. Upon contact with these students, the center actively intervenes in the situation, protecting, supporting, helping reduce anxiety, and showing them ways to overcome difficulty. Programs should be developed to help the student make use of all of the university's resources as well as his total environment. Crisis intervention is of critical importance, protecting both the student and the university. It is not aimed primarily at treatment or prevention of recurrence, but it provides support for the student when it is most needed as well as providing a chance for later developmental intervention.

Evaluation

There are several different forms of research and evaluation that should be an integral part of a fully functioning counseling service. The service should first be concerned with continuing the study of the characteristics of students and their problems. This research is basic to planning future programs. Second, the center should be involved in constant research to evaluate its own programs and their effectiveness. The results of such research form the basic feedback that is
essential to maintaining a high level of performance, to demonstrating the outcome of new programs, and to planning specific new programs based on past results. Finally, the counseling service should be engaged in basic research into the theory and practice of counseling, with particular emphasis on relevant developmental tasks in higher education.

Smith and Hobbs (1966) indicate that a community mental health center should invest between 5 and 10 percent of its budget in research. A guideline such as this would also be reasonable for a counseling service. They also point out, however, that the large center in association with a university carries more than its share of responsibility for innovative research. This same principle would apply in the counseling service. While the smaller institution should definitely study its own effectiveness, the larger university must carry much of the burden of theoretical research.

In the larger center, special responsibility for maintaining research probably should be assigned to individuals who have abilities and interests in instrumentation, experimental design, and evaluation. One possibility is the formation of an evaluation team as a part of the center’s operations. The evaluation team would use the consultation model in working with the center’s staff to evaluate ongoing and new activities. It would be a primary feedback mechanism so that they could continue and amplify programs that were effective and modify or eliminate programs that are ineffective.

Through the consultation model, the counseling staff retains responsibility for evaluation themselves. Evaluation is not imposed from without, but is a part of the program itself. Staff members themselves should also be responsible for eventual publication, again with the consultation of the evaluation team so that they feel the evaluation effort is to their direct professional benefit. Where an evaluation effort of this type has been an integral part of the program, the following steps have been used effectively in new program planning.

1. The program or activity is planned by a staff member. The staff member suggests the program to the director of the center.

2. If the idea has promise and fits into the present goals of the center, the staff member prepares a detailed outline of the program with particular emphasis on the aims and goals.

3. The evaluation team studies the proposal, meeting with the staff member for any necessary clarification, and prepares an evaluation plan that includes any necessary tests or instrumentation.

4. The director, staff member, and evaluation team meet to determine final disposal of the idea, including suitability of the design and instrumentation.

5. The evaluation team assists the staff member with data collection, statistical analysis, and interpretation of results.

6. The staff member prepares a final report, either as an internal technical report or for publication. Co-authorship of one or more members of the evaluation team would depend on whether their contribution was significant. The APA guidelines are reasonably clear on this point.

Instituting an evaluation team of this type in one community mental health center led to significant changes in publication rate. During the two years immediately preceding, no publications had been produced by the center. In the next two years, 13 reports on various programs were prepared for local dissemination and 7 journal articles were published.

Evaluation of applied programs is exceptionally difficult. Random assignment of conditions is usually impossible; control or comparison groups are either unavailable or disappear on follow-up. Numbers are almost invariably small, and the effects of many programs tend to lead to either reducing or increasing variability between subjects, rather than leading to similar changes over all subjects. Statistical tests become almost impossible to apply under these conditions. Despite these problems, it is possible to obtain information about program effectiveness, and any information treated cautiously is better than not attempting evaluation at all. For example, Hurst and Weigel’s (1968) Counseling Services Assessment Blank, reproduced in Appendix D, may provide useful information on clients’ perceptions of the effectiveness of the various services they received at the counseling center.

The concept of evaluation as an internal part of center operation should be used more generally. In the first place, it puts evaluation where it belongs: within the center program where it can provide rapid and effective feedback. It is this rapid feedback of information that maintains a process of positive change and discourages rigid and unimaginative programming. Secondly, evaluation planning of this type occurs both before and as the program operates, and data that must be collected are collected. Frequently an external evaluation comes in too late to gather base-rate information or to find out what it needs to know to determine effectiveness. Thirdly, evaluation of this kind is highly valuable in terms of eventual dissemination and utilization of findings. The project reports include not only a complete description of what was done, but recommendations as to what modifications and changes should be made and tested next.

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1 Mental Health in Sparsely Populated Areas, Final Report, Southeast Wyoming Mental Health Project, Cheyenne, Wyoming (NIMH).
This kind of report is of immediate value in transmitting ideas to other agencies and frequently leads to formal publication. Finally and perhaps most important, where almost every activity of the center is being evaluated, and where planning for a new program or activity automatically includes evaluation planning, a general attitude of inquiry begins to develop. It is much more difficult for the staff of a center to slide into stereotyped roles without questioning their effectiveness.

Programming the Future

If any of these changes are to take place in future counseling services, it is clear that a new kind of staff member must also be created. Instead of therapists or guidance counselors, the new programs will require a fully functioning human development consultant. This individual will have to have most or all of the old skills but will also need to be capable in many new areas. He must, first of all, approach everything he does with a spirit of inquiry. He does not have to do formal research, but he must be willing to: (a) test what he is doing; (b) think about what else might be done; and (c) try out new ideas. Too many of our counselors are only willing to assume a particular counseling role and play it without evaluating its effectiveness or whether it meets the real needs of the situation.

The human development consultant is also going to need new kinds of information. He must know the kinds of developmental patterns that students in his institution tend to have as well as the kinds of problems that interfere. He must have a feel for the various social environments on and around campus, the demands they make and the developmental tasks they provide, as well as information about the requirements and benefits of college courses. This consultant must have a good grasp of the development of career patterns, the kinds of future demands they will make of the individual, and the kinds of developmental tasks necessary in the college years if these later demands are to be met.

He will also need to have available, or be able to create, new kinds of developmental tasks. These tasks should provide remedial experiences for those unable to use the college experience because of previous developmental inadequacies, or they should provide new experiences necessary for the individual's full growth and development.

The counseling center can play an important and central role in the evolution of the university of tomorrow. It cannot do this by isolating itself and providing limited service to limited numbers of students. It must become an integral part of the university environment, intervening effectively to help the university provide the full range of developmental tasks necessary for true higher education. In addition, it must make sure that the student is able to use those tasks for personal growth and development.
Bibliography


APPENDIX A

First Questionnaire

LETTER TO THE PRESIDENT OF THE UNIVERSITY

Dear [Name],

We are attempting to bring up to date the Directory of College Counseling Administrators and would appreciate your aid in answering the following questions:

1. Do you utilize a formal counseling service at your institution? [Name, Title, Address]

2. If there is no formal counseling service, do you possess any resource for students requiring vocational testing, aid in choosing a major, or other academic counseling needs? [Name, Title, Address]

3. Do you also refer problems of a personal, emotional nature to the above named individual? [Name, Title, Address]

According to the Bluebook of American Colleges and Universities, your total enrollment is listed between [Numbers]. Is this a correct estimate? If not, would you please state the correct total full-time enrollment?

Thank you for your cooperation in this matter.

Sincerely,
APPENDIX B

Second Questionnaire

Administrative Functioning on the Campus.

Please diagram the direct line of authority for the director of the counseling service.

Example:

President
Vice President, Student Affairs
Dean of Students
Director of Counseling

Counseling Center
Office of Loans

Has this administrative structure led to any particular problems for the Counseling Center? —yes—no.
(If yes, please comment on a separate page.)

Following is a check list of personnel and counseling functions. Please check those that are part of your responsibility as a counseling center.

- Counseling for study problems.
- Counseling for choice of major field.
- Counseling for personal problems.
- Short term counseling of severe emotional problems.
- Long term counseling of severe emotional problems.
- Group counseling
- Disciplinary counseling
- Diagnosis for other schools or agencies.
- Remedial reading
- Tutoring in academic subject areas
- Pre-college counseling
- Summer orientation program
- Counseling the faculty re. student problems
- Counseling the faculty re. personal problems
- Counseling student’s spouse.
- Student loans
- Student scholarships
- Recruiting students
- Foreign student advising
- Supervising residence hall counselors
- Off campus housing
- Evaluating all admissions
- Evaluating borderline admissions
- Recommend readmission after failure (all cases)
- Recommend readmission after withdrawal for emotional problems (all cases)
- Pastoral or religious counseling
- Advising campus student organizations.
- Evaluate all disciplinary cases.
- Evaluate referred disciplinary cases.
- Responsibility for fraternities.
- Counseling all students on academic probation.
- Freshman testing.
- Machine test scoring for academic departments.
- Studies of student characteristics within your institution.
- Research on academic achievement
  # publications in 1964
- Research on counseling
  # publications in 1964
- Research consultant to other departments.
- Supervise practicum students from psychology
- Supervise practicum students from education
- Dean of women’s office
- Dean of men’s office

Other important functions: please list:

__________________________________________

__________________________________________

__________________________________________

If you would like a directory of counseling service administrators in the U.S., please check here. ☐
I. Counselor/Student Ratio

1. What is the full time student enrollment? __________

2. How many full time equivalent counselors are there on your staff? __________

3. If the ratio of these two numbers does not give a fair estimate of the counselor/student ratio on your campus, would you make such an estimate and explain on the back of this page? Counselor/Student ratio __________

4. Does your institution have a Student Health Service or Medical Service? yes ___ no ___

5. Does your institution employ or retain a psychiatrist? yes ___ no ___

II. Case load

1. What proportion of the students on your campus are seen by a counselor at some time during their academic career? __________ %

2. Is this figure an estimate, or the result of a study? estimate _____ study _____

3. How many client interviews, per week, does a full time counselor handle? (approximate average during the academic year) __________ interviews/week.

4. How long is the typical scheduled interview? __________ minutes

5. If graduate assistants are used as counselors, how many client interviews, per/week, does a half time graduate assistant handle? __________ interviews/week

6. What is the average number of interviews for a client at your center? __________ interviews

7. Is this figure an estimate or the result of a study? estimate _____ study _____

8. Do you have a policy that limits the number of interviews that staff members may have with a client? yes ___ no ___

9. What proportion of your time do you, as director, spend in each of the following activities?

- __________% counseling (seeing clients, writing notes, etc.)
- __________% teaching (formal classes)
- __________% staff meetings
- __________% committee meetings
- __________% supervising students
- __________% research
- __________% administration of the counseling service

If you have other major time commitments, please list them on a separate page.

10. As director, how many client interviews do you average per week? __________ interviews per week.

11. If you view your time breakdown or case load as a problem, please comment on a separate page.
APPENDIX C

REGIONAL ASSIGNMENT OF STATES

NOTE: Rather than adhering to the traditional geographic breakdown, adjacent states that were deemed similar in educational character were grouped together.


CENTRAL: Iowa, Missouri, Kansas, Nebraska, and Colorado.


WEST COAST: Washington, Oregon, California, and Hawaii.

SOUTHWEST: Arizona, New Mexico, Oklahoma, and Texas.

SOUTH: Arkansas, Louisiana, Mississippi, Alabama, Georgia, and South Carolina.

APPENDIX D

COUNSELING SERVICES ASSESSMENT BLANK

Please answer all the following questions in terms of both the individual and group counseling you received. Then return the questionnaire in the envelope provided.

Name ____________________________________________ Student Number

☐ 1. Age______

☐ 2. Sex______

☐ 3. Marital Status: Single____ Married____ Divorced____ Separated____ Widowed____

☐ 4. Class: Fresh____ Soph____ Junior____ Senior____ Grad____ Other (Specify)____________________

☐ 5. Academic Major: ________________________________________________________________

☐ 6. How many counseling sessions did you attend

a. individual sessions __________________________ b. group sessions ________________________

☐ 7. For what reason(s) did you come to counseling? Would you please rank the reasons that apply in order of their importance to you (i.e. "1", "2", "3", and "4").

☐ A vocational concern (career choice or planning for the future).

☐ A personal concern (adjustments concerning behaviors, attitudes and feelings).

☐ An educational concern (lack of academic skill or information, e.g. reading, study skills, university requirements and procedures, etc.)

☐ 8. The reasons may have arisen from a variety of causes. Please rank which causes you feel were applicable in order of their importance to you (i.e. "1", "2", "3", and "4").

☐ Lack of information about yourself (e.g. your abilities, behaviors, interests, personality, etc.)

☐ Lack of information about your environment (e.g. information about education, occupations, other individuals or situations.)

☐ Conflict within yourself (e.g. your feelings, goals, interests, or behaviors that are incompatible with each other.)

☐ Conflict with others (e.g. your feelings, goals, interests, or behaviors that are incompatible with those of people who are most important to you.)

☐ Lack of skill (e.g. difficulty in reading, study, work, social situations, etc.)

Below we would like you to rank different aspects of your counseling by placing a mark in one of the areas on each scale that most nearly describes your reaction to the question. Answer all questions in terms of both the group and individual counseling YOU received.

☐ 9. I was able to gain information about myself (e.g. my abilities, behaviors, interests, personality, etc.)

☐ 10. I was able to gain needed information about the environment (e.g. information about education, occupations, other individuals or situations, etc.)

☐ 11. I was able to resolve conflict within myself (e.g. my feelings, goals, interests, or behaviors that were incompatible with each other.)

☐ 12. I was able to resolve conflict with others (e.g. my feelings, goals, interests or behaviors that were incompatible with those of people who are most important to me.)

☐ 13. I was able to remedy my lack of skill (e.g. difficulty in reading, study, work, social situations, etc.)

Not at all | Very much | Not applicable to me

☐ ☐ ☐

☐ ☐ ☐

☐ ☐ ☐

☐ ☐ ☐

☐ ☐ ☐
Answer all questions in terms of the individual or group counseling YOU received.

14. I found the tests I took in the Center to be
   Of no help at all   Very helpful
   Blabbed all over campus   Strictly confidential

15. I felt that the information I disclosed to my counselor(s) would be
   Extremely negative   Extremely positive

16. I felt that the information I disclosed in the group would be

17. How would you rate your overall INDIVIDUAL counseling experience
   Of no help at all   Very helpful

18. How would you rate your overall GROUP counseling experience

19. I found my INDIVIDUAL counselor(s) to be
   Detrimental to counseling   Conducive to counseling
   Weakness and inadequacy   Strength and adequacy

20. I found my GROUP counselor(s) to be

21. I found the other group members to be

22. I felt the physical facilities of the counseling operation were:

23. I saw my coming for counseling as demonstrating
   Extremely negative   Extremely positive

24. How would you rate your total overall counseling experience?

25. Which of the following concerns do YOU see the counseling operation on this campus emphasizing (that is, what kinds of concerns are dealt with primarily). Please rank the ones you feel are applicable (i.e. "1", "2", "3").
   
   Vocational (career choice or planning for the future).
   
   Personal (adjustments concerning behaviors, attitudes and feelings).
   
   Educational (lack of academic skill or information, e.g. reading, study skills, university requirements and procedures, etc.)

26. What other service or office on this campus do you feel is most similar to the counseling operation.

27. Is there anything else you would like to tell us?