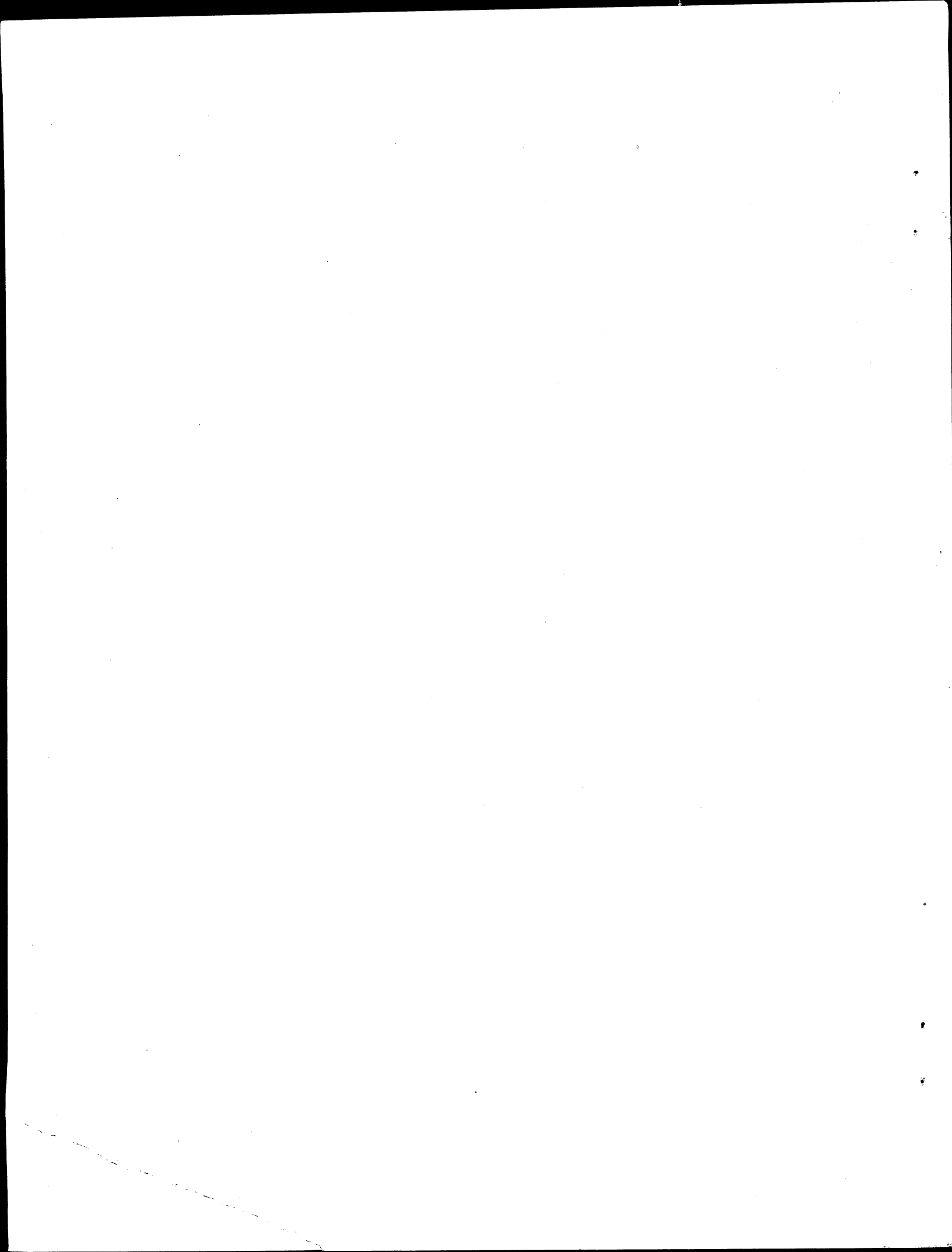


COUNSELING CENTER SURVEY
AND DIRECTORY
1987





University of Pittsburgh

DIVISION OF STUDENT AFFAIRS
Counseling and Student Development Center

October 9, 1987

Dear Colleague:

The report on the survey of Counseling Center Directors by the Urban Counseling Task Force is enclosed. The usual format is followed:

1. Survey highlights
2. Summary of data broken down by urban and non-urban and large and small institutions
3. A directory alphabetized by director and by institution

I hope you find the survey data helpful and encourage you to return the enclosed evaluation form.

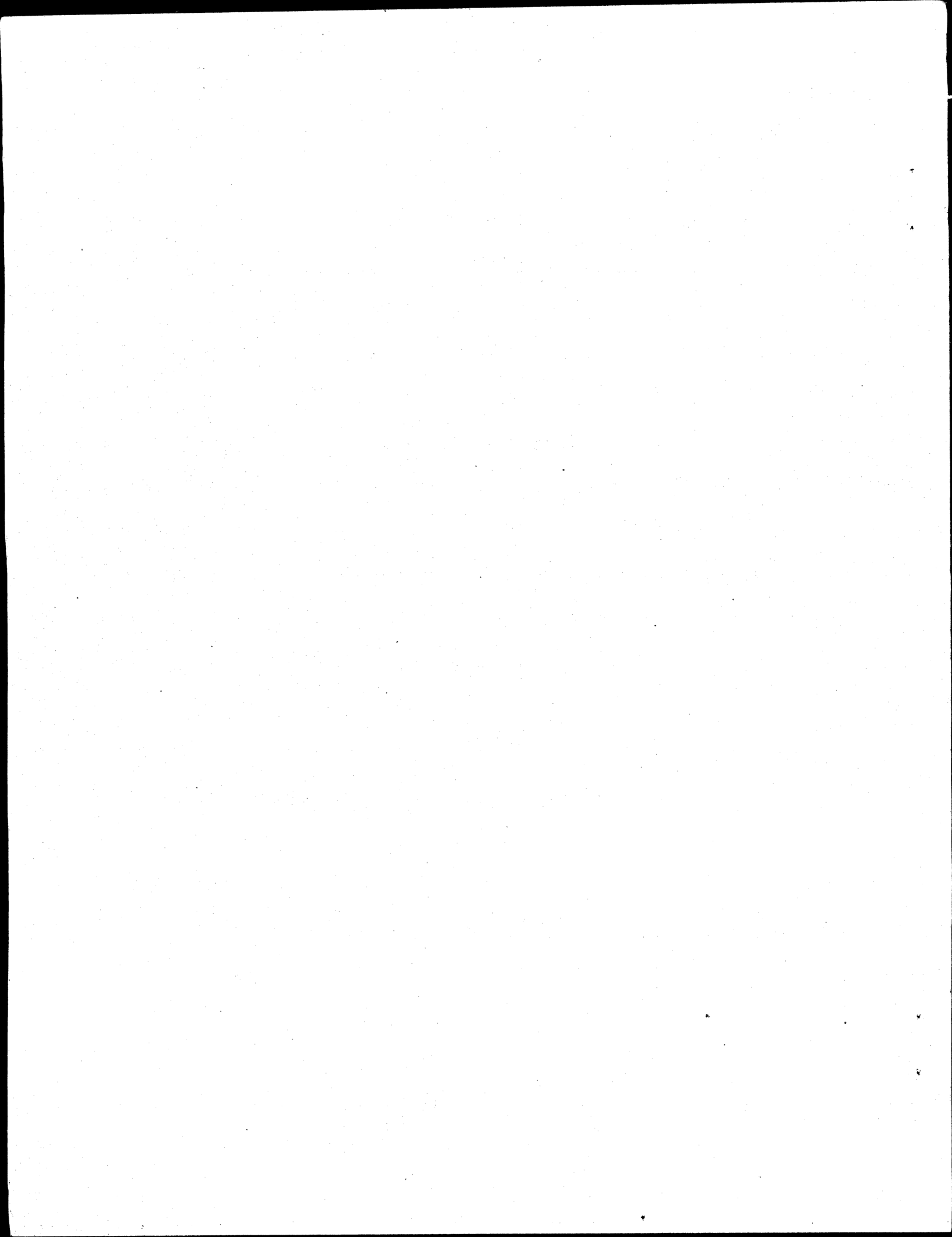
Sincerely,

A handwritten signature in cursive script, appearing to read "Bob".

Robert P. Gallagher, Director
University Counseling and Student Development
Center

RPG/rmr

P.S. I did not collect enough humorous stories last year to put them together in any way but any new contributions would be appreciated. The request for stories can again be found on the back of the evaluation sheet.



Evaluation

1987 Counseling Center Survey

Please rate the following as to their value to you:

	Very Desirable			Not at all Desirable	
1. The Survey Highlights	5	4	3	2	1
2. The Summary Data	5	4	3	2	1
3. The Counseling Center Directory	5	4	3	2	1
4. Comments:					

5. Suggestions for future Surveys:

Please respond on the reverse side if you have a humorous story.

Return Evaluation form to:

Robert P. Gallagher
University of Pittsburgh
334 William Pitt Union
Pittsburgh, PA 15260



University of Pittsburgh

OFFICE OF STUDENT AFFAIRS
Counseling and Student Development Center

Dear Colleague:

I would like to put together a collection of stories from counselors and other student personnel workers for our mutual enjoyment. If something has happened to you, or a colleague, that gave you a good belly laugh, or if you have a good "Murphy's Law" story, a humbling or inspirational experience, or perhaps just your favorite joke, would you send it to me on this or another sheet.

Please let me know whether you would like to be quoted, or have the story reported anonymously. Also if necessary, please disguise your story adequately so that if published it could not possibly cause embarrassment to anyone.

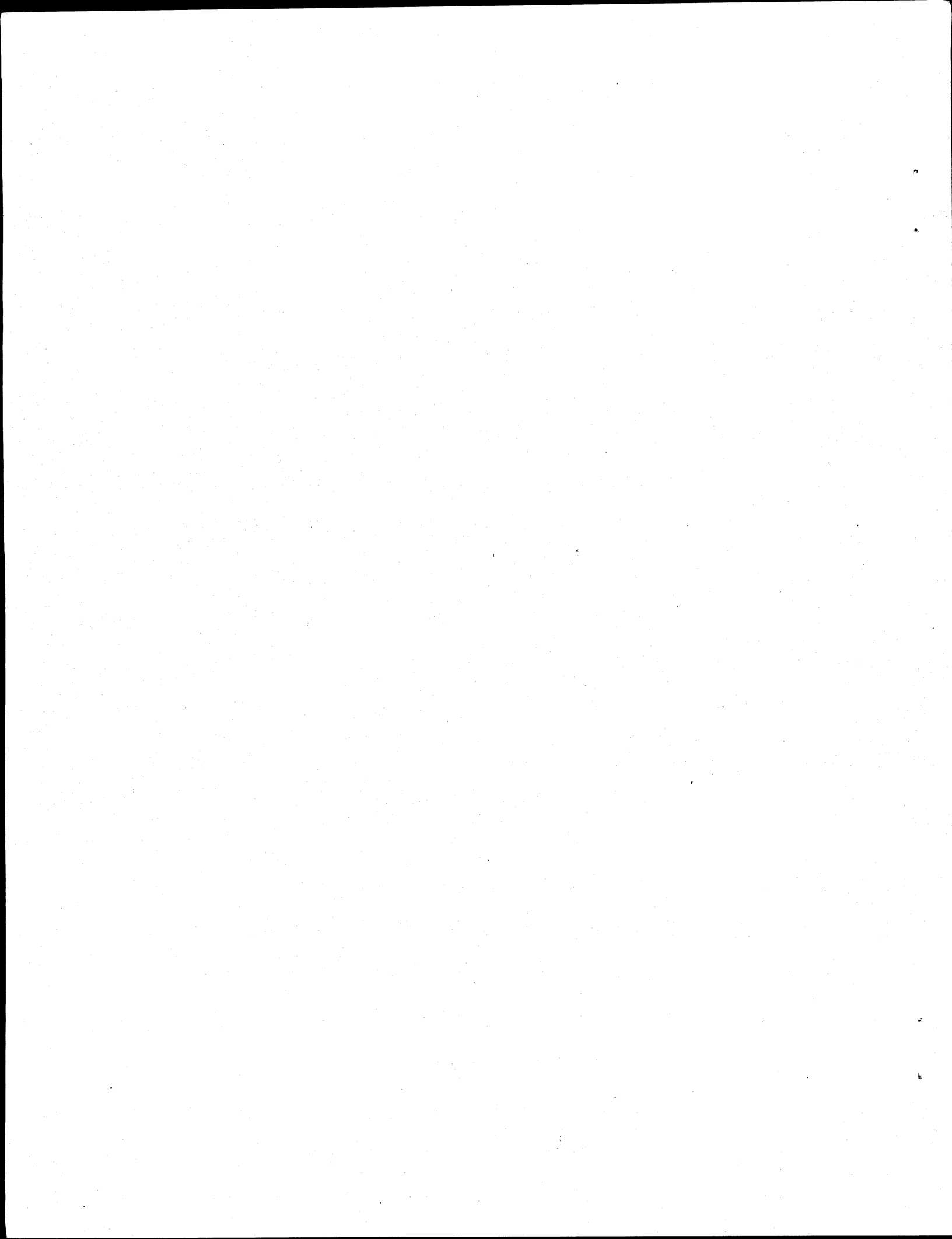
Thanks for humoring me.

Bob Gallagher

Please return to: Robert P. Gallagher, University of Pittsburgh,
334 William Pitt Union, Pittsburgh, PA 15260

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URBAN/NON URBAN COUNSELING CENTER
SURVEY HIGHLIGHTS, 1987
N-246

Considering the combined urban, non-urban data it was noted that:

- 17 centers (7%) charge students for counseling services, (up 5% from 1986). An increasing number also charge faculty (11%), alumni (14%), and the community (19%). Centers collecting 3rd party payments also increased to 11%. Data on centers that charge for other services are also included. (Items 1-3)
- for the 5th year in a row centers report substantially more gains than losses in staff positions. More than twice as many centers report gains (131) in new positions than those reporting losses (52). (Item's 4 & 5)
- 48% of centers now have on-line computers and 83% have microcomputers. (up 6% and 12% from last year) Information on how the computers are utilized is provided. (Items 6 & 8)
- 18 mergers of counseling centers with mental health units of student health services were reported. 13 clinics merged under counseling centers, 3 under health services, and 2 did not report direction. (Item 11)
- In the past 2 years 23 counseling centers (10%) have lost responsibility for career counseling while only 10 centers (4%) have gained such responsibility. This is a shift from 1985's data which showed a greater tendency towards movement of career counseling into the counseling center. (Item 14)
- Special training programs for staff in past year have focused primarily on alcohol problems (75%), eating disorders (73%), other drug problems (57%) and legal issues (56%). (Item 15)
- 166 centers have encountered clients in past year who inflict pain on themselves in order to reduce anxiety; and 25% of these centers see this problem as increasing in recent years. (Items 19 & 20)
- 79% had to hospitalize a student for psychological reasons (up 15% from 1986), 71% had to notify a 3rd party about a potentially suicidal student (up 19%), and 28% gave Tarasoff type warnings when a 3rd party was at risk (up 11%). (Items 21-23)
- 17% of centers were served with subpoenas and approximately 75% complied. Examples provided. (Items 27 & 28)
- 6 centers reported suits filed against them in past year, and 15 centers reported past suits. No finding to date has been against a center, but 4 cases were settled out of court and 3 are pending. (Item 29-31)
- 17% of directors had to confront a counselor or intern in the past year because of unethical practices and 4% had to terminate a counselor or intern because of such practices. Examples provided. (Items 33-35)

Over

- There were 50 centers where students sought counseling because of sexual exploitation or harassment by another therapist; 165 centers reported multiple cases of such harassment by faculty or supervisors, and 157 centers reported an average of 7 complaints each against other students. (Item 37)
- 92% of directors believe that most counselors on occasion become sexually attracted to a client. 95% of directors report that counselors rarely or never discuss this sexual attraction in case staffing, and 86% state that it is rarely or never discussed in supervisory sessions. A number of directors wrote in that this is a neglected topic of discussion in training programs. (Items 39-42)
- Training directors in counseling centers are sometimes rewarded for assuming this responsibility through increased salary (23%), additional travel money (36%), and released time (44%). (Item 44)
- 16% of counseling centers have hired a new center director in the past year, at an average beginning salary of \$39,200.
- 126 centers (51%) hired 156 new counselors in the past year. Experienced Ph.D.'s averaged \$27,500 at the time of hire, while new doctorates averaged \$25,400. (Other salaries are reported and breakdowns by sex and race are included. (Items 45-47)
- 28% have written criteria defining learning disability. A listing of these centers is provided. (Items 49 & 61)
- 31 centers have APA approved training programs and these centers report the least difficulty in filling available intern slots. (Items 51 & 52)
- 43 centers belong to the Association of Psychology Internship Centers (APIC) and 67% of these are satisfied with the new guidelines for selecting interns. A listing of the comments of those who are not satisfied is provided. (Item 54) One thoughtful response to the question "what's APIC" was, "a tool for breaking up hard ground."
- 85% of centers provide counseling services for faculty and staff. About half of these feel that such services strengthen the political position of counseling centers on campus, help to create a healthier campus environment, and encourage more student referrals. (Item 55)
- Examples of how centers increase faculty awareness of center, of innovative programs in the residence halls, and of ethical dilemma's faced by directors in past year are also included. (Items 57, 58, & 59)

SUMMARY DATA: URBAN VS NON-URBAN; LARGE VS SMALL
Raw Data Reported Outside Brackets (Adjusted Frequency inside)

	URBAN N=149	NON-URBAN N=91	LARGE N=116	SMALL N=116	TOTAL N=246*	COMMENTS
						*centers did not respond to all items so percentage discrepancies will be noted
1. Centers that charge a fee for counseling to:						mean charge for students is \$13.00, faculty \$35.00, alumni \$39.00, community \$45.00. Note: There is about a 5% increase in # of centers charging across all categories
a. students	13 (9%)	4 (4%)	13 (11%)	4 (3%)	17 (7%)	
b. faculty/staff	14 (11%)	10 (13%)	16 (17%)	8 (8%)	24 (11%)	
c. alumni	18 (16%)	7 (10%)	14 (18%)	11 (12%)	25 (14%)	
d. community	25 (27%)	8 (14%)	17 (19%)	16 (22%)	33 (19%)	
2. Centers that collect 3rd party payments	13 (8%)	8 (14%)	15 (16%)	6 (7%)	21 (11%)	up 6% since 1985
3. Centers that charge for the following services:						Mean Fee
a. structured groups	15 (10%)	5 (6%)	15 (13%)	5 (4%)	20 (8%)	\$ 8.00
b. interest tests	56 (40%)	33 (37%)	49 (45%)	40 (35%)	89 (38%)	5.00
c. personality tests	24 (18%)	24 (27%)	26 (24%)	22 (20%)	48 (21%)	7.00
d. use of SIGI or other computerized counseling system	9 (8%)	6 (8%)	10 (11%)	5 (5%)	15 (8%)	8.00
e. consulting on-campus	13 (9%)	1 (1%)	9 (8%)	5 (4%)	14 (6%)	50.00
f. consulting off-campus	27 (22%)	27 (35%)	23 (24%)	31 (31%)	54 (26%)	125.00
g. workshops-campus groups	13 (9%)	5 (6%)	10 (9%)	8 (10%)	18 (8%)	60.00
h. workshops non-campus groups	41 (34%)	27 (36%)	27 (29%)	41 (42%)	68 (34%)	150.00
i. psychological assessment-police, industry, campus applicants, etc.	33 (30%)	23 (33%)	30 (32%)	26 (33%)	56 (30%)	80.00
j. written materials	10 (8%)	10 (12%)	8 (8%)	12 (11%)	20 (9%)	5.00
k. learning skills	10 (8%)	8 (10%)	11 (11%)	7 (7%)	18 (8%)	50.00/workshop
4. Centers that gained staff positions in past year:						For the 5th year in a row counseling centers have gained more positions than they lost in every category
a. professional	33 (23%)	23 (26%)	28 (25%)	28 (25%)	56 (24%)	
b. clerical	18 (13%)	7 (8%)	13 (12%)	12 (11%)	25 (11%)	
c. grad asst. or 1/2 time intern	18 (13%)	14 (17%)	13 (12%)	19 (17%)	32 (14%)	
d. full time intern	13 (10%)	5 (6%)	13 (13%)	5 (5%)	18 (8%)	
5. Centers that lost staff positions in past year:						
a. professional	10 (7%)	17 (19%)	12 (11%)	15 (13%)	27 (11%)	
b. clerical	4 (3%)	2 (2%)	3 (3%)	3 (3%)	6 (3%)	
c. grad asst. or 1/2 time intern	8 (6%)	6 (7%)	5 (5%)	9 (8%)	14 (6%)	
d. full time intern	2 (1%)	3 (4%)	3 (3%)	2 (2%)	5 (2%)	
6. Centers that have an						On line computers up 6% from last year. Personal computers up 12%
a. on-line computer	63 (47%)	47 (55%)	57 (55%)	53 (48%)	110 (48%)	
b. microcomputer	129 (87%)	72 (82%)	103 (90%)	98 (86%)	201 (83%)	
7. Counselors have own personal computers:						
a. yes, all	2 (1%)	3 (3%)	1 (1%)	4 (3%)	5 (2%)	
b. yes, some	40 (27%)	35 (39%)	40 (35%)	35 (30%)	75 (31%)	
c. no	106 (72%)	58 (64%)	74 (64%)	90 (78%)	164 (67%)	
8. Centers which use their computer for:						center also use computers for test scoring (13), research projects (4), biofeedback (1), interactive test administration (2), and to tie into students transcripts (1)
a. word processing	128 (93%)	75 (95%)	105 (95%)	95 (93%)	209 (94%)	
b. center statistics	111 (80%)	64 (81%)	92 (83%)	83 (81%)	175 (78%)	
c. maintaining client files	32 (23%)	27 (34%)	28 (25%)	31 (30%)	59 (26%)	
d. career counseling (SIGI etc.)	62 (45%)	42 (53%)	52 (47%)	52 (51%)	104 (47%)	
e. center budget	47 (34%)	24 (30%)	39 (35%)	32 (31%)	71 (32%)	
f. stress reduction training	7 (5%)	6 (8%)	7 (6%)	6 (6%)	13 (6%)	
g. self help personal counseling	9 (7%)	7 (9%)	8 (7%)	8 (8%)	16 (7%)	
h. aid to diagnosis	13 (9%)	11 (14%)	8 (7%)	16 (16%)	24 (11%)	
i. skills training	11 (8%)	4 (5%)	9 (8%)	6 (6%)	15 (7%)	
j. health education	17 (12%)	7 (9%)	8 (7%)	6 (6%)	14 (6%)	

	URBAN	NON-URBAN	LARGE	SMALL	TOTAL	COMMENTS
9. Relationship between Student Health Service and C.C.						
a. Admin. separate-both provide pers. couns.	35 (25%)	19 (22%)	40 (36%)	14 (13%)	54 (23%)	
b. Admin. separate-SHS prov. all pers. couns.	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	
c. Admin. sep. CC provides all pers. couns.	84 (60%)	54 (74%)	55 (50%)	93 (85%)	148 (63%)	
d. Admin. sep.-CC provide pers. couns. but part. subsidized by SHS	4 (3%)	5 (6%)	4 (4%)	5 (5%)	9 (4%)	
e. CC director resp. for SHS	16 (11%)	5 (6%)	9 (8%)	12 (11%)	21 (9%)	
f. CC reports to SHS director	7 (5%)	4 (5%)	8 (7%)	3 (3%)	11 (5%)	
10. Merger of CC and SHS mental health units in past 2 years	13 (9%)	5 (6%)	9 (8%)	9 (8%)	18 (7%)	
11. Direction of CC-SHS merger:						
a. CC under SHS	2 (17%)	1 (25%)	2 (25%)	1 (14%)	3 (19%)	
b. SHS counseling under CC	10 (83%)	3 (75%)	6 (75%)	6 (86%)	13 (81%)	
12. Career Counseling is offered:						
a. primarily in CC	65 (44%)	32 (35%)	52 (45%)	45 (39%)	97 (40%)	
b. primarily in a sep. career devel. or placement program	54 (37%)	37 (41%)	39 (34%)	52 (46%)	91 (37%)	
c. shared equally between a. and b.	30 (21%)	28 (31%)	26 (23%)	32 (28%)	58 (24%)	
13. In centers that offer career counseling, it is:						
a. integrated with personal counseling	76 (63%)	53 (70%)	58 (62%)	71 (75%)	129 (64%)	
b. provided by career specialist	10 (8%)	7 (9%)	11 (12%)	6 (6%)	17 (9%)	
c. combination of a. and b.	36 (30%)	20 (26%)	28 (30%)	28 (30%)	56 (28%)	
14. In past 2 years career counseling has:						
a. been moved out of CC or move is being considered	15 (11%)	8 (9%)	9 (8%)	14 (12%)	23 (10%)	Counseling centers seem to be losing ground in this area. In 1985 this figure was 9%.
b. been moved into CC or move is being considered	6 (4%)	4 (5%)	2 (2%)	8 (7%)	10 (4%)	In 1985 this figure was 16%.
c. no change	120 (86%)	80 (93%)	96 (90%)	104 (93%)	200 (86%)	
15. In past 2 years staff received special training in:	Reporting Total Data Only					
	Yes	No-but could use	No-not necessary			
a. eating disorders	168 (73%)	46 (20%)	16 (7%)			Staff has also received training in a) therapeutic approaches (cognitive-behavioral, hypnosis, guided imagery, etc.), b) administration (supervision, organizational development, budgeting, time management), c) particular problem areas (AIDS, homophobia, acquaintance rape, suicide, etc.
b. alcohol problems	171 (75%)	46 (20%)	12 (5%)			
c. other drug problems	119 (57%)	66 (32%)	23 (11%)			
d. women's issues	99 (47%)	62 (30%)	49 (23%)			
e. men's issues	33 (17%)	93 (49%)	65 (34%)			
f. minority issues	96 (46%)	73 (35%)	40 (19%)			
g. crisis intervention	90 (43%)	61 (29%)	57 (27%)			
h. legal issues	124 (56%)	74 (33%)	23 (10%)			
i. developmental theory	65 (32%)	83 (41%)	54 (27%)			
j. psycho-pharmacology	73 (36%)	95 (46%)	37 (18%)			
k. time-limited therapy	83 (43%)	84 (43%)	28 (14%)			
16. Center has specialists in the following:						
a. eating disorders	92 (64%)	60 (67%)	82 (71%)	70 (63%)	152 (63%)	
b. alcohol/drug abuse	77 (54%)	50 (56%)	61 (54%)	66 (60%)	127 (54%)	
c. phobic disorders	32 (23%)	15 (17%)	27 (25%)	20 (19%)	47 (20%)	
d. women's issues	79 (56%)	48 (55%)	65 (58%)	62 (57%)	127 (54%)	
e. men's issues	31 (22%)	19 (22%)	26 (24%)	24 (22%)	50 (22%)	
f. gay-lesbian issues	45 (33%)	27 (31%)	45 (41%)	27 (25%)	72 (32%)	
17. Directors that believe it is good idea for each counselor on staff to develop a specialty	119 (82%)	73 (84%)	87 (78%)	105 (93%)	192 (81%)	Most support specialized training but expertise should be shared with rest of staff so that all can improve their skills

18. Prevalence of following problems in center as compared to the previous year:	Reporting Total Data Only			
	Increased	Stayed the same	Decreased	No Cases
a. suicidal behavior	64 (26%)	153 (63%)	24 (10%)	2 (1%)
b. psychotic behavior	53 (22%)	156 (65%)	24 (10%)	8 (3%)
c. victims of rape or other violent crimes	63 (27%)	148 (63%)	9 (4%)	16 (7%)
d. severe depression	75 (31%)	157 (66%)	4 (2%)	3 (1%)
e. severe anxiety reaction	67 (28%)	164 (69%)	5 (2%)	2 (1%)
f. bulimia	57 (24%)	132 (55%)	36 (15%)	13 (5%)
g. anorexia	28 (12%)	134 (56%)	55 (23%)	21 (9%)
h. relationship crises	73 (30%)	166 (69%)	2 (1%)	0 (0%)
i. overall emergency visits	70 (29%)	146 (61%)	22 (9%)	1 (0.002%)

	URBAN	NON-URBAN	LARGE	SMALL	TOTAL	COMMENTS
19. Centers that have encountered clients in past year who inflict pain on themselves as a way of reducing anxiety	101 (69%)	65 (71%)	84 (73%)	82 (71%)	166 (68%)	
20. Problem of self-inflicted pain increasing in recent years	27 (25%)	17 (26%)	21 (24%)	23 (29%)	44 (25%)	
21. Centers that had to hospitalize a student for psychological reason in past year	117 (79%)	79 (89%)	95 (83%)	101 (88%)	196 (81%)	Up 17% from last year. These centers average about 6 hospitalizations a year. Two centers hospitalize between 50 and 70 students a year
22. Centers that had to notify 3rd party about suicidal student during past year	101 (70%)	69 (78%)	83 (74%)	87 (76%)	170 (71%)	Up 19% since last year. Centers average about 3 warnings a year. One school gave 40 such notifications
23. Centers that had to give warning during the year to a 3rd party about student who posed danger to another person	44 (30%)	25 (28%)	37 (32%)	32 (28%)	69 (28%)	Up 11%. Most give 1 or 2 warnings. One school gave about 50
24. Centers that assume the right to deny further treatment if client is not cooperative	125 (88%)	77 (88%)	101 (90%)	101 (92%)	202 (86%)	Centers that have sought legal advice on this are told they may deny services in such cases if there is a written policy on it

	Reporting Total Data Only			
	Counselor Decides	Counselor consults w/ director before acting	Counselor reviews decision in case staffing	Other
25. Actual procedure in center on how decision to deny treatment is made:	67 (31%)	127 (59%)	74 (34%)	22 (10%)
26. Directors preferred procedure for arriving at this decision	20 (9%)	91 (43%)	89 (42%)	15 (7%)

	<u>URBAN</u>	<u>NON-URBAN</u>	<u>LARGE</u>	<u>SMALL</u>	<u>TOTAL</u>	<u>COMMENTS</u>
27. Centers where records or counselors have been subpoenaed in past year:	30 (21%)	12 (13%)	29 (26%)	13 (11%)	42 (17%)	
28. If subpoenaed, did the center comply?						
a. yes	6 (19%)	2 (18%)	5 (18%)	3 (25%)	8 (19%)	
b. yes, but had clients permission	18 (58%)	4 (36%)	13 (46%)	9 (75%)	22 (52%)	
c. yes, but only after court order received	10 (31%)	5 (45%)	12 (41%)	3 (25%)	15 (35%)	
d. no, did not need to comply	7 (23%)	3 (25%)	7 (24%)	3 (25%)	10 (23%)	

EXAMPLES OF SUBPOENAS

- a. All records from past ten years involving rape were subpoenaed in a suit against the university. Names were deleted.
- b. Clients defendants in assault cases (3), divorce proceedings (2), auto accidents (2).
- c. Former client sued restaurant claiming psychological damage following food poisoning. The defense claimed she was emotionally troubled prior to the incident.
- d. Director subpoenaed for testimony in suit against Hare-Krishna organization, with ex-client as plaintiff.
- e. Clients attempted to substantiate damages caused by a firing, a rape by university employee, auto accidents, and assaults.
- f. Coroner's office subpoenaed the records of a client who had committed suicide.
- g. Records subpoenaed as part of a suit against center in a learning disabilities case.
- h. Defense department clearances of clients (3).
- i. Client suing university claiming rape by an employee. Subpoenaed counseling record.
- j. 17 year old that reported sexual abuse by stepfather. Center informed child protection services. Records subpoenaed.

	<u>URBAN</u>	<u>NON-URBAN</u>	<u>LARGE</u>	<u>SMALL</u>	<u>TOTAL</u>	<u>COMMENTS</u>
29. Suits against center in past year:	6 (4%)	0 (0%)	3 (3%)	3 (3%)	6 (2%)	

NATURE OF SUIT

- a. Staff member sued for not being hired as director of a sub-unit.
- b. Suit initiated by intern against professional staff member for sexual harassment. Matter handled through university grievance procedure. Student was satisfied with resolution. Director was informed of charge and resolution. Was not involved in discipline or lack of it.
- c. An age discrimination complaint was filed against the Director.
- d. Sexual misconduct by a counselor.
- e. Learning disabled student sued.
- f. Ex-client sued counselor for alleged indiscretion.

	<u>URBAN</u>	<u>NON-URBAN</u>	<u>LARGE</u>	<u>SMALL</u>	<u>TOTAL</u>	<u>COMMENTS</u>
30. Suit <u>ever</u> filed against center? Yes:	12 (8%)	3 (3%)	8 (7%)	7 (6%)	15 (6%)	See item #60 for examples of these suits
31. Legal costs of suit assumed by school	10 (83%)	3 (100%)	8 (89%)	6 (86%)	14 (88%)	
32. Outcome of suit:						
a. against the center	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	
b. for the center	4 (36%)	2 (66%)	4 (50%)	2 (40%)	6 (46%)	
c. settled out of court	4 (36%)	0 (0%)	2 (25%)	2 (40%)	4 (31%)	
d. not yet decided	3 (27%)	0 (0%)	2 (25%)	1 (20%)	3 (23%)	

	<u>URBAN</u>	<u>NON-URBAN</u>	<u>LARGE</u>	<u>SMALL</u>	<u>TOTAL</u>	<u>COMMENTS</u>
33. Have had to confront counselor in past year about unethical practices:	28 (19%)	14 (16%)	22 (19%)	20 (17%)	42 (17%)	
34. Examples of unethical practices by counselors or interns which led to confrontation:						
a. Clients complained counselor was pushing religion						
b. Counselor handled case of student in crisis poorly. After determining client was possible threat to self, counselor allowed the student to return to dorm room alone. Student disappeared for 2 weeks						
c. Intern attempted to handle case beyond his capabilities.						
d. Counselor engaged in a lesbian relationship with client						
e. Counselor confronted lesbian and gay clients with "sinfulness" of their sexual preference.						
f. Sexual and inappropriate emotional involvement with client						
g. Inappropriate authorship						
h. Counselor notified colleagues of false emergency situations						
i. Intern reported as intoxicated and breaching client confidentiality at party. Source of report investigated and found invalid						
j. Counselor engaged in inappropriate social activities with students						
k. Intern dating client seen by another staff member						
l. Administrators involved in psychotherapy with students but not trained in area						
m. Consultation in regard to a counseling situation could be heard by other clients						
n. Intern breached confidentiality by discussing cases at a social function						

	<u>URBAN</u>	<u>NON-URBAN</u>	<u>LARGE</u>	<u>SMALL</u>	<u>TOTAL</u>	<u>COMMENTS</u>
35. Directors who have fired a counselor or intern because of unethical practices in the past year.	7 (5%)	2 (2%)	4 (3%)	5 (4%)	9 (4%)	

	<u>URBAN</u>	<u>NON-URBAN</u>	<u>LARGE</u>	<u>SMALL</u>	<u>TOTAL</u>	<u>COMMENTS</u>
36. Examples of unethical practices by counselors or interns which led to termination						
a. Practicum student had not taken the prerequisite courses						
b. An adjunct counselor attempted to solicit student clients for his private practice						
c. Student reported counselor was sexually inappropriate. Counselor warned and placed on probation, but behavior continued.						
d. Student reported intern was a shoplifter--Intern resigned						
e. Counselor exhibiting psychotic behavior and making inappropriate decisions						

	<u>URBAN</u>	<u>NON-URBAN</u>	<u>LARGE</u>	<u>SMALL</u>	<u>TOTAL</u>	<u>COMMENTS</u>
37. Centers where students have sought help because of sexual exploitation or harrassment in the past year by:						
a. another therapist	33 (25%)	17 (20%)	33 (32%)	17 (16%)	50 (23%)	The average number of charges against faculty or students for harrassment in the schools where this occurred is 7.
b. a faculty member or supervisor	92 (65%)	73 (81%)	82 (75%)	83 (73%)	165 (70%)	
c. another student	86 (65%)	71 (82%)	75 (73%)	82 (76%)	157 (70%)	
38. Centers where counselors have had to give testimony in past year when a charge of sexual harrassment has been brought against:						
a. another therapist	4 (3%)	0 (0%)	2 (2%)	2 (2%)	4 (2%)	
b. a faculty member or supervisor	4 (3%)	5 (6%)	4 (3%)	5 (4%)	9 (4%)	
c. another student	3 (2%)	4 (4%)	3 (3%)	4 (4%)	7 (3%)	

	<u>URBAN</u>	<u>NON-URBAN</u>	<u>LARGE</u>	<u>SMALL</u>	<u>TOTAL</u>	<u>COMMENTS</u>
39. Directors who believe that on occasion most counselors have become sexually attracted to a client	136 (93%)	81 (91%)	105 (91%)	108 (96%)	222 (92%)	
40. When sexual attraction to a client is present, the directors believe the counselor should:						
a. refer the client to another therapist	31 (22%)	33 (37%)	26 (23%)	38 (34%)	64 (27%)	Clearly a wide divergence of opinion on this. Most feel that it all depends on the situation, intensity of the attraction, etc.
b. say nothing, but continue to work with the client	28 (20%)	18 (20%)	21 (19%)	25 (22%)	46 (19%)	
c. tell client of attraction but assure that it will not interfere with therapy	11 (8%)	4 (4%)	7 (6%)	8 (7%)	15 (6%)	
d. other	92 (65%)	57 (64%)	73 (66%)	76 (68%)	149 (63%)	
41. Have counselors on staff ever openly discussed sexual attraction toward client at case staffing:						
a. yes, most	7 (5%)	5 (6%)	4 (4%)	8 (7%)	12 (5%)	A number of directors felt that this is a neglected topic of discussion in most training programs.
b. yes, rare	61 (42%)	33 (37%)	51 (45%)	43 (37%)	94 (39%)	
c. no, never happened	78 (53%)	58 (64%)	58 (51%)	78 (68%)	136 (56%)	
42. Have counselors under director's supervision ever talked about sexual attraction toward client:						
a. yes, most	21 (14%)	13 (15%)	15 (13%)	19 (17%)	34 (14%)	
b. yes, rare	91 (62%)	46 (52%)	76 (67%)	61 (54%)	137 (57%)	
c. no, never happened	35 (24%)	36 (40%)	23 (20%)	48 (42%)	71 (29%)	
43. Center has intern training director	64 (44%)	35 (38%)	65 (58%)	34 (29%)	99 (41%)	
44. Centers where the intern training director receives following benefits:						
a. increased salary	24 (35%)	4 (13%)	20 (30%)	8 (28%)	28 (28%)	
b. additional travel money	22 (32%)	14 (47%)	29 (44%)	7 (24%)	36 (36%)	
c. released time	29 (43%)	15 (52%)	31 (48%)	13 (45%)	44 (44%)	
d. other	1 (2%)	2 (8%)	2 (4%)	1 (4%)	3 (4%)	
45. Centers that hired new director in past year	20 (14%)	19 (21%)	19 (16%)	20 (17%)	39 (16%)	Average salary of new director \$39,200
46. Centers that hired counselor in past year	76 (51%)	50 (55%)	66 (57%)	60 (52%)	126 (51%)	
47. Newly hired:						Mean Salary
a. doctorate & experience	33 (44%)	12 (24%)	24 (37%)	21 (38%)	45 (35%)	\$27,500
b. new doctorate	25 (33%)	15 (31%)	27 (42%)	13 (23%)	40 (31%)	25,400
c. A.B.D.	10 (13%)	11 (22%)	5 (8%)	16 (29%)	21 (17%)	22,600
d. Master's (counseling)	18 (24%)	18 (37%)	18 (28%)	18 (32%)	36 (28%)	20,550
e. M.S.W.	5 (7%)	2 (4%)	5 (8%)	2 (4%)	7 (6%)	23,200
f. other	4 (5%)	3 (6%)	4 (6%)	3 (5%)	7 (6%)	18,700
48. Other characteristics of newly hired:						
a. minority male	10 (12%)	51 (10%)	6 (8%)	9 (15%)	15 (11%)	26,400
b. minority female	21 (25%)	5 (10%)	18 (25%)	8 (13%)	26 (19%)	28,200
c. caucasian male	20 (24%)	15 (30%)	16 (22%)	19 (31%)	35 (26%)	24,600
d. caucasian female	33 (39%)	25 (50%)	32 (44%)	26 (42%)	58 (43%)	25,700
49. Directors who supplement income with the following:						
a. teach on over-load basis	28 (20%)	19 (22%)	22 (20%)	25 (23%)	47 (20%)	
b. private practice	82 (59%)	38 (44%)	59 (54%)	61 (56%)	120 (52%)	
c. industrial evaluation	11 (8%)	3 (3%)	8 (7%)	6 (6%)	14 (6%)	
d. psychological evaluation	12 (9%)	6 (7%)	8 (7%)	10 (9%)	18 (8%)	
e. other	29 (21%)	26 (24%)	26 (24%)	29 (27%)	55 (24%)	

	<u>URBAN</u>	<u>NON-URBAN</u>	<u>LARGE</u>	<u>SMALL</u>	<u>TOTAL</u>	<u>COMMENTS</u>
50. Rates of directors in private practice compared to going rates in area						
a. something above going rate	86 (10%)	2 (5%)	5 (9%)	5 (8%)	10 (8%)	
b. about the same	48 (59%)	26 (65%)	31 (57%)	43 (70%)	74 (61%)	
c. below going rate	25 (31%)	13 (33%)	18 (33%)	20 (33%)	38 (31%)	
51. Centers which have written criteria describing what is necessary for institution to consider a student learning disabled	33 (24%)	32 (37%)	34 (32%)	31 (28%)	65 (28%)	See item #62 for listing of schools with criteria
52. Internship program at the centers:						
a. yes, APA approved	18 (12%)	13 (14%)	29 (26%)	2 (2%)	31 (13%)	
b. yes, non-APA approved	64 (44%)	29 (32%)	41 (36%)	52 (45%)	93 (38%)	
c. no	64 (44%)	55 (60%)	43 (38%)	76 (66%)	119 (49%)	
53. Difficulty in filling available openings in internship program:						
a. yes, still have not filled all openings	12 (15%)	7 (18%)	9 (13%)	10 (21%)	19 (15%)	While APA approved programs had the least amount of difficulty filling positions, the majority of non-approved programs also reported no difficulty.
b. yes, all slots filled but harder time filling them this year	16 (20%)	7 (18%)	16 (23%)	7 (15%)	23 (19%)	
c. no particular difficulty	54 (66%)	28 (72%)	45 (64%)	37 (79%)	82 (66%)	
54. Does center belong to APIC:						
a. yes	26 (18%)	17 (19%)	36 (32%)	76 (6%)	43 (18%)	APIC is the Association of Psychology Internship Centers
b. no	53 (37%)	33 (37%)	37 (33%)	49 (43%)	86 (36%)	
c. what's APIC	65 (45%)	45 (51%)	38 (34%)	72 (63%)	110 (46%)	
55. APIC Centers which are satisfied with APIC guidelines for selecting interns	18 (69%)	10 (62%)	24 (69%)	3 (75%)	29 (67%)	

Concerns about new APIC Guidelines

1. New guidelines implemented without sufficient notice.
 2. Previous rule breakers of the system are now legitimized under new guidelines.
 3. Time schedule is a problem for academic centers (2); and this will favor hospital settings over counseling centers.
 4. Concerns about the early notification system (8) -- should be deleted (3).
 5. Establish a computerized preference system.
 6. Guidelines are often unenforceable and lead to misuse.
 7. Will actively lobby for an alternative which represents university sites exclusively.
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|--|-----------|----------|----------|-----------|-----------|--|
| 56. Centers that provide counseling services for faculty and staff | 121 (83%) | 82 (94%) | 91 (81%) | 112 (96%) | 203 (85%) | |
| 57. Nature of services provided for faculty and staff: | | | | | | |
| a. services provided informally as schedule permits | 41 (33%) | 51 (66%) | 35 (38%) | 57 (56%) | 92 (45%) | |
| b. formally identified programs with full admin. sanction | 44 (36%) | 14 (18%) | 32 (35%) | 26 (25%) | 58 (28%) | |
| c. programs established along lines of Employee Assistance Program | 13 (11%) | 8 (10%) | 12 (13%) | 9 (9%) | 21 (10%) | |
| d. separate funding established program | 3 (2%) | 4 (5%) | 2 (2%) | 5 (5%) | 7 (3%) | |
| e. 3rd party payments collected for services | 9 (7%) | 3 (4%) | 7 (8%) | 5 (5%) | 12 (6%) | |
| f. primarily referral program | 58 (47%) | 49 (64%) | 42 (46%) | 65 (64%) | 107 (52%) | |

	<u>URBAN</u>	<u>NON-URBAN</u>	<u>LARGE</u>	<u>SMALL</u>	<u>TOTAL</u>	<u>COMMENTS</u>
g. services detract from ability to provide necessary services to students	10 (8%)	12 (16%)	11 (12%)	11 (11%)	22 (11%)	
h. services strengthen political position on campus	59 (48%)	35 (45%)	42 (46%)	52 (51%)	94 (46%)	
i. services help create healthier environment and benefits students	57 (46%)	39 (51%)	40 (43%)	56 (55%)	96 (47%)	
j. faculty & staff who utilize these services also tend to make more referrals	59 (48%)	43 (56%)	40 (43%)	62 (61%)	102 (50%)	
58. Sampling of innovative programs for making faculty aware of counseling services. Enclosed numbers identify schools, see Directory.						
a. Publishing materials for faculty on making referrals (56, 62, 91, 112, 134, 137, 158, 164, 220, 229)						
b. Retreats off campus for faculty presented by center (183)						
c. Workshop for faculty on learning disabled college student (12)						
d. Weekly articles in campus newspaper (121, 180)						
e. Each director or chair of a department is interviewed by counselor about their field. The interviews are videotaped and available to students (46)						
f. Established faculty referral network in which cooperating faculty receive referrals to describe their discipline to prospective majors (179)						
g. "Best Kept Secrets" series involves advisors from less known departments presenting programs weekly to students in the center (213)						
h. Sandwich seminars on counseling the college student for faculty and staff (129)						
i. "Radio Wellness" programs (72)						
j. Annual luncheon for academic advisors (213)						
k. Participate in new faculty orientation (93, 120, 177, 215)						
l. Survey faculty about counseling services (15)						
m. Brochure on how to deal with troubled students (19, 111, 119, 180)						
n. Annual report is distributed to all department chairs and deans (114)						
o. Faculty open house and newsletter (32, 113)						
59. Sampling of innovative Programs in working with Residence Halls						
a. Workshops for RA's on: listening and communication skills, drug and alcohol prevention, stress management, eating disorders, sexual harrasment, and date rape (15, 20, 33, 83, 145, 238)						
b. Assign one liaison counselor to each residence hall (58, 75, 87, 132, 149)						
c. Week long fall retreat for RA's. Counselors offer a variety of workshops and emergency training techniques (178)						
d. Developed video vignettes of typical student problems which are utilized in RA training (72, 83)						
e. Pizza lunches for all RA's and counselors to keep lines of communication open (193)						
f. Counselors present workshops for students in the dorms (32, 180)						
60. Examples of suits against counseling centers in past years:						
1. Suits against directors by CC employees for:						
a. sex discrimination--salary issue (2 cases)						
b. age and race discrimination (2 cases)						
c. work related grievances (2 cases)						
d. counselor dismissed for failure to become licensed and claimed race and sex discrimination						
e. suits on insufficient cause for firing (2 cases)						
2. Learning disabled student sued center for failure to provide adequate services (2 cases)						
3. Breaking suicidal students confidentiality						
4. Not actively intervening to prevent a student from committing suicide (2 cases)						
5. Improper commitment of a suicidal student (2 cases)						

6. Sexual improprieties by counselor against clients (4 cases).
 7. Small claims suit by client who felt he had not gotten his money's worth.
 8. Paranoid schizophrenic individual posed a risk to others. Dismissed from housing. Sued for being deprived of his right to education.
 9. Non-student denied use of telephone counseling service after 60+ calls. Committed suicide 13 months later. Parents sued.
 10. Center psychologist asked to resign by President and Vice President because of way case was handled. Settled out of court.
 11. Client sued for violation of his confidentiality when counselor warned his wife that he posed a threat to his life. Suit later dropped.
 12. Involuntary removal of student from school. Student sued for lack of due process.
 13. Intern sued counselor for sexual harassment.
61. Examples of ethical/legal dilemmas directors experienced in the past year
- A. Externally Created Issues:
 1. Non-credentialed faculty, staff, and administrators entering into therapeutic relationships with students (3).
 2. Dean of students controlled counseling budget and consequently had access to confidential information (e.g. money paid for individual consultants to students).
 3. Suicidal students allowed back on campus against medical advice.
 4. Dean of students neglected to inform counselor when student was hospitalized for suicide attempt.
 5. Inadequate professional and clerical staff to meet legal and ethical responsibilities of counseling center.
 6. Administration says their "need to know" justifies requesting limited confidential information (3). Lack of compliance at one center makes them unpopular. Another center counters with workshops on ethical/legal issues.
 7. Issue of administration's desire for short-term therapy vs. the best needs of clients.
 8. Director believes all clients should sign informed consent sheets. CSPO opposed to having student sign such form--unresolved.
 9. Pressed by personnel office to release details of a sexual harassment case without using clients name. We refused--issue resolved in our favor.
 10. V.P. discussing personal problems with director. Interfering with working relationship.
 11. Involved in the advocacy of due process for students denied access to university programs.
 12. Student sent for counseling following judicial process. Counseling center will see for one visit. Following sessions at client's request only.
 13. Student was referred by University Conduct Board. Then counselor and center secretary called for a board meeting to testify whether student was in counseling. Board has since been informed. Student signed release forms necessary.
 14. Administration concerned about a disciplined staff member as a possible danger to self or others. We evaluated and decided there was no significant risk.
 15. Florida Bar examiner pressures law students to sign waiver for full release of confidential information. Counseling center consulted with APA and is working with law school to modify procedures. Last resort will be a legal challenge undertaken by law school faculty.
 16. Having to give DSM III diagnosis to insurance companies so that students can be reimbursed, when student problems do not warrant such diagnosis.
 17. Consulting legal advice about whether state statute requiring client access to records for health care providers is applicable to our center.
 18. Problems in getting feedback from physicians at local hospital when students referred for suicidal behavior.
 19. Child abuse law in Pennsylvania require that we report any and all abuse generated against a minor though they may not wish it reported.
 20. Opinion from university counsel that clients must give informed consent to psychotherapy--presently being clarified.
 - B. Issues Regarding Counselor or Intern Problems:
 1. Counselor's emotional problems escalating. Supervisor thought no harm was being done to clients, but counselor took no new clients for a time, and sought psychotherapy. Counselor is now fine.
 2. Lack of case notes by counselor.

3. Liability for master level counselors.
4. How to help a marginally competent therapist find a more suitable placement.
5. Counselor supervising and providing personal counseling for intern.
6. Counselor pushing religious preference on clients.
7. Counselor considered purchasing a house being sold by client. Led to extensive discussion about problems of dual relationship with counselor, client, and state ethic's committee (resolution not provided).
8. Counselor allowing client to become overly dependent on him.
9. Sexual relationship between counselor and trainee.
10. Counselor referring clients to a partner in private practice.
11. Counselor referring excessively to private practitioners when services could be provided in center (3).
12. Inappropriate release of information in a case of suspected suicide. Led to clarification of when agency staff may or may not release information--especially during the time when university is closed and students are on break.
13. Problems around allowing poorly trained interns or interns with personality problems to continue in graduate program.

C. Issues Regarding Client Problems:

1. Ex-client makes statements to university officials about therapy which are not true, but will not sign a release form allowing us to respond.
 2. Counseling wives of faculty who have become aware of husbands sexual relationships with students.
 3. Problems with secretary's schedule book being too easily observable by other students.
 4. 18 year old female client fearful of boyfriends potentially violent behavior. We warned campus police and housing staff with clients written permission. Boyfriend did later threaten client with knife. She was able to get immediate response from campus police.
 5. Clear homicidal threats (3). Uncertain about when there is clear and imminent danger (4).
 6. Loss through theft of counseling session tapes.
 7. Client reported SHS physician saw student in private office--made provocative suggestions and some inappropriate touching. Counselor helped student file report with local academy of medicine.
 8. Client threatened to beat someone up badly enough to hospitalize. Legal advice--no duty to warn.
 9. Raped clients named assailants but would not allow counselor to inform anyone else. Clients confidentiality honored.
 10. Clients who feared harming their children. Should warning be given if there is potential for child abuse? (2). Other child abuse issues (4).
 11. Psychotic student refused our request to see psychiatrist. We refused further treatment in our office.
 12. Client placed into involuntary protective custody (concern, confidentiality).
 13. Knowledge that client had handgun in hall (to violate confidentiality or not), client agreed to move it.
 14. Client stated an intense desire to and fear of killing a parent. Conflict of several years duration. Did not inform parent. To do so would have alienated client.
 15. Faculty member accused by client of sexual harassment. Contacted state agency about possible child abuse.
 16. Acting out, borderline client wished to see and copy records. Allowed to review them only in presence of counselor.
 17. Whether to see husband and wife separately or refer.
 18. When to notify parents that son or daughter is in psychological difficulty (3).
 19. Informed consent issues (3).
62. Centers that have written criteria or criteria necessary to consider a student learning disabled: (6, 13, 16, 18, 20, 24, 32, 34, 44, 49, 53, 55, 59, 68, 72, 75, 79, 85, 86, 87, 88, 92, 93, 96, 101, 108, 114, 116, 117, 118, 127, 129, 130, 132, 136, 138, 140, 145, 147, 152, 156, 157, 161, 166, 170, 173, 175, 180, 182, 184, 194, 197, 203, 209, 211, 219, 220, 224, 225, 226, 227, 240, 242, 243).

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Atherley, R. ((157)	Ehrenwoth, J. (121)	Kiracofe, N. (221)	Pustell, T. (104)
Aubuchon, J. (099)	Eide, L. (168)	Kirts, D. (237)	Rabin, L. (021)
Backner, B. (102)	Engebretson, D. (226)	Kissinger, R. (128)	Reagin, D. (005)
Bakewell, A. (020)	Evans, B. (184)	Kitchen, J. (180)	Richards, S. (114)
Ball, W. (034)	Everhart, D. (181)	Knott, J. (240)	Richardson, L. (059)
Banks, R. (067)	Fittje, O. (007)	Kogut, F. (023)	Richardson, T. (074)
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Barry, J. (038)	Foster, D. (187)	Kurtz, R. (025)	Rodgers, L. (190)
Bayne, R. (109)	Frank, E. (229)	Kush, K. (149)	Ross, M. (073)
Benner, H. (010)	Free, J. (098)	Letchworth, G. (228)	Roy, M. (144)
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Crews, D. (066)	John, K. (142)	Osborne, J. (162)	Thelen, C. (022)
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