EVALUATING THE IMPACT OF THE SOUTHERN COMMUNITY COLLEGE MENTAL

HEALTH SERVICES PROGRAM ON PERSISTENCE AND ACADEMIC PERFORMANCE

by

Rosa Maria Rodriguez-Alvarez

Liberty University

A Dissertation Presented in Partial Fulfillment

Of the Requirements for the Degree

Doctor of Education

School of Behavioral Sciences

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APPROVED BY:

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ABSTRACT

College students presenting with mental health concerns are increasing as is the severity of those issues. Researchers agree that mental health issues are associated with negative academic outcomes. This college student mental health crisis along with decreased enrollments and budgets has caused administrators to examine the return on investment of services programs. The purpose of this non-experimental study was to determine the impact of receiving counseling services on persistence and academic performance measures by grade point average (GPA). This study conducted a quantitative analysis of archival data from the Southern Community Colleges Mental Health Services program. One hundred records were selected from students who requested counseling services between Spring 2019 and Fall 2021. Records were categorized by counseling sessions to determine if completing counseling services had a significant impact on academic outcomes compared to student records who requested but did not receive or complete counseling. Additionally, the records of students who received in-person counseling were compared against students who received telemental health counseling. The results of this study did not find a significant difference in academic outcomes between students who requested and received counseling and those that did not receive or complete counseling. Also, there was not a significant difference in academic outcomes between receiving in-person or telemental health counseling. The findings of this study suggest that the impact of mental health services programs on academic outcomes at the community college may be difficult to interpret. Future research should include mixed research including student narratives, psychological factors, and counselor effectiveness.

Keywords: academic outcomes, community college, GPA, mental health services program, persistence, telemental health

Dedication

God's word promises "that if two of you agree on earth concerning anything that they ask, it will be done for them by my Father in heaven (New King James, Matthew 18:19). It is both humbling and a blessing to know that my family is a great testimony of God's word as they continually prayed for me during the completion of my dissertation.

This dissertation is dedicated to my husband and best friend, Steve Alvarez, who cheered me on and never let me let go of my dream. To our amazing five children, their spouses, and our present and future grandchildren: My daughter and her husband Shaunte and Obrey and their children Obrey II, Sanai, Samira, and Orlando. My daughter and her husband Jennifer and Matt and their children, Matthew II, Victoria, and Marcel. My daughter and her husband Melissa and Stuart (Stu) and their children Sofia, Stuart (Stu Max), and Stratford (Stratty). My daughter and her husband Danielle and Webster (Web) and their son Webster V. My son and his wife Steve II and Alyssa and their three sons, Aidan, Amari, and Alessandro. Thank you all for your love, support, encouragement, and prayers to stay the course; life would not be exciting, loud, and joyful without you all in it and I am forever thankful!

To my parents Juvencio and Marianna Rodriguez who instilled in me the value of achieving a higher education and the passion to pursue my dreams. I know that they are smiling at me from heaven.

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List of Abbreviations

American College Health Association (ACHA)

American Council on Educators (ACE)

Association for University and College Counseling Center Directors (AUCCCD)

Center for Collegiate Mental Health (CCMH)

Cognitive Behavioral Therapy (CBT)

Coronavirus Disease 2019 (COVID-19)

Grade Point Average (GPA)

Institutional Research Review Committee (IRRC)

Model of the Dropout Process (MDP)

National College Health Assessment (NCHA)

Post-traumatic Stress Disorder (PTSD)

Telemental Health (TMH)

CHAPTER ONE: INTRODUCTION

Overview

Community colleges as open-access institutions are unique and play an essential role in the postsecondary or tertiary education system in the United States. In addition to educating traditional students, they are critical in providing access to higher education for unprepared, underprepared, and disadvantaged students, offering career, developmental, and non-degree certificate programs, and serving as a transfer portal to four-year universities (Kelsay & Oudenhoven, 2014). A growing concern of community colleges is the negative impact of college students' mental health issues on academic outcomes and well-being (Oswalt et al., 2020; Salzer, 2012; Schwitzer et al., 2018).

This chapter will discuss the prevalence of mental health issues amongst college students, the negative impacts these mental health issues have on academic outcomes, and mainstream theories on retention. The history of the development of college mental health programs and their effects on academic outcomes will also be explored. This topic, in particular, is the focus of this study, as the researcher hopes to determine the efficacy of Southern Community College's (Pseudo Name) Mental Health Services program on academic outcomes, as measured by student persistence and academic performance.

Background

College Student Mental Health Crisis

Over the past few decades, the mental health issues of college students have been a cause for concern, especially regarding the negative impact on academic outcomes. Research suggests that college student mental health issues are becoming more prevalent and continue to be an increasingly important consideration of university and college administrators (Gallagher, 2012,

2015; Oswalt et al., 2020; Prince, 2015; Sapadin & Hollander, 2021). Sharkin and Coulter (2005) reported that the number of students who present with increased severity of psychological and or psychosocial disorders has been on the rise since the late 1980s (Francis & Horn, 2017; Gallagher, 2012; Lipson et al., 2019; Xiao et al., 2017). The results of a 10-year study provided evidence of the increased prevalence of mental health issues amongst college students, the increase in the utilization of college mental health counseling services, and the decrease in stigma associated with mental health (Lipson et al., 2019). According to Lipson et al. (2019), the proportion of students receiving treatment increased from 19% in 2007 to 34% in 2017, and the percentage of students diagnosed with mental health conditions increased from 22% in 2007 to 36% in 2017.

The 2012 National College Health Assessment (NCHA) conducted by the American College Health Association (ACHA) revealed several factors that had a negative impact on the academic performance of college students: 29% of students identified stress as a factor, 20% identified anxiety, 12% identified depression, and six percent identified alcohol/drugs use (Barr, 2014). In 2021, the ACHA-NCHA survey found that the number of students reporting these impediments to academic performance had increased as follows: stress (43.4%), anxiety (34.9%), depression (25.4%), and alcohol/drug use (7.2%) respectively. It is not clear if the increase in college students presenting with psychological and or psychosocial issues is due to a substantial proportional rise in the number of mental health cases or that it is due to more people willing to seek help for mental health issues because it does not have the same negative stigma that it once did (Lipson et al., 2019; Shapiro et al., 2019).

Additionally, the global Coronavirus Disease 2019 (COVID-19) pandemic's impact on colleges and universities caused them to move to a fully online learning and services

environment resulting in increased mental health stressors for college students (Hamza et al., 2021; Lee et al., 2021). A study conducted within an extensive university system in Texas found that 71% of college students reported an increase in stress and anxiety in comparison to 20% who said that it was the same and 9% who indicated a decrease in stress and anxiety due to the COVID-19 pandemic (Son et al., 2020). Whatever the contributing factors to students' mental health issues, it is a challenge for college and university administrators to provide and develop student services programs that produce the best academic outcomes while addressing the growing needs of college students' mental health issues and well-being.

Mental Health Impacts on Academic Outcomes

The findings that mental health issues have a negative impact on academic outcomes such as performance, persistence, and retention have been well-documented. Mental health issues can cause harm to an individual's physical, emotional, cognitive, and social well-being, which can adversely affect academic outcomes (Gallagher, 2012). Adverse academic outcomes are a greater risk for college students suffering from psychological and or psychosocial distress (Samlan et al., 2021). Yoon and Yang (2017) reported that first-year college students with mental health issues experienced negative academic functioning. As measured by GPA, persistence and academic performance were found to be hindered in college students distressed by psychological and or psychosocial issues (Duffy et al., 2020; Kivlighan et al., 2021). The ability of college students to "cope with mental health issues could affect retention by detracting from their ability and motivation to complete schoolwork, making it less likely they will obtain good grades and persist to graduation" (Eisenberg et al., 2016, p. 89).

Additionally, the withdrawal rate for college students with mental illness is 86% compared to a 45% withdrawal rate for the general student population (Salzer, 2012). The 2021

National Academies reports the dropout rate for college students with mental health issues ranges from 43% to 86% (Leshner & Scherer, 2021). Therefore, college and university administrators face serious challenges and must consider the value of their mental health services programs in addressing college students' barriers to persistence and academic performance.

Theoretical Historical Context

Student retention remains a primary goal for colleges and universities as they continue to explore how to develop efficient programs and services that lead to student success and reduced attrition rates (Manyanga et al., 2017). For decades, theoretical models have been developed to explain the phenomenon of college student attrition and retention. The most prominent models have been William Spady's (1970) Model of the Dropout Process (MDP), Vincent Tinto's (1975, 1993) Model of Institutional Departure, and John Bean's Student Attrition Model (1980), all of which are based in sociology and focus on the integration between the individual and the institution (Burke, 2019). Spady's (1970) and Tinto's (1975, 1993) models were inspired by the earlier works of the sociologist Emile Durkheim (1951) and his suicide theory and social anthropologist Arnold Van Gennep's (1960) rites of passage (Aljohani, 2016). The models examine and attempt to explain potential causes of student departure, providing colleges and universities with the information they can utilize to develop strategies and programs, such as counseling services, to address student persistence and retention.

Spady's (1970) model incorporated Durkheim's (1951) theory of suicide, recognizing that suicide and attrition are ways individuals attempt to separate themselves from society. The model acknowledges that college student retention requires an interdisciplinary approach, understanding the interaction between the individual student's characteristics and the influences of the college environment (Burke, 2019).

Tinto's (1975, 1993) well-recognized Institutional Departure Model, which builds on the work of Spady (1970) and integrates the rites of passages works of Van Gennep (1960), recognizes the applicable social community rituals that must be followed for success as students integrate into the academic and social systems of the college environment (Aljohani, 2016).

Bean's (1980) model states that the student attrition process in college correlates directly to the factors that influence employee turnover in work organizations. Although Bean claimed the foundation of his model was consistent with Tinto's model, he argued that there was not a direct correlation that could be tested in Spady's (1970) and Tinto's (1975, 1993) student attrition models and that the link between Durkheim's suicide theory and student attrition lacked evidence (Burke, 2019).

Previous college student retention models relied on theories primarily from a socialist perspective. Bean and Shevawn Eaton (2016) developed a Psychological Model of Student Retention. Bean and Eaton argue that psychological theories and processes can also explain student departure decisions. The underlying assumption in the development of this model is that "leaving college is a behavior and that behavior is psychologically motivated" (p. 49). The model was developed by integrating four psychological theories, attitude-behavior theory, coping behavioral (approach/avoidance) theory, self-efficacy theory, and attribution (locus of control) theory, thereby revising Tinto's theory with a psychological perspective (Bean & Eaton, 2002).

Research suggests, in addition to traditional retention theory, that mental health issues must be considered as they have been associated with negative impacts on persistence and potential barriers to social and academic integration within the college environment (Kitzrow, 2009). These theoretical frameworks are essential because student affairs professionals, institution administrators, and stakeholders need to understand and develop academic and non-

academic student services programs aimed at producing positive student academic outcomes, mental health, and well-being (Francis & Horn, 2017; Salzer, 2012; Sass et al., 2018; Schwitzer et al., 2018).

College Mental Health Services History

Colleges and universities have provided college counseling to students through mental health service programs for decades. However, the makeup of counseling services has changed considerably over time. Initially, college counseling focused on faculty-led academic and career counseling and has shifted to professional counselors delivering mental health services (Hodges et al., 2017).

Mental health services initially appeared as mental hygiene programs in colleges and universities during the 1920s following World War I as an effort to broaden health services provided in higher education (Prescott, 2008). Mental health services programs were expanded in higher education after the Second World War to support the large influx of veterans due to the GI Bill, which provided financial support to obtain a college degree (Hodges et al., 2017; Prescott, 2008). With the influx of veterans in colleges and universities, the college counseling services provided in the 1950s changed to focus primarily on career counseling and vocational planning (Sharkin, 2012).

During the 1970s, economic and political shifts put college mental health services programs at risk due to a lack of financial support (Prescott, 2008). This is still an area of concern as college and university administrators are under increased accountability for expenditures of limited financial resources and are evaluating the return on investments of their services programs (Kivlighan et al., 2021). The 1980s and beyond saw an increase in the severity of college students' presenting mental health issues, causing significant challenges for college

mental health services programs (Sharkin, 2012; Sharkin & Coulter, 2005). Career counseling

moved in the direction of becoming a separate service provided by others outside the mental

health counseling offices, and mental health counselors shifted to the medical model approach of

assessments, diagnosis, and interventions (Sharkin, 2012).

The services provided by college and university counseling centers continue to evolve to

meet the changing needs of students and the culture in which students live. According to Sharkin

(2012), college counseling is considered a specialty in professional counseling. The evolution of

college counseling continues today, with counseling centers moving away from a developmental

model to more of a mental health focus (Hodges et al., 2017). Another significant change to

college counseling occurred in 2020 as colleges and universities were faced with an unplanned

suspension of in-person mental health services and were forced to implement telemental health

(TMH) services due to the COVID-19 pandemic (Erekson et al., 2021).

College Mental Health Services Impact

Colleges and universities continue to be faced with the problem of student retention, and

it is believed that mental health services programs can directly support college students'

academic success and persistence (Aljohani, 2016; Kivlighan et al., 2021). While there are

student services programs focused on improving academic outcomes through intellectual means,

mental health service programs represent a non-academic approach. Colleges and universities

implement mental health services programs with the assumption that students will be helped both

psychologically and academically (Choi et al., 2010; Sharkin, 2004). As a result, one of the most

significant challenges for college and university counseling centers is to demonstrate the value of

their contribution to student retention and the effectiveness of services on academic outcomes

(Bishop 2010: Illovsky, 1997; Lockard et al., 2012; Sharkin, 2004). Even though some studies

report inconsistent results on the contributions of mental health services to college student

retention and academic performance (Bishop, 2016: Lee et al., 2009; Mohamad, 2018), the

prevalent findings are that mental health services do have a positive impact on retention or

academic performance (Bani et al., 2020; Biasi et al., 2017; Choi et al., 2010; Francis & Horn,

2017; Illovsky, 1997; Kivlighan et al., 2021; Lockard et al., 2012; Renuka Devi et al., 2013;

Schwitzer et al., 2018; Scofield et al., 2017; Sharkin, 2004; Turner & Berry, 2000; Wilson et al.,

1997).

As a result of the COVID-19 pandemic, TMH has become an essential aspect of colleges

and universities' mental health services programs. Mental health services are vital as students are

most likely to seek help from college counseling centers (Lipson et al., 2019). The available

research on college and university TMH services suggest benefits and shortcomings (Hadler et

al., 2021). However, the outcomes were consistent with face-to-face mental health services

(Erekson et al., 2021). This preponderance of evidence on the contribution of counseling centers

lends colleges and universities to implement retention strategies that include provisions for

mental health services (Eisenberg et al., 2016; Shapiro et al., 2019).

Problem Statement

A focus of research on predictors of college student success has expanded to include the

threats that mental health issues can have on academic performance and retention (Gallagher,

2015; Katz & Davidson, 2014). Consistent with four-year universities, community colleges are

experiencing an increasing number of students presenting with mental health issues (Brunner et

al., 2014; Eisenberg et al., 2016; Gamache et al., 2019; Lee et al., 2021) which supports the

argument that there is a need for mental health services to be provided at the community college

level (Becker & Torous, 2019; Dykes-Anderson, 2013; Sontag-Padilla et al., 2016; Xiao et al.,

2017). Not only is there an increased demand for counseling services at the community college level, but community colleges are also faced with the challenge of providing more services while experiencing decreased revenue streams from declining enrollment and budget cuts (Bishop, 2010; Pavlov & Katsamakas, 2020; Rabovsky, 2014). Additionally, community colleges are not spared the challenges of student persistence, attrition, and increased accountability on the contributions of funded programs to the institution's academic success and retention goals. Therefore, community colleges are also incentivized to examine the impact of their mental health services programs' impact on student mental health and well-being and academic performance and retention (Bishop, 2010; Rabovsky, 2014).

An examination of available literature on the effects of college mental health services programs on academic performance and retention revealed a gap in research focused on community colleges. The prevalence of research focuses on four-year universities providing face-to-face mental health services to a limited population of traditional college freshmen. They do not address the diverse people and demographics consistent with community college students or the impact of TMH services. In light of this lack of research, the present study seeks to examine the efficacy of community college mental health services programs on the academic outcomes of community college students.

Purpose Statement

This study aimed to determine the impact of the Southern Community College's Mental Health Services program on academic outcomes, as measured by persistence and academic performance. It is essential to evaluate the effectiveness of community college mental health services to achieve the expectation of providing services reflected in positive academic outcomes consistent with the institution's educational mission and goals. This current study attempts to

address the gaps in research concerning the impact of mental health services programs on the academic outcomes of traditional and nontraditional students at two-year community colleges. In addition, this study will add to the existing literature on mental health services programs as a non-academic approach to addressing student attrition and academic outcomes.

This study analyzed the archival records of a diverse population of adult students who have sought counseling services over a three-year period at one of 11 campuses located across six cities, which comprise the community colleges' mental health services program. Specifically, records of traditional and nontraditional students varying in age and college experience were analyzed. Still, data collection includes both degree and non-degree-seeking students. Non-degree-seeking students are students enrolled in certificate programs, adult education, continuing education, or taking individual courses for transfer credit. The mental health and academic records of students who registered for and completed at least one intake session and no more than nine personal counseling sessions for a total of 10 sessions formed the population for this study. Two groupings were established for this population. The first grouping consisted of the records of students who completed at least four counseling sessions and those students who registered for services but did not complete at least four sessions for comparison. The second group consisted of student records that requested counseling services but only completed the intake session and no personal counseling, student records that completed up to six counseling sessions, and student records who completed between seven and ten counseling sessions for comparison. In addition, students who received in-person counseling services were compared against students who received TMH services for those student records that completed at least two counseling sessions (one intake and one personal counseling). Statistical analysis will determine the impact of the Independent Variable (IV), counseling services, on the Dependent Variables

(DV), GPA and Persistence.

Significance of the Study

Across the nation, colleges and universities have experienced an increase in students seeking mental health services on their campuses (Eisenberg et al., 2016; Gallagher, 2015; Lipson et al., 2019; Oswalt et al., 2020; Sapadin & Hollander, 2021). The Center for Collegiate Mental Health (CCMH) 2021 annual report stated there was a 30-40% increase in the utilization of college counseling centers between Fall 2009 and Spring 2015. However, college enrollment only grew by five percent during the same period. The inevitable increasing reports of mental health concerns among the college student population, especially during the state of the worldwide COVID-19 pandemic, has student affairs professionals and administrators focused on examining the college counseling center's best practices and the role it has on its campus and community (Kivlighan et al., 2021).

Numerous studies have reported that academic outcomes can be positively impacted by mental health services (Bani et al., 2020; Biasi et al., 2017; Choi et al., 2010; Francis & Horn, 2017; Illovsky, 1997; Kivlighan et al., 2021; Lockard et al., 2012; Renuka Devi et al., 2013; Schwitzer et al., 2018; Scofield et al., 2017; Sharkin, 2004; Turner & Berry, 2000; Wilson et al., 1997). According to Schwitzer et al. (2016), the counseling and student development literature provide little information on community college practices. In reviewing the literature published since Schwitzer et al.'s (2016) study, the researcher of the present study found that the existing literature continues to reflect Schwitzer et al.'s findings. This study will add to the current body of research primarily focused on four-year universities by providing results on the impact of mental health services programs on the academic outcomes of students enrolled at a two-year community college.

According to Hilty et al. (2013), TMH services provide additional access to counseling services and are effective in most circumstances. It is suggested that TMH will potentially be a significant part of college mental health services programs (Hadler et al., 2021). This study will expand the empirical knowledge base by comparing the impact of TMH services on academic outcomes to in-person counseling services results at the community college level.

Lastly, the results of this study are significant because of the sample being studied. The sample consists of students at a nonresidential community college with a diverse traditional and nontraditional population at multiple campuses across multiple cities. This population of community college students may be a better representation of the general population than most prevalent studies that focus on resident traditional first-year college students between the ages of eighteen and twenty-four.

Research Questions

There are four proposed research questions derived from the problem and purpose statements that were addressed from amongst the community college student population records by this archival research program evaluation:

RQ1: Does receiving mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic persistence compared to community college students who requested counseling services but did not receive or complete counseling sessions at the college?

RQ2: Does receiving in-person mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic persistence compared to community college students receiving telemental health counseling services?

RQ3: Does receiving mental health counseling services for psychological and or

psychosocial issues contribute to a significant increase in academic performance compared to community college students who requested counseling services but did not receive or complete counseling sessions at the college?

RQ4: Does receiving in-person mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic performance compared to community college students receiving telemental health counseling services?

Definitions

The following terms have been identified as being pertinent to this study. The definitions of the terms that apply to the study are provided.

1. *Academic Outcomes* – the administrative measures of educational variables such as grade point average, attrition, persistence, retention, and graduation rates (Choi et al., 2010).

2. *Mental Health Concern/Issue* – refers to various conditions or psychiatric disorders, from difficulties concentrating to suicidal ideation that causes mental distress (Francis & Horn, 2017).

3. *Persistence* – refers to the college student's continued enrollment from one term or semester to the next until graduation (Sharkin, 2004).

4. *Retention* – refers to students being retained in the college, evidenced by enrollment from year to year (Burke, 2019).

5. *Telemental Health* – refers to mental health services provided remotely via electronic means such as online video conference applications or phone calls with a licensed counselor (Hadler et al., 2021).

Summary

This chapter provided information on the prevalence of college student mental health issues and the potential negative impacts on academic outcomes. An overview of the prevailing educational student retention theories was presented to lay the foundation for the non-academic approach to mental health services. A brief history of the development of college counseling services was provided, followed by a discussion on the impact of mental health services on academic outcomes. The problem is that there is a lack of research on the effects of mental health services at the community college level. Therefore, this study aimed to add to the literature by conducting a program evaluation of the Southern Community College's Mental Health Services program on academic outcomes.

CHAPTER TWO: LITERATURE REVIEW

Overview

Colleges and universities have educational missions focused on academic performance and persistence. Psychological and or psychosocial issues may negatively influence the academic performance and persistence of community college students impacting their concentration, motivation, and social interaction (Auerbach et al., 2016; Oswalt et al., 2020; Salzer, 2012; Son et al., 2020). Underprepared college students have a higher rate of dropping out if appropriate interventions are not implemented (Cholewa & Ramaswami, 2015; Leshner & Scherer, 2021). Student persistence is a determining factor of institutional income impacting college and university budgets and financial planning (Burke, 2019). Therefore, institutional stakeholders invest in efforts and programs to increase student academic success and persistence to afford students a more significant opportunity of realizing the benefits associated with educational achievements (Cholewa & Ramaswami, 2015; Kivlighan et al., 2021).

Theoretical models such as Spady's Model of the Dropout Process, Tinto's Model of Institutional Departure, and Bean's Student Attrition Model, the most prominent retention models, have been instrumental in guiding institutions in the development of college retention programs to increase student persistence (Burke, 2019). In addition, Bean and Eaton's (2002) Psychological Model of Student Retention addresses psychological factors that may be more relevant to developing and integrating mental health services programs into the institution's retention and academic strategies.

College and university presidents across the country recognize the mental health crisis and the impacts of the prevalent psychological and or psychosocial issues amongst college students that have only been made worse due to the COVID-19 pandemic (Browning et al.,

2021; Hamza et al., 2021; Lee et al., 2021; Son et al., 2020). A recent study of college and

university presidents across the country found that across all sectors, the number one pressing

issue of these administrators is the mental health of their students (Taylor et al., 2021). Mental

health issues continue to negatively impact academic performance and persistence (Kivlighan et

al., 2021). College students continue to report that mental health issues harm their academic

performance; stress, anxiety, and depression continue to be identified as the top three

contributors as reported in the American College Health Association (ACHA)-National College

Health Assessment (NCHA) 2021 survey.

       The college mental health services programs' primary function is to provide counseling

interventions for college students whose presenting psychological and or psychosocial concerns

negatively impact their academic functioning and well-being (Leshner & Scherer, 2021; Sharkin,

2004). The problem is the effectiveness of counseling services on the academic functioning of

community college students. Therefore, it is essential to evaluate the impact of college mental

health services programs to achieve the expectation of providing services that are reflected in

positive academic persistence consistent with the institution's educational mission (Kivlighan et

al., 2021; Lee et al., 2009; Schwitzer et al., 2018).

       This study aimed to determine the impact of the Southern Community College Mental

Health Services program on academic outcomes, as measured by persistence and academic

performance. Understanding the effects of counseling interventions will meet the expectation of

providing better services that will be reflected in increased academic performance or persistence

(Bani et al., 2020; Biasi et al., 2017; Choi et al., 2010; Francis & Horn, 2017; Illovsky, 1997;

Kivlighan et al., 2021; Lee et al., 2009; Lockard et al., 2012; Renuka et al., 2013; Schwitzer et

al., 2018; Scofield et al., 2017; Sharkin, 2004; Turner & Berry, 2000; Wilson et al., 1997) in

support of the educational mission of the institution.

Conceptual or Theoretical Framework

In the past few decades, theories have arisen that attempt to study the phenomenon of college student attrition and retention. The focus was placed on the students' characteristics, attributes, and weaknesses instead of examining their interaction with their college environment (Aljohani, 2016). A critical concern for higher education institutions is that while some students do not complete their degrees or graduate for various reasons, others voluntarily withdraw from their degree programs without successful completion. Therefore, understanding the factors of student attrition and retention is of great concern for higher education institutions as it may consequently affect the academic standing and financial plans of the college or university itself (Aljohani, 2016). Theoretical models such as Spady's (1970) MDP, Tinto's (2012) Model of Institutional Departure, and Bean's (1980) Student Attrition Model were developed to examine and understand this phenomenon among college students; providing the institutions of higher education with information to assist in the development of strategies and techniques to deal with this critical issue (Aljohani, 2016).

Spady's Model of the Dropout Process

Spady's (1970) development and introduction of his theoretical MDP, as shown in Figure 1, is based on the suicide theory model of etiological (social forces) developed by Emile Durkheim in 1951, and helped to identify explanatory factors in the phenomenon of college and university student dropout and completion rates in higher educational programs. Spady (1970) was concerned that the current research addressing the withdrawal process lacked empirical and theoretical consistency. Prior research on college and university persistence focused on intellectual perspective and operational definitions. It did not include a more vigorous

examination of an interdisciplinary approach that included colleges and universities' academics and social environment (Spady, 1970). Spady argued that existing research could be synthesized and focused on the interaction between student attributes and the institutional environment using a path model based on Durkheim's (1951) suicide theory.

Figure 1
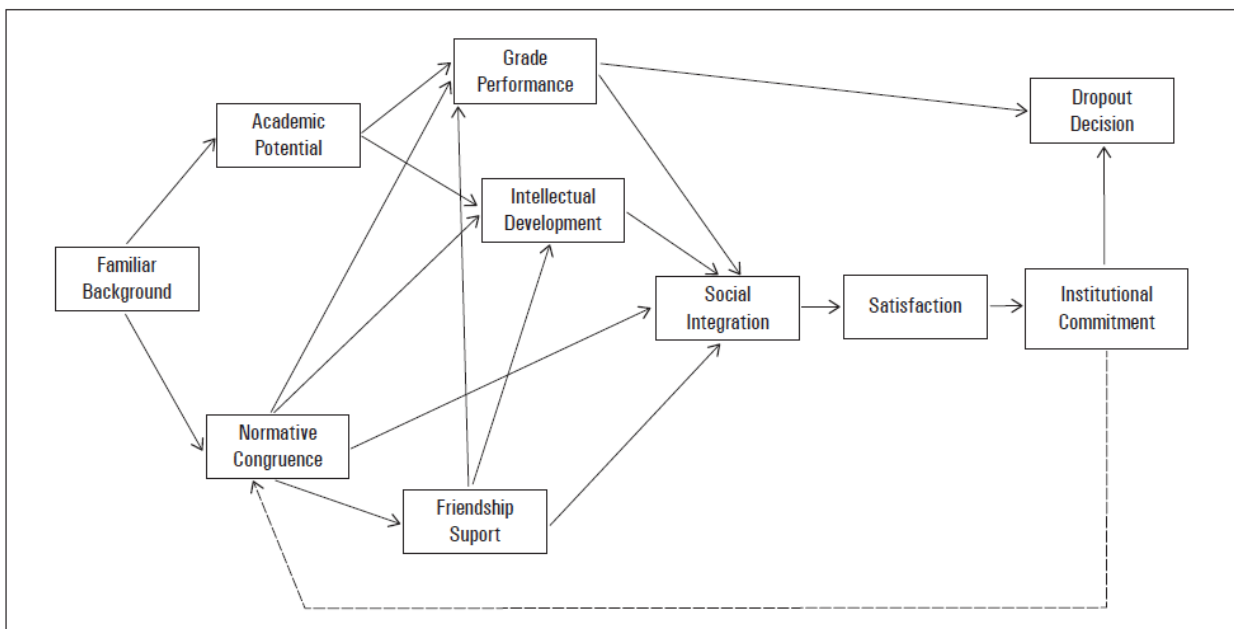
Model of the Dropout Process

Note: This model was developed by Spady in 1970, summarizing factors affecting dropout and completion rates in higher education programs. From "Determinant Factors for Undergraduate Student's Dropout in An Accounting Studies Department of a Brazilian Public University," by S. de Oliveira Durso and J. V. A. da Cunha, 2018, *Educação Em Revista*, *34*(0), (https://doi.org/10.1590/0102-4698186332).

Spady's (1970) study was one of the first to focus on the connection between a student's academic persistence and sociological aspects as having an indirect positive or negative

influence on their educational retention. He proposed that such factors as a student's family background, whether or not there was an emphasis on academic performance and graduation, the student's sense of self and career, intellectual development, the support of friends, and the relationship with faculty and institution were fundamental to student satisfaction and influenced the student's commitment to the institution (Spady, 1970). Consequently, the level of the college student's commitment to the institution predicted the students' tendency to drop or persist in their program at the institution (Spady, 1970).

Since Spady developed the MDP, several theoretical models, Tinto's 1975 and 1993 Model of Institutional Departure, Bean's 1980 Model of Student Attrition, and Bean and Eaton's 2002 Psychological Model of Student Departure have been developed to guide institutions of higher education in addressing the challenges of student attrition and retention providing guidelines for the development and implementation of programs such as mental health services that will assist in producing positive academic outcomes of college and university students.

Tinto's Student Departure Model

Tinto's Model of Institutional Departure, presented in Figure 2, was initially documented in 1975; however, the theory was not fully developed until 1993 (Tinto, 2012). Tinto's theory originated from Spady's (1970) theoretical MDP. Spady's model was one of the first studies on student persistence, taking into consideration sociological aspects. Spady considered the institution's academic and social systems as integral parts contributing positively to persistence and negatively to the dropout process (Nicoletti, 2019). These two variables are essential considerations for retention efforts and the building blocks for Tinto's student departure model (Tinto, 2012).

Figure 2

Model of Institutional Departure

Note: Tinto's Model of Institutional Departure states that persistence is based on the student's integration into the college's informal social systems (faculty/staff and peer-group interactions) and the formal academic system (academic performance, extracurricular activities). From "Determinant Factors for Undergraduate Student's Dropout in An Accounting Studies Department of a Brazilian Public University," by S. de Oliveira Durso and J. V. A. da Cunha, 2018, *Educação Em Revista*, *34*(0), (https://doi.org/10.1590/0102-4698186332).
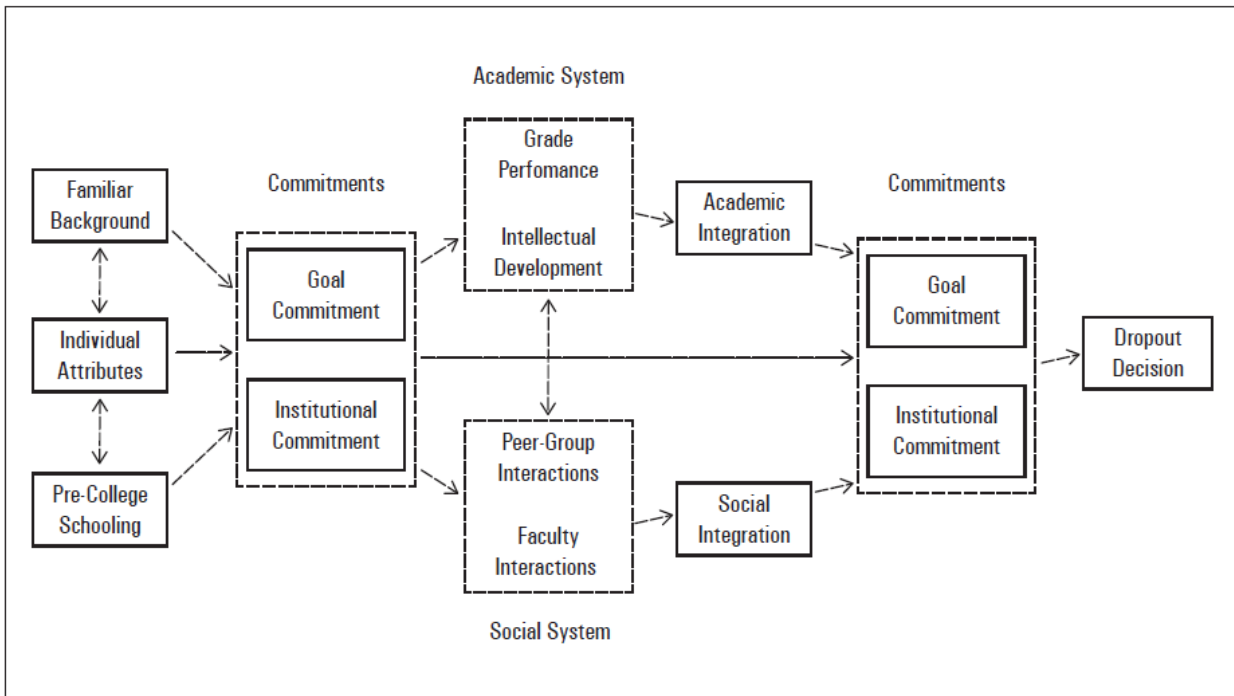
Tinto (2012) incorporated elements of Durkheim's (1951) theory of suicide and also the social integration writings on the rites of passage associated with social community membership of Van Gennep (2013) to create his model of student departure from college (Burke, 2019). Tinto (2012) argues that colleges and universities are communities with similar characteristics to other societal communities in that departure results from the attributes, actions, and interactions of the individual and those of the other members of the institutions.

As students transition from high school to college, the success of this transition is dependent upon how successfully they navigate the stages of passage to college life, similar to Van Gennep's (2013) rites of passage stages in tribal societies; separation, transition, and incorporation; successful navigation is required for students to persist in college. Student departure is a reflection of experienced and unresolved difficulties that resulted in the unsuccessful navigation of the stages which would lead a student to integrate into the college community (Van Gennep, 2013). Student departure is attributed to three primary sources: academic difficulty, the inability of the students to fulfill their educational goals, and failure to integrate into the social culture of the institution (Manyanga et al., 2017). Some of the challenges that can make this transition and integration difficult are the unfamiliar values, priorities, and behaviors of the new foreign college environment and community (Burke, 2019).

Durkheim's suicide theory suggests that a lack of social and intellectual integration into societal communities can lead to suicidal action (Aljohani, 2016). Tinto (2012) posits that a student's inability to integrate academically and socially into the college community negatively impacts persistence and results in student departure. Tinto makes an analogy of the student departure decision as an educational parallel to "egotistical suicide" (Tinto, 2012, p. 104).

Tinto's (2012) theory on college student departure recognizes the importance of student integration both academically and socially with the institution as an important factor in determining persistence (Ashar & Skenes, 1993; Coll & Stewart, 2008). The conceptual framework for the theory is grounded in the belief that the degree to which a student is incorporated into the institutional community will determine the student's persistence (Cholewa1 & Ramaswami, 2015). The model recognizes the student's responsibility in both formal and informal integration and interaction with social and academic systems at the institution. The

theory suggests there must be a "good fit" between the student's intent, their precollege experiences and associations, and the institution's environment (Manyanga et al., 2017).

Ashar and Skenes (1993) tested Tinto's Student Departure Model on nontraditional students of higher education, posing the question "Can the concepts of academic and social integration explain retention for nontraditional students as well?" (p. 92). This is an important question for this study as a significant proportion of current community college students are nontraditional (Hart & Park, 2021). They argued that previous studies were focused on traditional students and had not tested Tinto's theory on nontraditional college students. They intended to determine if the student attrition rates of nontraditional students could be explained by the concepts of academic and social integration in Tinto's model (Ashar & Skenes, 1993). The study had mixed results, reporting consistent findings and support for Tinto's claim that the level of social integration can have a positive impact on retention; however, the study did not provide results to support the claims of academic integration for the specific nontraditional population of the study (Ashar & Skenes, 1993).

Tinto's (1975, 1993) Model of Institutional Departure is significant to the study of determining the impact of community college mental health services on academic functioning as measured by persistence and academic performance. The ultimate goals of the community college's mental health services are to support students, to be successful in their transition and integration into the community college community, and the achievement of their educational goals. Therefore, the counseling services and programs offered to foster life balance, develop personal and academic growth, and foster a healthy learning environment address the critical factors for student persistence of Tinto's Student Departure Model, namely the importance of student integration academically and socially with the institution. This study to determine the

impact of community college mental health services on academic functioning measured by

persistence and academic performance is instrumental in validating whether the findings are

consistent with and support Tinto's Model of Institutional Departure theory.

Bean's Student Attrition Model

John P. Bean developed his model, The Synthesis of a Theoretical Model of Student

Attrition, as shown in Figure 3 in 1980. His model is more commonly referred to as the Student

Attrition Model which builds on the works of his predecessors, as did Victor Tinto in 1993. Bean

was the first to adopt the concept of employee turnover in the workplace, posed by Price (1977)

and Price and Mueller (1981), in the development of his model of the student attrition process.

He argued that both students and employees are members of an organization, and both have the

potential to leave (Aljohani, 2016; Burke, 2019). The student's motivation for departure from an

institution of higher education is very much like that of an unsatisfied employee's departure from

their place of employment. He equated the organizational variable of an employee's salary

(Price, 1977), a significant indicator of turnover in the workplace, with four educational

indicators from his model: GPA, development, institutional quality, and practical value; all

significant predictors of student satisfaction and retention (Aljohani, 2016).

Figure 3

Model of Student Attrition
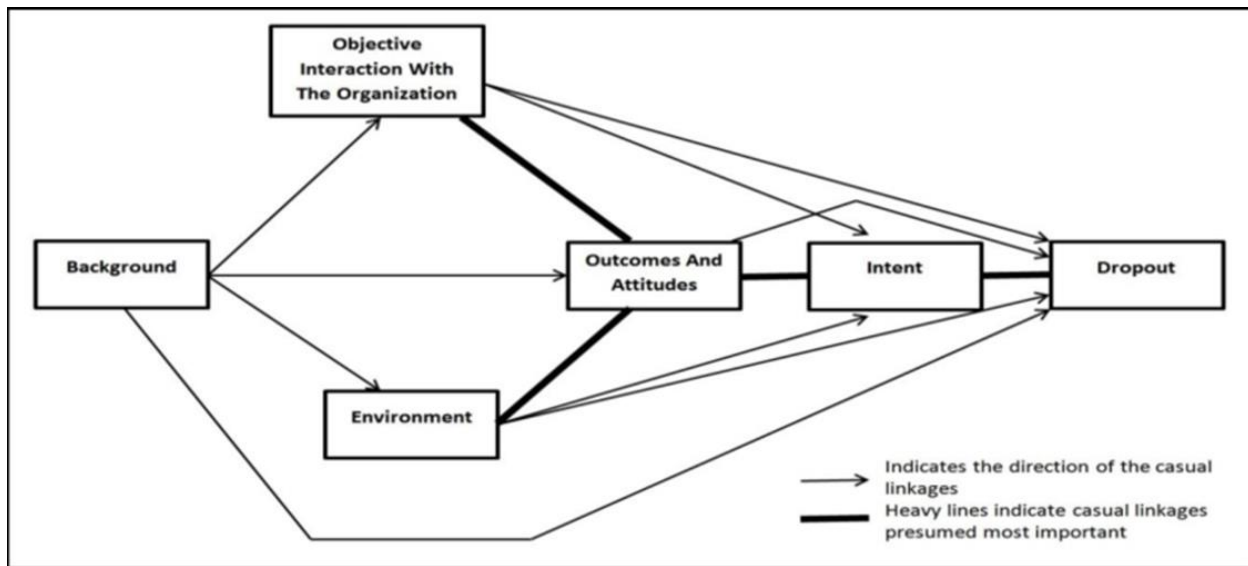
Note: The Model of Student Attrition developed by Bean in 1980 states that the three factors of the socialization process, academic, social, and personal, are impacted by the student's academic, social-psychological, and environment and are expected to influence dropout syndrome. From "A Comprehensive Review of The Major Studies and Theoretical Models of Student Retention in Higher Education," by O. Aljohani, 2016, *Higher Education Studies, 6*(2), 1-18. (https://doi.org/10.5539/hes.v6n2p1).

In 1982 Bean revised the Student Attrition Model by incorporating ideas from other theoretical studies, such as the Importance of Intension of Influencing Behavior (Fishbein & Ajzen, 1975, 2010) and the Student-Faculty Informal Contact Model (Pascarella & Terenzini, 1980). Fishbein and Ajzen's (1975, 2010) work on human social behavior proposed that an individual's actual behavior is a function of their intention, determined by their attitude to the behavior, perception of their control of the behavior, and their belief about the expectations of others, such as social normative beliefs (Gold, 2011). The relation between a student's intentions

and behavior is instrumental in the decision to stay engaged and enrolled in college and may decrease the possibility of departure from the institution of higher learning (Burke, 2019). Reinforcing Fishbein and Ajzen's model, Bean's research (1980, 1982) showed that a student's intent to leave the institution had been the best predictor of attrition (Bean, 1982). Pascarella and Terenzini (1977) posed that, especially during the first year of the college student's experience, positive informal student-faculty interaction may increase the student's level of commitment to the institution and effectively decrease the risk of withdrawal consequently increasing student retention.

The Student Attrition Model (Bean, 1982) states that persistence is predicted by behavioral intentions, which are similar to the motivations that cause unsatisfied employees to depart from the workplace (Cabrera et al., 1992). This model focuses on variables associated with and that impact an individual's behavior and intent (background, organizational, environmental and attitudinal, and outcome). These variables are consistent with the counseling service's consideration in providing holistic therapeutic interventions (Bean, 1982). This model is significant to the study of the effectiveness of counseling services offered by the community college in that the links between the variables of the model are more inclusive and consistent with the experiences of a more significant diverse general student population such as nontraditional students, commuters, adult learners, and students with college experience (Manyanga et al., 2017). The impact of counseling interventions provided to college students as measured by their academic performance and persistence can reflect the effectiveness of influence on behavior and intent.

Psychological Model of Student Departure

Historically, college student retention or the reason students leave college has been

explained by researchers based upon sociological theories. Psychological theories and processes can also play a role in the student departure decision: "Leaving college is a behavior, and that behavior is psychologically motivated" (Braxton, 2020, p. 49). Bean and Eaton (2002) believe that individual factors affect retention, and the ultimate retention decision is an individual one based upon psychological processes. The choices and decisions an individual makes about attending a college or university are personal; the same is true about the decision to remain or withdraw from college. Studies have attempted to examine and predict college and university retention and what institutional policies, practices, and programs can be developed or improved to attract and retain students (Braxton, 2020). Bean and Eaton (2002) argue that the decision to remain or leave a college or university program is the individual's decision arrived at through their psychological processes, namely self-assessments. Through self-assessments, the student connects personal experiences with the college or university to how they feel about the institution (Bean & Eaton, 2002).

Bean and Eaton developed the Psychological Model of Student Departure, a retention model used to describe the psychological processes students engage in when integrating academically and socially with their college and university environment, as illustrated in Figure 4 (Braxton, 2020). The model is based upon the belief that individuals enter college with three important psychological factors (self-efficacy assessments, normative beliefs, and past behaviors) that have been shaped by an individual's life experiences, capabilities, and evaluation of oneself (Bean & Eaton, 2002). Students interact with the college environment administratively, academically, and socially while continuing to interact with external environments. As these interactions with the college and external environment take place, self-assessments are being made by the student using several psychological processes. The results of

these assessments influence the level of the connection made with the institution, academic and

social integration, and overall emotional reaction to the college environment, which affects the

development of adaptive strategies (Bean & Eaton, 2002).

Figure 4

Psychological Model of Student Departure
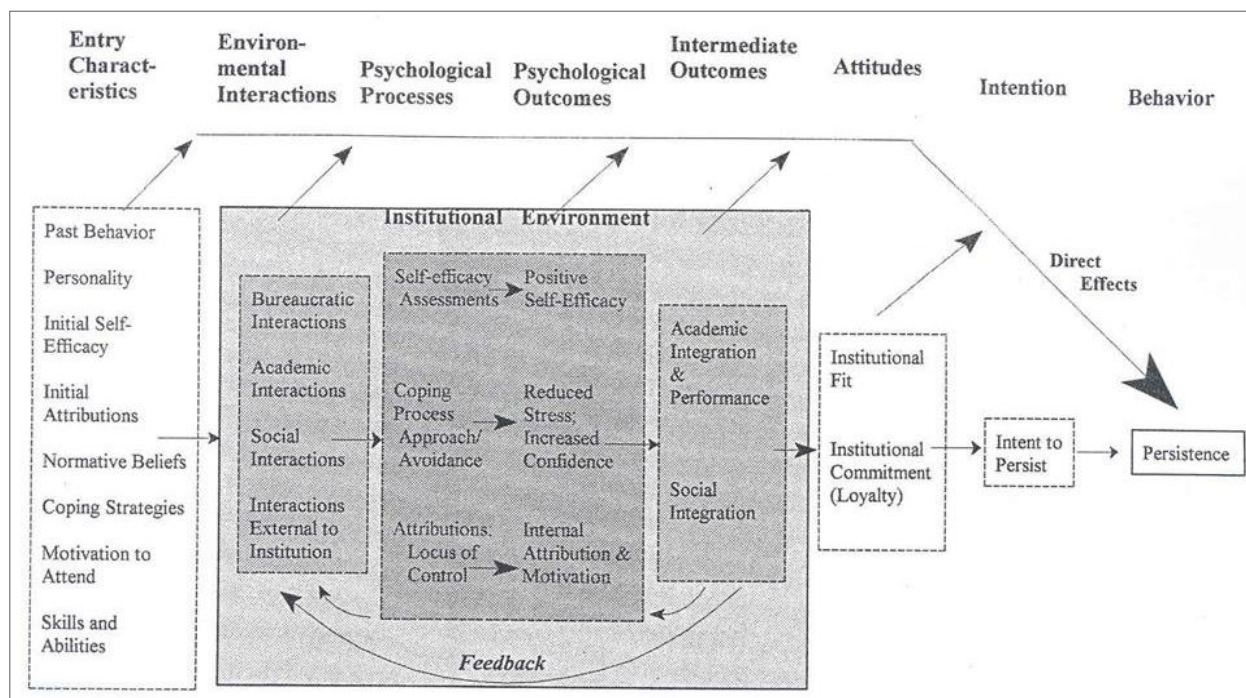
Note: This model proposed by Bean and Eaton (2002) summarizes the psychological processes

contributing to academic and social integration. From "The Psychology Underlying Successful

Retention Practices," by J. P. Bean and S. B. Eaton, 2002, *Journal of College Student Retention:*

Research, Theory & Practice, 3(1), 73-89.

(http://ezproxy.liberty.edu/login?qurl=https%3A%2F%2Fwww.proquest.com%2Fscholarly-

journals%2Fpsychology-underlying-successful-retention%2Fdocview%2F196710259%2Fse-

2%3Faccountid%3D12085).

Bean and Eaton (2002) believe that "the processes described in the model operate

regardless of gender, ethnicity, or age" (p. 75). The development of the psychological model of

student departure applied aspects of four existing psychological theories: attitude-behavior theory (the structure of the model), coping behavioral (approach-avoidance) theory, self-efficacy, and attribution (locus of control) theory to set the groundwork that examined student behaviors leading to academic and social integration and help explain the student departure decision. The intent of synthesizing these psychological theories was to develop a heuristic psychological model of student retention (Braxton, 2020).

Attitude-behavior Theory

The overall structure of Bean and Eaton's (2002) psychological model is based upon the work of Fishbein and Ajzen (1975) in their proposed attitude-behavior theory linking beliefs, attitudes, intentions, and behavior (Braxton, 2020). According to Fishbein and Ajzen's (1975) attitude-behavior theory, an individual's behavior is the result of their intention to perform the behavior, which is linked to their attitude toward the behavior that is based upon the consequences they believe will result from the behavior (Braxton, 2020). In other words, an individual's attitudes lead to intentions that result in behaviors (Bean & Eaton, 2002). College student attitudes resulting from past behaviors, norms, and beliefs lead to choices that have an impact on how they interact with and fit into the institutional environment. Therefore, academic integration or persistence behavior is more likely for students who develop an attitude that they fit or are committed to the educational environment of their institution. The best predictor of actual student departure was the student's intention to leave college (Braxton, 2020).

Coping Behavioral (Approach/Avoidance) Theory

According to Bean and Eaton (2002), coping behavioral theory proposes that an individual adjusts to new stressful situations after self-assessments, assessing the environment, and then adapting to the new environment. The adjustment made by individuals is similar to the

integration in Tinto's (1975, 1993) model of institutional departure, and the process that an individual undertakes to integrate into the new college environment is considered how they have adapted (Braxton, 2020).

Stress is an everyday occurrence that is considered a normal physiological or psychological response to internal or external situations (stressors) that are perceived as being more significant than an individual can deal with (Jacobs, 2016; Schupp, 2015). Stress triggers coping mechanisms within the individual to deal with the stressful situation, and these responses can consist of wide-ranging adaptive behaviors (Braxton, 2020). Stress has been associated with causing disease and illness; any college student may experience anxiety and mood alteration periods brought on by stress. Early intervention to reduce stress by developing coping skills for short- and long-term adaptive functioning can increase the potential for positive outcomes and reduce the possibility for stress-related issues to worsen, such as becoming psychological disorders (Barr, 2014; Jacobs, 2016; Levers, 2012; Schupp, 2015).

The behavioral choices made in response to a stress-related environment or situation to adapt and reduce or overcome the associated stress are coping behaviors (Braxton, 2020; Eaton & Bean, 1995). The coping behaviors that an individual employs to handle stressful situations are approach and avoidance. Approach behaviors are active responses, and avoidance behaviors are considered passive ones. With an approach behavioral response, the individual will be focused and aggressive in their response to reduce or overcome the stressor. Avoidance behavioral responses involve actions to avert a stressful situation or environment (Braxton, 2020; Eaton & Bean, 1995).

Empirical research has found an association between coping behaviors and academic and social integration. Academic and social approach behaviors were found to have a positive

relationship with academic and social integration, respectively, whereas academic and social

avoidance behaviors were found to have a negative association with academic and social

integration, respectively (Braxton, 2020; Eaton & Bean, 1995). Bean and Eaton (2002) argue that

academic and social integration is partly a result of students' developing coping strategies to

adapt to the institutional environment.

Self-efficacy Theory

Albert Bandura, a Canadian-American psychologist, and professor at Stanford University

introduced the construct of self-efficacy theory in 1977. Bandura (1977) argued that when an

individual is faced with a challenging situation, they conduct cognitive self-assessment of their

coping skills to deal with the situation. The results of these assessments impact their level of

behavioral response, responding in fear and avoiding situations that they believe will overwhelm

their coping skills, and being motivated and confident in situations they believe they are capable

of handling with a successful outcome. Self-efficacy is the individual's belief in their perception,

of their ability to execute necessary behaviors to produce specific outcomes and their belief in

their ability to succeed (Bandura, 1977; Bean & Eaton, 2002).

The theory posits that past experiences and observations provide the basis for individuals

to develop perceptions about their competence to execute a specific task or plan of action in a

particular situation (Braxton, 2020). However, effectiveness in one area does not necessarily

transfer over to another, as self-efficacy is task-specific (Bean & Eaton, 2002). Individuals gain

self-confidence from their belief in competence, which can develop higher levels of persistence

and goals for task achievement. Bean and Eaton (2002) argue that "as academic and social self-

efficacy increase, academic and social integration also increase" (p. 77).

Attribution (Locus of Control) Theory

The last of the psychological theories integrated into Bean and Eaton's (2002) Psychological Model of Student Departure is Weiner's (1985) Motivational Theory of Attribution and, in particular, one of the significant aspects of the theory, Rotter's (1966) locus of control. The principle of locus of control is based on the individual's perspective of internal or external forces' causal relationship with previous outcomes and experiences (Braxton, 2020). Individuals with an internal locus of control believe that their successes and failures are based upon their internal personal skills and attributes; they are primarily responsible for their outcomes. In contrast, individuals with an external locus of control assign the primary responsibility for their successes and failures to external factors out of their control, such as fate or chance (Bean & Eaton, 2002). College students with an internal locus of control will be motivated to study and attend class to achieve academic success. Whereas, college students with an external locus of control may not have the same motivation as they perceive their success to be based on luck or preferential treatment of instructors (Braxton, 2020). Bean and Eaton (2002) argue that students' efforts with an internal locus of control will lead to academic and social integration.

Bean and Eaton (2002) believe there is no single approach to developing individual psychological growth. It is essential to understand the psychological processes that contribute to academic and social integration so that institutional programs can be developed with this knowledge to promote increased student persistence and positive academic outcomes.

Therefore, college mental health programs should be considered and developed as an integral part of the institution's strategy and goals for retention and academic outcomes (Manyanga et al., 2017). College mental health programs must be mindful of the potential impacts that counseling interventions focused on nontraditional retention psychological factors

have on academic and social integration as they help college students with emotional distress, develop coping skills and positive self-efficacy, and promote changes in attitude and behavior.

<div align="center">**Related Literature**</div>

College Mental Health Crisis

The increase in the prevalence of mental health issues among college students is not new. It is an issue that has been thoroughly studied over the past few decades and has well-documented findings. Studies have shown that the number of college students who present with psychological and or psychosocial issues has been increasing since the late 1980s (Gallagher, 2012; Sharkin & Coulter, 2005). The Center for Collegiate Mental Health (CCMH) 2021 annual report stated that between the Fall of 2009 and the Spring of 2015, the demand for college mental health services increased by an average of 30-40%. This increase is more than five times the growth rate of college enrollment at 5% during the same period (CCMH, 2022).

Additionally, the lifetime history of counseling continues to increase as approximately 60% of college students seeking services report having received prior mental health treatment; in 2012-2013, this number was less than 48% (CCMH, 2021). Not only has the rate of college students seeking mental health services increased but so has the severity of presenting concerns of college students (Auerbach et al., 2018; Grøtan et al., 2019; Francis & Horn, 2017; Lipson et al., 2019; Xiao et al., 2017). Xiao et al. (2017) suggest that there is evidence indicating that over the previous two decades, the complexity and severity of presenting concerns of college students have increased. Of the 275 college counseling directors surveyed in the 2014 National Survey of College Counseling Centers, 94% reported that the increased demands for mental health services on campuses are being driven by growing trends in students presenting with severe psychological problems (Gallagher, 2015). Lipson et al. (2019) conducted the first study

analyzing the national trends of mental health utilization by college students over 10 years. The study, Increased Rates of Mental Health Service Utilization by U.S. College Students: 10-Year Population-Level Trends (2007-2017) reviewed archival data from the Healthy Minds Study (HMS). This annual web-based survey consisted of over 150,000 college students from 196 campuses across the United States. The study concluded that the trend for the utilization rate of college students' mental health services has increased over the 10 years of the study, the prevalence of mental health conditions had also increased, and the perceived and personal stigma associated with acquiring mental health services had decreased over the study period (Lipson et al., 2019). Across all measures of mental health services, the utilization rate had increased significantly, almost doubling, from 19% in 2007 to 34% in 2017, and the proportion of college students presenting with a mental health diagnosis increased to 36% in 2017, up from 22% in 2007 (Lipson et al., 2019). Another study focused on the trends in college student mental health diagnosis, and utilization of services between 2009 and 2015 reported consistent results of significant increases in diagnosis and treatment of several mental health conditions, in particular depression and anxiety, increased utilization of mental health services, and that college students are more willing to seek mental health services (Oswalt et al., 2020).

According to the CCMH report for 2020, the most commonly reported presenting mental health concerns for college students are anxiety, depression, and stress. The 12-month prevalence of generalized anxiety disorder and major depressive disorder for adults in the United States is approximately 2.9% and 7%, respectively; females are twice as likely to experience generalized anxiety disorder than men and have 1.5 to 3 times higher rates of major depressive disorder beginning at an early age (American Psychiatric Association [APA], 2013).

College students comprise a subset of the general population that is reported as being

particularly vulnerable to mental health issues, and the prevalence is greater amongst college

freshmen (Bruffaerts et al., 2018; Fruehwirth et al., 2021; Son et al., 2020). The ACHA-NCHA

conducts surveys of college students nationally and reports on factors that contribute negatively

to students' academic performance and the percentage of students affected by those factors. In

2012 the survey reported the significant factors affecting academic performance as identified by

college students were stress affecting 29% of students, anxiety affecting 20% of students,

depression affecting 12% of students, and six percent of students identifying alcohol/drug use

(Barr, 2014). These impediments to academic performance had increased from 2012 to 2020,

affecting a more significant number of college students; stress was reported as impacting 43.4%

of students, anxiety impacted 34.9%, depression rose to 25.4%, and alcohol/drug use had a slight

increase to 7.2% (ACHA-NCHA, 2021).

The global COVID-19 pandemic also contributed to a rise in mental health stressors for

college students as they were faced with unforeseen challenges as colleges and universities

moved from an in-person, in-resident learning and services environment to a 100% online virtual

learning and support services environment (Hamza et al., 2021). Chirikov et al. (2020) reported

that undergraduate college students from nine United States public research universities who had

difficulties adapting to virtual learning also had higher rates of anxiety and depression. One

study identified multiple stressors associated with increased stress, anxiety, and depressive

thoughts in college students (Son et al., 2020). The same study reported the increase in stress and

anxiety due to the COVID-19 pandemic had impacted 71% of the college students surveyed at a

large university in Texas (Son et al., 2020). Huckins et al. (2020) observed significant mental

health and behavioral impacts from the COVID-19 pandemic during the Winter 2020 academic

term with increases in anxiety, depression, and sedentary time of college students compared to

prior academic terms. Another study found that amongst first-year college students, the prevalence of moderate to severe anxiety had increased 39.8% from 18.1% before the pandemic to 25.3% four months into the pandemic, and moderate to severe depression increased 47.9% to 31.7% from 21.5% (Fruehwirth et al., 2021). Interestingly, the study also reported that the increases in anxiety and depression amongst first-year college students were not attributed to the increasing trends of typical stressors for incoming first-year students before the pandemic. Instead, the difficulties created by the pandemic of social isolation and distance learning were considered substantial contributors to the increased anxiety and depression symptoms among first-year college students (Fruehwirth et al., 2021).

Studies agree that the prevalence of college students presenting with mental health issues is increasing, that the presenting mental health concerns are growing in severity, and that there is an increased utilization of college mental health services (CCMH, 2022; Francis & Horn, 2017; Gallagher, 2015; Lipson et al., 2019; Oswalt et al., 2020; Xiao et al., 2017). Some studies suggest that the increases in the prevalence of college student mental health issues may be explained by the decreasing negative stigma associated with obtaining help for mental health issues and not all attributed to an increase in the number of mental health cases (Lipson et al., 2019; Shapiro et al., 2019). Whatever the contributing factors are to the college student mental health crisis, which has only been exacerbated by the COVID-19 pandemic (Browning et al., 2021; Hamza et al., 2021; Son et al., 2020), college mental health services programs are faced with challenges in meeting the growing demands for mental healthcare and changing mental health needs of college students (Sapadin & Hollander, 2021).

Starting in the spring of 2020, the American Council on Educators (ACE) surveyed college and university presidents on COVID-19. After five consecutive surveys, the most

pressing issue due to COVID-19 reported by college and university presidents was the mental

health of their students. Of the 244 presidents surveyed in 2021, almost three-quarters, or 73%,

listed student mental health as their top concern (Taylor et al., 2021); this percentage had

increased from the original survey in April 2020, where less than half of 41% listed mental

health of students as their number one issue (Turk et al., 2020). This increase in such a short

period illustrates the urgency to address this growing college student mental health crisis among

college and university presidents. College and university administrators are challenged to focus

on these essential issues of the upward trending college student mental health needs and the

growing demands on their institutions to provide mental health services programs with

interventions that address the changing mental health needs of today's college students to

decrease the psychological and or psychosocial factors which may harm academic performance

and persistence.

Psychological and or Psychosocial Impact on Academic Performance and Persistence

College student mental health issues continue to be a cause for concern for institutional

leaders in light of the negative impact they may have on academic outcomes and overall well-

being (Oswalt et al., 2020; Salzer, 2012; Schwitzer et al., 2018). An individual's mental health is

vital to overall health, well-being, and functioning. Academic performance and persistence can

be hindered by psychological and or psychosocial distress among college students (Duffy et al.,

2020; Kivlighan et al., 2021). Gamache (2019) argues that the effects of college student mental

health issues can be broad, negatively affecting motivation, class attendance, and persistence

while also contributing to increased stress and social isolation. According to Son et al. (2020),

"mental health is the leading impediment to academic success" (p. 01). They argue that critical

factors for success such as motivation, concentration, and social interaction are negatively

affected by a college student's mental health issues. These factors have been identified as impacting college students' retention and academic success.

Studies have found that first-year college students may experience more significant difficulties as they transition into college. Although college can be a stressful experience for most students, this is especially true for first-year students as they learn to engage, navigate, and adjust to a new living and academic environment (Lee et al., 2009). Sun et al. (2016) found that some college freshmen can develop intense homesick distress as they struggle with Van Gennep's first rite of passage, "separation." Counseling services can help first-year college students transition to college, developing a sense of belonging.

In addition, for first-year students who are entering college directly out of high school, this transitional, stressful period coincides with a developmental period of accelerated growth of the brain, which can impact the development of mental health issues (Chung & Hudziak, 2017; Duffy et al., 2020). Chung and Hudziak (2017) refer to brain development during this epoch as the transitional age brain (TAB). This adolescent and early adulthood period is marked as one with increased risk-taking and difficulty in controlling emotions and behaviors, creating an environment of vulnerability. The development of mental illness is prevalent during this transitional age brain period.

Another study found a negative association between academic functioning and first-year college students with internal or external mental health issues; on average, a 2.9% to 4.7% decrease in academic year performance was observed compared to freshmen without mental health issues (Yoon & Yang, 2017). Bruffaerts et al. (2018) also found that first-year college students who presented with internalized or externalized mental health problems were negatively associated with significantly lower academic functioning. Approximately one in three freshmen

reported having mental health issues in the previous year of the study.

Auerbach et al. (2016) found that one in five college students worldwide had struggled with one or more mental health issues before the COVID-19 pandemic. The psychological and or psychosocial effects of COVID-19 can exacerbate this college mental health crisis (Zhai & Du, 2020). According to Son et al. (2020), new stressors are created or accentuated by the prevalence of pandemics. College students are facing unprecedented stress and dealing with various challenges due to the COVID-19 pandemic, which can lead to a wide range of psychological and or psychosocial consequences (Liu et al., 2020). These COVID-19 stressors of social isolation, academic uncertainty, and future careers have significantly impacted college students due to their uncertainty (Browning et al., 2021).

Current research supports the notion that psychological and or psychosocial issues harm academic performance and persistence. However, most of the available research focuses on a particular type of student, such as high-risk (Bishop, 2016) or first-year students (Bruffaerts et al., 2018; Duffy et al., 2020; Lee et al., 2009; Sun et al., 2016; Yoon & Yang, 2017). Traditional assumptions concerning research on college students are that the traditional student is between 18 and 24 years old and is attending a four-year university in residence (Gulley, 2021). Literature is less prevalent regarding the impact of mental health issues on academic performance and persistence for college students classified as nontraditional, ages 25 and older, many of whom are attending two-year community colleges out of residence (Gulley, 2021).

Gamache et al. (2019) found that two-year community college students' issues or concerns tend to be at an increased level of distress compared to general four-year university students. This is believed to be due to some of the challenges faced by the community college student that is not as prevalent amongst four-year university students, such as they tend to be

nontraditional students working full time, may have parental responsibility, may live at home with their parents and siblings, or be experiencing financial insecurity. One study found that the prevalence of mental health problems is greater in institutions with large enrollments, public institutions, and nonresidential institutions (Lipson et al., 2015).

The current study addresses these gaps in research by including a diverse group of students varying in age and level of college experience. Additionally, the study focused on a two-year public community college with a large enrollment and multiple campuses in multiple cities, which collectively comprise the community colleges' mental health program.

Counseling Services Impact on Academic Performance and Persistence

Mental health counseling services give college students access to support interventions and resources to address their distress symptoms and psychological issues. According to Biasi et al. (2017), mental health counseling can be beneficial to college students by helping them to develop the necessary coping skills and build resilience to address their psychological or personal distress. Improvements in both personal and academic functioning were observed in college students after receiving counseling services (Choi et al., 2010; Francis & Horn, 2017). Research has shown that college students experiencing psychological stress such as depression or anxiety who received counseling found that it is effective and that there was an improvement in their symptoms (Biasi et al., 2017). Does this reduction in psychological or personal distress translate into improvements in academic performance and increased persistence? According to the literature, there are varying theoretical frameworks and research available that provide evidence to support the notion that academic performance is improved and persistence is increased through effective mental health counseling.

A review of the literature examined the effects of college counseling services on

psychological distress and the impact on college students' persistence and academic

performance. By diminishing and assisting college students in developing coping skills through

counseling interventions, academic performance, persistence, and retention should increase. The

literature review revealed favorable counseling outcomes; college students who received

counseling services experienced a decrease in psychological stress and improved academic

performance (Bani et al., 2020; Biasi et al., 2017; Choi et al., 2010; Francis & Horn, 2017;

Renuka Devi et al., 2013; Schwitzer et al., 2018; Turner & Berry, 2000).

In a previous study, Wilson et al. (1997) measured the effects of counseling on academic

outcomes, and although results demonstrate that receiving psychological counseling can impact

academic success, there was a limitation of pretreatment data to control differences in

participants' academic ability. Schwitzer et al. (2018) believed previous studies had narrowly

focused populations and that academic counseling outcomes could not be generalized for

personal emotional counseling with the general student population. They wanted to investigate

the relationship between counseling and academic outcomes as measured by GPA and

graduation rate for the general student client population. Overall findings were that student

academic success benefitted from participating in counseling. Those who participated and

remained in counseling had slight increases in GPA over students who did not complete

counseling services or were referred to off-campus counseling. In a more recent study, after

examining the association between students' psychosocial functioning and academic

achievement, it was found that counseling services positively affected students' academic

success (Kivlighan et al., 2021). Likewise, counseling services were effective in reducing student

distress resulting in personal confidence and increased academic performance (Francis & Horn,

2017; Renuka Devi et al., 2013).

On the contrary, one study found that counseling experiences were associated with increased retention; however, they were not related to academic performance when controlling for precollege academic performance. Counseling services provided to first-year and transfer students focused on emotional, social, and psychological concerns were positively associated with increased retention (Lee et al., 2009). Scofield et al. (2017) recognized that there is ample research investigating the impact of counseling center services on academic performance and retention. However, available research on the effects of counseling center services on degree completion is limited. Therefore, they conducted a study to explore the relationships between counseling center services and long-term academic outcomes such as degree completion.

Concerning academic results, the findings were consistent with previous studies that undergraduate college students who received counseling services had increased retention and persistence rates. However, the study also found that students who used counseling services and presented with more chronic and severe mental health concerns had lower graduation rates than those who did not. In his study on the relationship between retention and college counseling, Bishop (2016) examined and provided evidence on the impact between counseling services and retention at four-year institutions for high-risk students compared to low-risk students. He found a significant difference in the retention rates between high-risk and low-risk student populations that take advantage of college counseling services. Although both groups may engage in counseling, the research showed that low-risk students tend to stay in college. This may be because there are other factors involved, such as a student having a diagnosed mental illness, coming from low socioeconomic status, or being a first-generation college student. Another contributing factor may be to what degree counselors at college counseling centers are trained and equipped to diagnose and provide interventions for severe mental disorders. However, these

questions are outside the scope of the present study.

Studies have found that students who received college counseling services experienced positive emotional and social development outcomes improving health and well-being and associated with improvements in academic performance or increases in persistence (Bani et al., 2020; Biasi et al., 2017; Choi et al., 2010; Francis & Horn, 2017; Illovsky, 1997; Kivlighan et al., 2021; Lee et al., 2009; Lockard et al., 2012; Renuka Devi et al., 2013; Schwitzer et al., 2018; Scofield et al., 2017; Sharkin, 2004; Turner & Berry, 2000; Wilson et al., 1997). It is believed that mental health services programs are high impact practices at colleges and universities; they keep college students engaged and assist in retention (Association for University and College Counseling Center Directors [AUCCCD], 2020). The 2020 AUCCCD Annual Survey reported that 67.9% of college students who received counseling services stated it helped with their academic performance, and 58.4% stated counseling services enabled them to continue in school, positively impacting their retention.

Several studies have found that the number of counseling sessions correlates positively with academic outcomes (Ghosh et al., 2018; Renuka Devi et al., 2013; Schwitzer et al., 2018; Wilson et al., 1997). One study found that reliable changes occurred between sessions three and six (Ghosh et al., 2018). The Southern Community College has a limit of seven sessions with the option of extending if additional sessions are deemed necessary. Therefore, the sample population was categorized into two groups defining those students who have received and completed counseling sessions; the first group consists of the records of students who completed at least four counseling sessions (one intake session and three personal counseling sessions), the second group is defined by students who received or completed counseling sessions for those who completed up to six counseling sessions and those who completed between seven and ten

counseling sessions. Student records with less than four counseling sessions in the first group

and those with only one session in the second group were categorized as students who requested

but did not receive or complete enough personal counseling sessions.

An important consideration is the impact of college counseling services on students who

present with more chronic and severe mental health issues. Therefore, it is essential to determine

the effectiveness of college mental health programs, especially at the community college level,

where it is believed that the prevalence of chronic and severe mental health concerns is greater

than at four-year institutions (Gamache et al., 2019). It is important to note that academic

performance and persistence should not be the only means by which the value or success of the

college's counseling center contributions are measured (Popa-Velea et al., 2021; Sharkin, 2004).

College students' overall mental health and well-being still need to be the main priority.

Counseling an Undervalued Resource

The value and contributions of the counseling center at community colleges to the

institution's recruitment, persistence, retention, and risk management strategic plan have often

been overlooked (Bishop, 2010; Francis & Horn, 2017). The growth in the college's budget and

resources do not equal that of the demand for mental health services at these institutions (Shefet,

2018). There has been an increase in mental health services at colleges. However, higher

education stakeholders and administrators look to evidence that counseling services are

providing effective services in addressing the student's mental health needs and concerns along

with facilitating the institutional mission and goals for academic persistence, retention, and

successful completion rate (Shefet, 2018). Several studies in the past decades have shown that

providing mental health services on college campuses has a positive impact on student academic

success or retention (Bani et al., 2020; Biasi et al., 2017; Bishop & Walker, 1990; Choi et al.,

2010; Francis & Horn, 2017; Illovsky, 1997; Kivlighan et al., 2021; Lee et al., 2009; Lockard et al., 2012; Renuka Devi et al., 2013; Schwitzer et al., 2018; Scofield et al., 2017; Sharkin, 2004; Shefet, 2018; Turner & Berry, 2000; Wilson et al., 1997). Counseling center directors are responsible for continuously communicating to the institutional decision-makers, administrators, and stakeholders the valuable contribution of counseling services by describing the scope, quality, and results of services provided to students (Bishop, 2010, 2016).

Over the past several decades, research has shown that the need to provide on-campus mental health counseling services for students is increasing across community colleges and university campuses (Bishop, 2010; CCMH, 2022; Francis & Horn, 2017; Shefet, 2018). Students seek and engage in mental health services at their college counseling center at historically unprecedented numbers (Bundy & Benshoff, 2000; CCMH, 2022; Eisenberg et al., 2016; Prince, 2015). Son et al. (2020) state that there is an urgent need for college and university administrators to address the growing trends and changing mental health needs of college students by implementing appropriate interventions and prevention strategies. Although significant research has supported the importance of mental health services related to student retention at colleges, this factor has not been continuously addressed in the barriers to student retention national dialogue (Eisenberg et al., 2016). To illustrate this point, even though there is an abundance of research stating that for decades the college student mental health crisis has been becoming more prevalent with increases in the severity of presenting mental health issues and increases in utilization of college and university mental health services it was not until recently that college student mental health became a priority for a majority of college and university presidents.

A recent survey of over 400 college and university presidents on the topic of college

student health and well-being found that college student mental health has become more or a

priority for eight out of ten presidents than just three years ago (Chessman & Taylor, 2019).

College and university presidents are just now realizing that mental health services programs, in

addition to helping students with mental health and well-being, are also being recognized for

their contributions to college student retention (Chessman & Taylor, 2019).

Telemental Health

Technology is becoming a more significant part of daily living, impacting everything

from managing daily life, to education, social culture, communications, business, and access to

healthcare. Telemental health (TMH), defined as the remote delivery of mental health services

with a licensed therapist, including diagnosis, assessments, and interventions via digital means

such as computer programs, video conferencing applications, teleconferencing, or smartphone

applications, is not a new phenomenon (Aboujaoude et al., 2015; Hadler et al., 2021). Over the

past decade, advances in technology have enabled mental health therapists to broaden their reach

and availability of mental health services by providing counseling sessions electronically

(Lesser, 2021).

In 2020, the COVID-19 pandemic caused a sudden and rapid shift in the delivery of

mental health services from an in-person model of counseling services to necessitating the

provision of TMH services (Appleton et al., 2021). This abrupt shift from in-person counseling

to TMH therapy profoundly impacted clients and therapists. Many therapists had no training or

certification on confidentiality and safeguards related to privacy in providing TMH services

before the COVID-19 pandemic. Additionally, the therapist and the client may not have been

equipped to provide and participate in remote counseling services due to equipment,

connectivity, and technology skills (Lesser, 2021). Cantor et al. (2021) reported that before the

onset of the COVID-19 pandemic, TMH services were provided by fewer than half of outpatient mental health treatment facilities.

The COVID-19 pandemic was partly responsible for the latest transformation in the history of college counseling. Faced with this unplanned suspension of in-person mental health services, many colleges and university counseling centers were forced to quickly transform their mental health services program to a TMH model to provide continuity of care (Erekson et al., 2021). For Southern Community College, this meant a one-week pause in providing mental health services to their students. Existing students receiving mental health services were either referred to an external community online TMH services or were delayed in scheduling for several weeks while the college developed and implemented its TMH services program. During this pause, the college enrolled all its counselors in the online Board Certified Telemental Health Provider (BC-TMH) program developed by the Center for Credentialing & Education (CCE). Additionally, they established policies and procedures for delivering TMH services and provided the infrastructure to conduct counseling sessions via videoconference. Hadler et al. (2021) suggested that TMH will potentially be a significant part of college mental health services programs. The level of acceptance by college students and the effectiveness or impact on academic outcomes of TMH services provided by Southern Community College remains to be determined.

Telemental Health Perception

A literature review suggests that overall, college students report high levels of satisfaction with TMH counseling services (Hadler et al., 2021). Studies have found that college students view TMH services as acceptable, flexible, convenient, and accessible (Dunbar et al., 2018; Park et al., 2020; Petersen et al., 2020), overcoming structural/logistical barriers (Hadler et

al., 2021; Shea et al., 2019). Not only did college students view TMH favorably due to overcoming structural and logistical barriers they also found that TMH provides a level of anonymity that also overcomes psychological barriers such as the stigma that can be associated with acquiring mental health services, especially amongst minority students who are less likely to seek mental health treatment (Miranda et al., 2015). Even though college students have consistently reported a high level of satisfaction with the TMH counseling services experience, according to Hadler et al. (2021), studies suggest that the preference amongst college students is still in-person mental health counseling services. Reported concerns with TMH counseling services were the lack of personalization which could potentially negatively impact the therapeutic relationship, concerns over privacy/confidentiality, and efficacy (Petersen et al., 2020).

Telemental Health Efficacy

A review of the literature did not produce any studies which focused on the impact of TMH services on college students' persistence or academic performance. After reviewing available literature on the efficacy of TMH services, the consensus is that TMH has been determined to be effective in most circumstances and does provide increased availability of counseling services (Aboujaoude et al., 2015; Barnett et al., 2021; Chokshi et al., 2022; Hilty et al., 2013; Langarizadeh et al., 2017; Lau et al., 2021; Smith et al., 2022; Thomas et al., 2021). Barnett et al. (2021) suggest that TMH is an acceptable form of mental health service delivery and successful in producing desired outcomes. A few TMH studies found that using videoconferencing modalities to deliver cognitive behavioral therapy (CBT) psychological services was consistent with in-person mental health services (Khatri et al., 2014; Stubbings et al., 2013; Thomas et al., 2021).

A literature review found that teletherapy was equally effective in reducing Post-traumatic stress disorder (PTSD) symptoms in veterans. The U.S. Department of Veterans Affairs has found that trials that compared the delivery of videoconference PTSD treatments to in-person interventions found that the modalities were equally effective in reducing PTSD symptoms (Turgoose et al., 2018). However, Smith et al. (2022) question whether the existing findings on the efficacy of video therapy can be generalized due to the limited size and scope of available research. This research analyzed the impacts of TMH services on community college students' persistence and academic performance and compare those results with those of community college students who received in-person mental health services to determine if the outcomes are consistent.

Summary

Colleges and universities are challenged with meeting their educational mission and goals based on academic performance, student persistence, and retention. As college enrollment is down, these goals are more critical. Colleges and universities are focused on investing in student interventions and programs that will yield the greatest return on investment to support their mission and goals.

Three retention models, Spady's (1970) Model of the Dropout Process (MDP), Tinto's (1993) Model of Institutional Departure, and Bean's (1997) Student Attrition Model, based on sociological theories and Bean and Eaton's (2002) Psychological Model of Student Departure, based on psychological processes have provided views on the causes of student departure that can offer colleges and universities frameworks to be utilized in the development of student interventions and programs focused on increasing academic performance, student persistence, and retention. These theories state that certain factors influence college students' decision to drop

out of college. College counseling services can be an intervention that can positively impact college students by circumventing those factors that influence students' decision to drop out of college.

A review of the literature on the effects of mental health issues on academic functioning found that there is a preponderance of research that establishes an association between psychological and or psychosocial problems and negative impacts on academic outcomes such as performance, persistence, and retention. Academic functioning can be significantly impacted by the college student's overall mental health and well-being caused by psychological and or psychosocial distress. A primary concern for colleges and universities is that the prevalence of college students presenting with psychological and or psychosocial issues is increasing, as is the severity of presenting problems. The COVID-19 pandemic has exacerbated an already existing mental health crisis by adding new COVID-19 stressors to an already vulnerable college student population. Due to the significant negative impact of mental health issues on academic functioning, providing college counseling services is a strategic priority for investments at more colleges and universities.

When researching the impacts of college counseling services on academic performance and persistence, the predominant findings in the literature are that college counseling centers are instrumental in developing positive mental, emotional, and social outcomes for college students who receive services. In turn, studies have found that these positive outcomes can lead to improvements in academic performance and increases in persistence and retention (CCMH, 2022; Kivlighan et al., 2021; Scofield et al., 2017). Some studies suggest that college students with more chronic or severe mental health issues may not realize significant improvements in academic performance, persistence, and retention from receiving college counseling services.

The COVID-19 pandemic severely impacted the delivery of services by college and university mental health programs. Many colleges and universities could not provide virtual counseling services. The literature suggests that college students are satisfied with TMH counseling services. Although no studies were found addressing the impacts of TMH counseling services on academic performance and persistence, the general consensus is that TMH is effective. This study evaluated the impacts of TMH counseling services on academic performance and persistence compared to in-person counseling. Understanding the impact of counseling interventions, whether in-person or via TMH, will meet the expectation of providing better services reflected in positive academic outcomes.

Some limitations are that the predominance of research is on traditional college students entering college right out of high school. Most studies focused on first-year students or students at increased risk or with specific mental disorders. The typical age of traditional students studied was 18 and 24 years old. Additionally, the research mainly focused on four-year institutions and students in residence programs. There is very little research on nontraditional students, those over 24 years old, and many attending two-year community colleges. No studies were found consisting of prominent two-year community colleges with enrollments equal to four-year institutions and that offer counseling services on multiple campuses across multiple cities. Because of these research gaps, the findings in most cases could not be generalized to the general college student population.

The current study attempts to address these gaps in research by including a student population that is representative of a diverse group of college students varying in age who have sought counseling services at the community college. In addition to traditional students, the study population will consist of students with college experience or degrees who are seeking

additional degrees, students who are in non-degree certificate programs, and students enrolled in adult education or continuing education programs, all of which have access to counseling services at the community college. This population of college students is a better representation of the general population. Additionally, the study included data from counseling services received from multiple campuses in multiple cities, which together make up the community colleges' mental health services program.

The study's primary objective is to answer the four research questions: (1) Does receiving mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic persistence compared to community college students who requested counseling services but did not receive or complete counseling sessions at the college?; (2) Does receiving in-person mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic persistence compared to community college students receiving telemental health counseling services?; (3) Does receiving mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic performance compared to community college students who requested counseling services but did not receive or complete counseling sessions at the college?; and, (4) Does receiving in-person mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic performance compared to community college students receiving telemental health counseling services?

The alternative hypotheses linked to the research questions are that there would be a significant increase in persistence and improvement in the academic performance of students who received college counseling services when compared to community college students who

registered for but did not receive or complete counseling services at the college and that there

would be a significant increase in persistence and improvement in the academic performance of

students who received in-person mental health counseling services when compared to

community college students receiving TMH counseling services.

CHAPTER THREE: METHODS

Overview

The purpose of this chapter is to introduce the design and methodology that was utilized for this program evaluation. This study was designed to evaluate the impact of the community college's mental health services program on college students' academic outcomes as measured by persistence and academic performance. This chapter will present the research design and rationale, the research questions and hypothesis of the study, information about the criteria and participant records to be selected for the study, the procedures to be utilized, and the data collection methods. A discussion on issues related to internal and external validity will be presented as well as a discussion on any ethical issues of concern.

Design

This study was conducted utilizing quantitative research methods. The specific research design was an archival research program evaluation. The researcher will not generate their own data for this study (Vogt et al., 2012). The archival research design as a quantitative research method is the best approach for this study as secondary data was collected and utilized for data analysis. Consistent with archival research, the data to be collected for this study was generated by others and is maintained as historical database records at the community college. In addition, a key advantage of archival research is the ability to examine data collected over a specific period about an individual (Jones, 2010). This study is particularly interested in determining the impact of receiving counseling services on academic outcomes throughout student college enrollment. According to Vogt et al. (2012), archival designs are appropriate when data archives exist that will effectively answer the research questions without needing to generate new data.

Rossi et al. (2004) define a program evaluation as "the use of social research methods to

systematically investigate the effectiveness of social intervention programs in ways that are adapted to their political and organizational environments and are designed to inform social action to improve social conditions" (p. 28). This study evaluated the effectiveness and contribution of community college counseling services to the college's overall academic and retention goals. A value judgment was made on the overall program effectiveness and not just a presentation of findings.

Research Question(s)

Four proposed research questions are derived from the problem and purpose statements that were addressed from the community college student population records in this archival research program evaluation. They are:

RQ1: Does receiving mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic persistence compared to community college students who requested counseling services but did not receive or complete counseling sessions at the college?

RQ2: Does receiving in-person mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic persistence compared to community college students receiving telemental health counseling services?

RQ3: Does receiving mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic performance compared to community college students who requested counseling services but did not receive or complete counseling sessions at the college?

RQ4: Does receiving in-person mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic performance compared to

community college students receiving telemental health counseling services?

Hypotheses

The alternative hypotheses for this study are:

H$_a$1: There will be a statistically significant increase in persistence rates measured by college admission records between college students who received mental health services and college students who requested but did not receive or complete counseling services at the college.

H$_a$2: There will be a statistically significant increase in persistence rates measured by college admission records between college students who received in-person mental health services and college students who receive telemental health counseling services.

H$_a$3: There will be a statistically significant improvement in academic performance measured by grade point average between college students who received mental health services and college students who requested but did not receive or complete counseling services at the college.

H$_a$4: There will be a statistically significant improvement in academic performance measured by grade point average between college students who received in-person mental health services and college students who received telemental health counseling services.

Participants and Settings

The total number of community college students who requested counseling services between Spring 2019 and Fall 2021 was 1,359 unique individuals. These records were examined to ensure that the student requesting counseling services attended at least the initial intake session to be included in the sample population. Records that were missing data were eliminated as well as the records of students who attended more than 10 sessions. Additionally, the records

of students who did not have a prior semester cumulative GPA were excluded from the study; having a cumulative GPA before requesting counseling services was a prerequisite for inclusion in this study. This resulted in 866 records of which 100 records were randomly selected for inclusion in this study. The records were also identified by the location of services rendered which ensured representation from all eleven counseling centers and distinguished in-person services from TMH services. The TMH services represented 54% of the data records analyzed.

Intake records provided the demographics for the study's sample population. Of the student records, 73% identified as women, and 27% identified as male. Regarding race/ethnicity, 48% identified as White, 30% identified as Hispanic/Latino, 11% identified as Multiracial, six percent identified as Asian American/Asian, and five percent identified as African American/Black. The age distribution consisted of 32% being between the ages of 18 to 21, 44% being between 22 to 29, 16% being between the ages of 30 to 39, and eight percent being 40 and over with the oldest student who requested counseling services being 53 years old. The mean age of students represented was 26.55. Nontraditional students, those students that are 25 years old and older, represented 52% of the data records. Records of students under 18 years of age were not considered for this study. First-time college students consisted of 21% of the sample population, 30% identified as first-generation college students, and 53% identified as being enrolled part-time. Approximately half of the students, or 46%, reported their relationship status as being single. The majority, 60% of the records included in the study, were students who were employed. Interestingly, 54% of the students self-disclosed that they had received professional counseling services in the past. These 100 records were selected to demonstrate an adequate participant sample size for a medium effect size although not a requirement for program evaluation studies.

The setting for this study is archival data collected from the multiple counseling center sites which collectively make up the Southern Community College Mental Health Services program. The site is comprised of three regions—North, Central, and South—that consist of a total of 11 counseling centers providing services to college students located in multiple cities. Each location has one licensed counselor who conducts assessments, provides counseling interventions, and makes referrals to community resources for psychological diagnosis and mental health issues outside the scope of practice of the community college counseling center.

Instrumentation

Instruments will not be used in this program evaluation quantitative study. The study utilized and analyzed the archival data of student mental health and administrative records.

Procedures

Before conducting this study, conditional approval was obtained from the Southern Community College Institutional Research Review Committee (IRRC). A full-time employee was assigned to serve as the liaison to the project and assisted with the review of the proposed research project and the completion of the Application for Review of Research Proposals. The completed application was submitted to the IRRC and the proposal was approved in writing (see Appendix A). The IRRC approval letter and research proposal application were submitted to the Institutional Review Board (IRB) for approval of the study. The IRB approved the study granting permission for the study to commence (see Appendix B). This study obtained archival mental health and student academic records from Southern Community College. Approval to utilize protected mental health archival data and educational data records was obtained from the community college IRRC.

Data collection consisted of examining archival mental health records to identify which

college students requested counseling services between the period Spring of 2019 and the Fall of

2021. Student mental health records were matched with student academic records to collect data

for persistence and cumulative GPA. Persistence was defined as the completion of classes at the

end of the semester that counseling services were requested or completed. Additionally,

persistence was also examined based on the student's re-enrollment in the semester following the

request for or completion of services. The GPA was collected as pre-counseling cumulative GPA

and post-counseling GPA. Pre-counseling cumulative GPA was obtained from the semester

before requesting counseling services and post-counseling cumulative GPA was the GPA at the

end of the semester when the request for counseling services was made or counseling services

were completed. The student identification number was only utilized to collect relevant archival

data across databases. Student confidentiality was maintained by not obtaining any personal

identifying information and replacing the actual student identification number with an unrelated

randomly generated identification number.

To explore different scenarios the participant sample student records were divided into

two counseling services groups based on the number of sessions attended. The first counseling

services group was further divided into two; the community college students who received and

completed a minimum of four counseling sessions and community college students who

requested but did not receive or complete a minimum of four counseling sessions. The group that

received less than four counseling sessions was treated as students who requested but did not

complete counseling services. A minimum of four counseling sessions, one intake appointment,

and three personal counseling sessions are recommended to be considered having received and

completed counseling services. The second counseling services group was divided into three

based on the number of counseling sessions attended: the community college students who only

completed the intake session, community college students who completed up to six sessions, and community college students who completed more than six counseling sessions with the maximum number of sessions attended being 10. The group that only attended the intake session was treated as the students who requested but did not receive counseling services. The intake session is spent on assessment and obtaining historical information about the client's past and present presenting concerns. The groups that attended between two and six counseling sessions and between seven and 10 counseling sessions were established to explore differences based on the number of counseling sessions completed. The community college students from the second counseling services group who had attended two or more counseling sessions were further divided into those who received in-person counseling services and those who received TMH counseling services.

Data Analysis

The IBM SPSS Statistics version 27 tool was utilized to conduct the data analysis for this study. The alpha level for this study was set at $p < .05$. Initially, univariate statistics were calculated for all the study variables. Frequencies and percentages were used to summarize the nominal categorical variables while means and standard deviations were used to summarize the continuous variables. Normality was assessed using the Kolmogorov-Smirnov and Shapiro-Wilk tests. Both tests were used because some of the categories had more than and others had less than 50 student records.

Chi-square and Cramer's V tests were used to examine the persistence of categorical nominal outcome variables (completed the class and reenrolled in class) with the categorical nominal independent variables of the number of counseling sessions in two groupings (1-3 sessions, 4-10 sessions) and three groupings (1 session, 2-6 sessions, 7-10 sessions) and

counseling location (in-person, telemental). The Cramer's V test was included as a measure of the strength of the relationship. The Chi-square test is utilized when comparing different population proportions between two or more groups and to test the statistical significance of the association between two nominal variables (Warner, 2013).

The one-way analysis of variance (ANOVA) and Kruskal-Wallis tests were used to examine academic performance as gains in GPA. The ANOVA is appropriate for comparing the means on a quantitative outcome variable across two or more groups and tends to result in fewer type 1 error (Warner, 2013). The ANOVA analyzed the differences in pre-counseling cumulative GPA and post-counseling GPA or gains in GPA, between community college students who requested and received counseling services (4-10 sessions, 2-6 sessions, 7-10 sessions) and those who requested but did not receive or complete counseling services (1-3 sessions, 1 session) and also used to test for statically significant differences in gains in GPA between students who received in-person counseling services and those who received TMH counseling services. Since non-normality was found for gains in GPA, Kruskal-Wallis tests were used to supplement the one-way ANOVA test analysis.

Internal and External Validity

This archival research program evaluation quantitative study strived to have a moderate level of internal validity. Conducting a quantitative program evaluation study with a research design of archival data has a primary challenge of testing for causal relationships. This is due to the nature of archival research, which relies on secondary data, which can compromise internal validity (Hageman, 2008). The design of this study does not allow for causal effects to be directly observed; they were inferred by analysis of archived data and statistical analysis.

To increase internal validity, some design decisions were made; the first treatment

session, which is an intake session, although counted in the total number of sessions attended by the student will not be counted as a personal counseling session. This will ensure that each record evaluated did meet the minimum requirement of therapeutic interventions. Additionally, a larger sample size consisting of 100 community college student records was utilized to increase internal validity.

According to Hageman (2008), archival research studies tend to have high external validity. The level of external validity for this study is expected to be moderate to high due to the representatives within the sample group. The student records included in this study are diverse across gender, age, race, and college experience and therefore represent the overall college population so that results may be generalized.

Summary

This chapter describes the methods and procedures employed to provide insight into the impact of the Southern Community College's Mental Health Services program on the academic functioning of college students as measured by persistence and academic performance to address the problem of community college's counseling services programs contributions to the institution's overall educational goals. The purpose, research design, research questions, hypotheses, general demographic information, and sample population were presented. Additionally, the chapter discussed the procedures, data collection process, and data analysis of the knowledge attained.

CHAPTER FOUR: FINDINGS

Overview

This study was conducted utilizing quantitative research methods with an archival research program evaluation design. This study aimed to determine the impact of Southern Community College's Mental Health Services program on persistence and academic performance. Data for 100 students were utilized for this study. The chapter begins with descriptive statistics. This is followed by assumption testing. After that, hypothesis testing is presented. Finally, the chapter is summarized.

Descriptive Statistics

Table 1 displays the frequency counts for selected variables. There were more female students in this study (73%) than male students (27%). About half the students (48%) were White with another 30% being Hispanic. Forty-six percent reported being single and 23% reported being in a relationship. Approximately half the students (47%) were full-time students. All (100%) were degree/certificate-seeking with 21% being first-time in college and 30% being first-generation college students. Student data were gathered across three years (2019 to 2021). Fifty-two percent were considered to be nontraditional students (ages 25 to 53). Sixty percent were employed (see Table 1).

Table 1

Frequency Counts for Student Demographics

Variable	Category	*n*	%
Gender	Female	73	73.0
	Male	27	27.0
Race/ethnicity	Hispanic/Latinx	30	30.0
	White	48	48.0
	Multiracial	11	11.0
	Other	11	11.0
Relationship status	In a relationship	23	23.0
	Living together	10	10.0
	Married	12	12.0
	Single	46	46.0
Full-Time Student	No	53	53.0
	Yes	47	47.0
Degree/Certificate Seeking	Yes	100	100.0
First Time in College	No	79	79.0
	Yes	21	21.0
First Generation College Student	No	70	70.0
	Yes	30	30.0
Year	2019	23	23.0
	2020	32	32.0
	2021	45	45.0
Type of student	Traditional (18-24 years old)	48	48.0
	Nontraditional (25-53 years)	52	52.0
Employed	No	40	40.0
	Yes	60	60.0

Note. N = 100.

Table 2 displays the frequency counts for the counseling variables and outcome variables. The number of counseling services was divided into two groups (1-3 sessions and 4-10 sessions) where the one to three sessions category represents students who requested but did not complete at least four counseling sessions and three groups (1 session, 2-6 sessions, and 7-10 sessions) where the one session category represents students who requested but did not receive any personal counseling sessions (intake only). These divisions were made to examine the impacts of the number of counseling sessions on outcome data in multiple ways. Overall, 54% of the students received TMH counseling services. Excluding those who only had the first intake session, TMH services rose to 58.9% of the students. Fifty-four percent reported having had previous counseling. Of the students, 94% completed the class and 74% reenrolled (see Table 2).

Table 2

Frequency Counts for Counseling and Outcome Variables

Variable	Category	n	%
Counseling services in two groups	1-3 sessions	46	46.0
	4-10 sessions	54	54.0
Counseling services in three groups	1 session	22	22.0
	2-6 sessions	57	57.0
	7-10 sessions	21	21.0
Counseling location	Face-to-face	46	46.0
	Telemental	54	54.0
Counseling location [a] ($n = 78$)	Face-to-face	32	41.0
	Telemental	46	58.9
Previous counseling	No	46	46.0
	Yes	54	54.0
Completed class	No	6	6.0
	Yes	94	94.0
Reenrolled	No	26	26.0
	Yes	74	74.0

Note. $N = 100$.
[a]Based on the 78 students who had more than one counseling session.

Table 3 displays the descriptive statistics for selected variables. The mean number of appointments was $M = 4.11$ ($SD = 2.64$) while the mean age was $M = 26.55$ ($SD = 7.72$). The GPA before services was $M = 2.94$ ($SD = 0.83$) and $M = 2.97$ ($SD = 0.73$) after services resulting in a GPA gain of $M = 0.03$ ($SD = 0.39$). See Table 3.

Table 3

Descriptive Statistics for Selected Variables

Variable	*M*	*SD*	Low	High
Number of appointments	4.11	2.64	1.00	10.00
Age at time of services	26.55	7.72	18.00	53.00
GPA before services	2.94	0.83	0.50	4.00
GPA after services	2.97	0.73	0.75	4.00
Gain in GPA	0.03	0.39	-0.87	2.26

Note. N = 100.

Results

Assumption Test

According to Laerd Statistics (2023), there are four assumptions needed for chi-square tests, which include: (1) Two categorical variables, (2) Independence of observations, (3) Cross-sectional/ naturalistic sampling, and (4) All cells have at least five respondents. Assumptions 1 (categorical variables), 2 (independence of observations), and 3 (cross-sectional/naturalistic sampling) were met based on the design of the study. Assumption 4 (five respondents per cell) was violated for Hypotheses 1 and 2 (completed class) because, with the original variable of class completion, 94.0% of the students completed the class. However, given that the sample is large (*N* = 100), the violation was not significant. With that, chi-square tests were used for Hypotheses 1 and 2.

According to Laerd Statistics (2023), six assumptions need to be met for the one-way ANOVA test: (1) Continuous dependent variable, (2) Independent variable has two or more groups, (3) Independence of observations, (4) No significant outliers in any of the groups, (5)

Dependent variable is approximately normally distributed in each group, and (6) Homogeneity of variance. Assumptions 1 (continuous dependent variable), 2 (independent variable with two or more groups), and 3 (independence of observations) were met by the design of the study. Assumption 4 (no outliers) is presented in Figure 5. Inspection of Figure 5 found numerous outliers in the dataset so this assumption was violated.

Figure 5

Boxplots to Identify Outliers
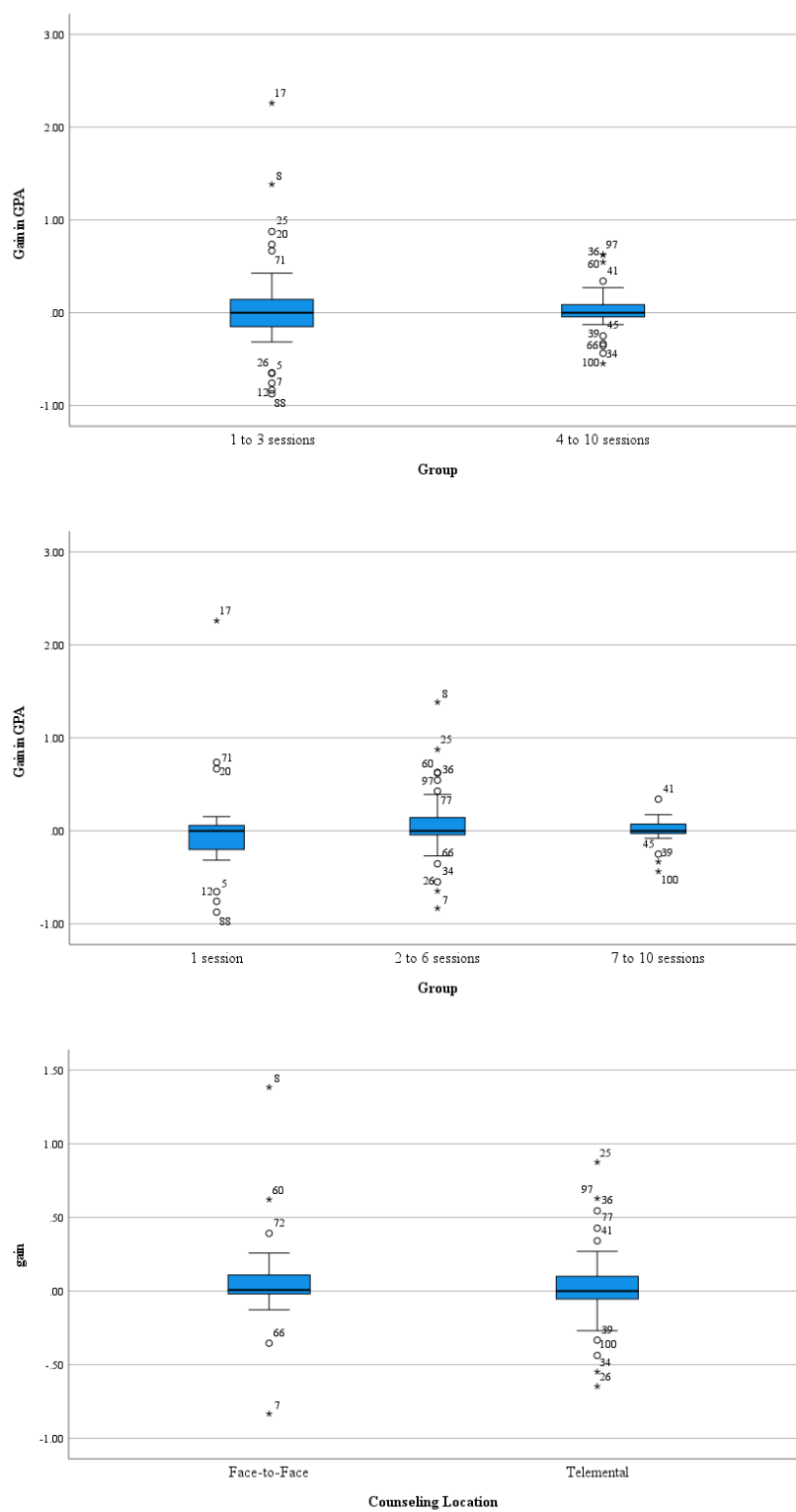
Assumption 5 (normal distribution) is presented and examined in Table 4. Inspection of the table resulted in all the normality statistics being significant, which violated this assumption. Assumption 6 (homogeneity of variance) was examined using Levene's test (see Table 7). Inspection of the table found significant Levene's tests for the two groups of sessions ($p = .005$) and for the three groups of sessions ($p = .045$) but not for the location of counseling ($p = .906$). This combination of findings suggested that one-way ANOVA tests might not be suitable. With that, the one-way ANOVA tests were supplemented with Kruskal-Wallis tests to assist with the verification of the findings.

Table 4

Normality Tests for Gain in GPA Based on Selected Groupings

Variable	Category	Kolmogorov-Smirnov			Shapiro-Wilk		
		Statistic	*df*	*p*	Statistic	*df*	*p*
Services in two groups	1-3 sessions	0.24	46	.001	0.81	46	.001
	4-10 sessions	0.19	54	.001	0.87	54	.001
Services in three groups	1 session	0.28	22	.001	0.76	22	.001
	2-6 sessions	0.20	57	.001	0.83	57	.001
	7-10 sessions	0.22	21	.011	0.90	21	.037
Counseling Location [a]	Face-to-face	0.25	32	.001	0.73	32	.001
	Telemental	0.18	46	.001	0.90	46	.001

Note. $N = 100$.

[a]Based on the 78 students who had more than one counseling session.

Hypotheses

RQ1: Does receiving mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic persistence compared to

community college students who requested counseling services but did not receive or complete

counseling sessions at the college? H_a1: There will be a statistically significant increase in

persistence rates measured by college admission records between college students who received

mental health services and college students who requested but did not receive or complete

counseling services at the college.

For this hypothesis, persistence was measured in two ways: (a) completed the course and

(b) reenrolled. Course completion is presented in Table 5 while re-enrollment is presented in

Table 6. Course completion was not significantly different based on either counseling services

divided into two groups ($p = .3$) or three groups ($p = .33$). See Table 5.

Table 5

Chi-Square Tests for Class Completion Based on Selected Variables

| | | Completed the Class | | | | | | |
| | | No | | Yes | | | | |
Variable	Category	n	%	n	%	V	X^2	p
Services in two groups						.11	1.10	.30
	1-3 sessions	4	8.7	42	91.3			
	4-10 sessions	2	3.7	52	96.3			
Services in three groups						.15	2.20	.33
	1 session	1	4.5	21	95.5			
	2-6 sessions	5	8.8	52	91.2			
	7-10 sessions	0	0.0	21	100.0			
Counseling location ($n = 78$)[a]						.01	0.00	.96
	Face-to-face	2	6.3	30	93.8			
	Telemental	3	6.5	43	93.5			

Note. N=100.
[a]Based on the 78 students who had more than one counseling session.

Re-enrollment was also not significantly related to the number of counseling sessions.

Specifically, course re-enrollment was not significantly different based on either counseling

services divided into two groups ($p = .35$) or three groups ($p = .86$). See Table 6. This

combination of findings failed to reject the null hypothesis.

Table 6

Chi-Square Tests for Class Reenrollment Based on Selected Variables

| | | Reenrolled in class | | | | | | |
| | | No | | Yes | | | | |
Variable	Category	n	%	n	%	V	X^2	p
Services in two groups						.09	.87	.35
	1-3 sessions	14	30.4	32	69.6			
	4-10 sessions	12	22.2	42	77.8			
Services in three groups						.06	0.30	.86
	1 session	5	22.7	17	77.3			
	2-6 sessions	16	28.1	41	71.9			
	7-10 sessions	5	23.8	16	76.2			
Counseling location ($n = 78$)[a]						.04	0.10	.75
	Face-to-face	8	25.0	24	75.0			
	Telemental	13	28.3	33	71.7			

Note. $N = 100$.
[a]Based on the 78 students who had more than one counseling session.

RQ2: Does receiving in-person mental health counseling services for psychological and

or psychosocial issues contribute to a significant increase in academic persistence compared to

community college students receiving telemental health counseling services? H_a2: There will be

a statistically significant increase in persistence rates measured by college admission records

between college students who received in-person mental health services and college students

who receive telemental health counseling services. Course completion was not significantly

different based on the location of the counseling services ($p = .96$). See Table 5. In addition,

course re-enrollment was not related to the counseling location ($p = .75$). See Table 6. This

combination of findings failed to reject the null hypothesis.

RQ3: Does receiving mental health counseling services for psychological and or

psychosocial issues contribute to a significant increase in academic performance compared to

community college students who requested counseling services but did not receive or complete

counseling sessions at the college? H_a3: There was a statistically significant improvement in

academic performance measured by grade point average between college students who received

mental health services and college students who requested but did not receive or complete

counseling services at the college. An increase in academic performance was measured as the

gain in GPA (after minus before). Inspection of Table 7 found no significant differences in GPA

gain based on either counseling services in two groups ([$F = 0.17$, $p = .68$], [$H = 0.03$, $p = .87$])

or three groups ([$F = 0.42$, $p = .79$], [$H = 1.7$, $p = .43$]). See Table 7. This combination of

findings failed to reject the null hypothesis.

Table 7

One-Way ANOVA and Kruskal-Wallis Tests for Gain in GPA Based on Selected Variables

GPA gain	Category	n	M	SD	η	One-way ANOVA F	p	Kruskal-Wallis H	p
Two groups[a]					.04	0.17	.68	0.03	.87
	1-3 sessions	46	0.05	0.53					
	4-10 sessions	54	0.02	0.21					
Three groups[b]					.07	0.42	.79	1.70	.43
	1 session	22	0.02	0.62					
	2-6 sessions	57	0.06	0.33					
	7-10 sessions	21	-0.01	0.17					
Counseling location[c, d]					.08	0.52	.47	1.48	.22
	Face-to-face	32	0.07	0.33					
	Telemental	46	0.02	0.27					

Note. $N = 100$.
[a]Levene's test for homogeneity of variance was significant ($p = .005$).
[b]Levene's test for homogeneity of variance was significant ($p = .045$).
[c]Levene's test for homogeneity of variance was not significant ($p = .906$).
[d]Based on the 78 students who had more than one counsel session.

RQ4: Does receiving in-person mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic performance compared to community college students receiving telemental health counseling services? H_a4: There will be a statistically significant improvement in academic performance measured by GPA between college students who received in-person mental health services and college students who received telemental health counseling services. Table 7 presents no significant differences in GPA gain based on counseling location ([$F = 0.52$, $p = .47$], [$H = 1.48$, $p = .22$]). This combination of findings failed to reject the null hypothesis.

Summary

In summary, this study used archival data from 100 students to determine the impact of Southern Community College's Mental Health Services program on persistence and academic performance. The focus of this study was to address the problem that there is a lack of research on the impacts of mental health services programs, including TMH services, at the community college level.

Hypothesis 1 (academic persistence based on the number of counseling sessions) was not supported (see Tables 5 and 6). Hypothesis 2 (academic persistence based on the location of counseling sessions) was not supported (see Tables 5 and 6). Hypothesis 3 (gain in academic performance based on the number of counseling sessions) was not supported (see Table 7). Hypothesis 4 (gain in academic performance based on the location of counseling sessions) was not supported (see Table 7). In the final chapter, these findings will be compared to the literature, conclusions will be drawn, and a series of recommendations will be suggested.

CHAPTER FIVE: CONCLUSIONS

Overview

This study conducted a program evaluation of the Southern Community College's Mental Health Services on the college student's academic outcomes as measured by persistence and academic performance. The archival data of 100 traditional and nontraditional college students, ages 18 and above were analyzed using quantitative research methods. Specifically, the program evaluation of the Southern Community College sought to determine if persistence or academic performance is impacted differently for students who requested services and received services in contrast to students who requested but did not receive or complete services. In addition, this study also attempted to determine if the format of delivery of service or location (in-person or TMH) had an impact on students' academic outcomes. This chapter provides a discussion of the results, implications, limitations, and recommendations for future research.

Discussion

This study aimed to determine the impact of the Southern Community College Mental Health Services program on academic outcomes, as measured by persistence and academic performance. The need to provide counseling services at the community college is well documented (Becker & Torous, 2019; Dykes-Anderson, 2013; Sontag-Padilla et al., 2016; Xiao et al., 2017) as college students presenting with mental health issues continues to increase (Brunner et al., 2014; Eisenberg et al., 2016; Gamache et al., 2019; Lee et al., 2021). Community college administrators are challenged to provide effective mental health services programs (Bishop, 2010; Rabovsky, 2014), with diminishing financial resources (Bishop, 2010; Rabovsky, 2014; Pavlov & Katsamakas, 2020), that are not only addressing college student's mental health needs but can also be evaluated to demonstrate return on investment (Kivlighan et al., 2021). The

program evaluation conducted for this study focused on analyzing archived academic

performance and persistence records of students who had requested counseling services between

the spring semester of 2019 and the fall semester of 2021. The student population was divided

into groups based on the number of counseling sessions attended which was used to define

whether they had received or completed counseling services or not.

Research Question One

Does receiving mental health counseling services for psychological and or psychosocial

issues contribute to a significant increase in academic persistence compared to community

college students who requested counseling services but did not receive or complete counseling

sessions at the college? The results of this study found that there was not a statistically

significant difference in academic persistence between students who completed counseling

services and students who did not receive or complete counseling services at the community

college. The findings of this study are consistent with the results of a few studies that also

determined there was not a significant difference in the persistence of students receiving

counseling and students who did not receive or complete counseling services (Bishop, 2016;

Schwitzer et al., 2018; Scofield et al., 2017). Bishop (2016) reported that counseling services, in

general, positively impacted academic outcomes; however, the benefits may depend on the

student's risk level. He examined students at a four-year university who received counseling

services and found a significant difference between low-risk and high-risk students. The study

found that low-risk students who received counseling services had higher persistence rates to

graduation than students who received counseling and were categorized as high-risk due to

presenting with chronic or severe mental health issues. These risk factors should be taken into

consideration as a possible explanation for the contradiction in findings of this study with studies

that reported a significant positive relationship between receiving counseling services and persistence at four-year universities, as it is believed that the prevalence of students reporting with chronic and severe mental health issues is greater at the community college (Gamache et al., 2019).

Schwitzer et al. (2018) posit that similar to Bishop's findings receiving counseling services may support short-term academic outcomes; however, after applying pre-counseling covariates to data analysis they found that neither completing counseling services nor the number of counseling sessions were positively associated with persistence to graduation within six years at a four-year institution. The results of this study also did not find any significant difference in the number of counseling sessions attended by community college students. Scofield et al. (2017), consistent with Bishop (2016), suggest that students presenting with chronic and severe mental health issues had lower rates of persistence to graduation over six years and also had greater utilization rates of counseling services. For students who persisted to graduation, there was no significant difference between students who received counseling services and those that did not receive counseling. The results of this study do not support a significant difference in academic outcomes based on the number of counseling sessions utilized. Scofield et al. (2017) did find that for students who did not graduate within six years, students who used counseling services had a greater persistence than students who did not receive counseling. These findings "raise some important questions about the validity of using retention as a proxy for success" (Scofield et al., 2017, p. 465).

Mental health services programs have been considered impactful practices that keep students engaged and therefore assist with retention (AUCCCD, 2020). This belief supports the basic frameworks of theoretical models on student retention (Bean, 1980; Bean & Eaton, 2016;

Spady, 1970; Tinto, 1975, 1993). The result of an annual survey of college counseling center

directors reported that 58.4% stated that receiving counseling services positively impacted

student retention (AUCCCD, 2020). Several studies have been conducted in the past which

concluded that receiving counseling services at university counseling centers had a positive

influence on student retention rates (Boyd et al., 1996; Illovsky, 1997; Lee et al., 2009; Turner &

Berry, 2000; Wilson et al., 1997). Similar to this study, Illovsky (1997) and Lee et al. (2009)

explored the impact of receiving counseling services on both persistence and academic

performance. Interestingly, they had mixed results in that both studies reported a positive

relationship or association between receiving counseling services and persistence and no

relationship or association with academic performance after comparing the data of students who

received counseling services with data from the general student population (Illovsky, 1997; Lee

et al., 2009). Illovsky (1997) reported that 75% of college freshmen who had been counseled

reenrolled in the following semester compared to only 68% of the general student population.

Lee et al. (2009) posit that retention may be a matter of social and psychological adjustments

rather than academic performance and cautioned against interpreting the correlation outcomes of

their study as causal relationships between receiving counseling services and retention.

Unique to the community college environment is its transient nature. Students enroll for a

time and declare to seek a degree, which is a requirement at Southern Community College;

however, after completing a certain amount of credits many students transfer to four-year

universities and do not graduate from the community college. This study only considered

persistence for students who completed courses in the semester they requested or completed

counseling, or who registered in the following semester after requesting or completing

counseling services. Students that transferred out of the community college to a four-year

university after requesting or receiving services were counted as not persisting; however, had this

data been available they would have been considered as persisting and retained. Therefore, the

results of this study can only be interpreted based on the available archived data used in the

study.

Research Question Two

Does receiving in-person mental health counseling services for psychological and or

psychosocial issues contribute to a significant increase in academic persistence compared to

community college students receiving telemental health counseling services? This study did not

find that there was a significant difference in persistence between community college students

who received in-person mental health services compared to those who received TMH services.

Providing TMH services for the Southern Community College was in response to the abrupt

shutdown of in-person counseling services due to the nationwide shutdown brought about by the

COVID-19 pandemic. Before the pandemic, students did not have a choice as only in-person

mental health services were provided. During the pandemic, the opposite was true and they could

only receive TMH services. However, community college students are transient and many

courses are offered and business conducted online, meaning that this college student population

may have been somewhat preconditioned thereby making the transition to receiving mental

health services online more acceptable and having less of a negative impact on academic

outcomes.

Additionally, after the pandemic and return to in-person mental health services Southern

Community College Mental Health Services Program continues to offer TMH services and

students are offered a choice on how they receive counseling services. Therefore, those who

choose to receive TMH services may have preconceived expectations and satisfaction levels with

this service delivery method that positively influence their outcomes. This study on the academic

outcomes of TMH services at the community college may be the first of its kind. A review of

available literature did not find any studies that compared impacts to persistence between

community college students who received in-person counseling services and those who received

TMH services. One recent study found that there was no significant difference in the client

outcomes, distress level, and treatment trajectories, between students receiving TMH services

and students receiving treatment as usual before the COVID-19 pandemic (Erekson et al., 2021).

These findings may serve as a possible explanation for the results of this study that as a treatment

methodology TMH counseling services may be as effective as in-person counseling services and

therefore the results on academic persistence are consistent.

Research Question Three

Does receiving mental health counseling services for psychological and or psychosocial

issues contribute to a significant increase in academic performance compared to community

college students who requested counseling services but did not receive or complete counseling

sessions at the college? The results of this study indicated that student GPA did not increase

significantly for students who completed counseling services compared to students who did not

receive or complete counseling at the community college. This finding is consistent with a few

earlier studies that found that counseling did not have a positive impact on college students'

academic performance (Illovsky 1997; Lee et al., 2009; Scofield et al., 2017). Each of these

studies compared the academic performance of university students who had received counseling

services with the academic performance of the general student population. Because these

populations can differ in many ways it may not be practical to draw conclusions on the impacts

of counseling on academic performance between these two groups. This study took a different

approach and only selected records from the population of community college students who requested counseling services. The objective was to determine the effectiveness of counseling services on the population of students presenting with needing services. This sample population was divided into groups by the number of counseling sessions which defined if they did or did not receive or complete counseling services. These groups were then compared to determine if there were significant differences in their academic performance based on if they received or did not receive or complete counseling services. Scofield et al. (2017) posit that there were no significant differences in GPA between students who received counseling and those who did not regardless of whether they graduated from the university or not. This study did not examine the final cumulative GPA but drew the same conclusion by measuring cumulative GPA in the semester after receiving or not receiving or completing services. Lee et al. (2009) found that after controlling for precollege academic performance, increases in academic performance were not significant for college students receiving counseling. Although this study had similar results, precollege academic performance data was not available or considered for this study due to the varied representation of students in the sample population (traditional students, nontraditional students, students with college experience or degrees, transfer students, degree and certificate-seeking students). Even though some studies have concluded that receiving counseling services was not associated with an increase in academic performance they caution against making claims that college counseling services are not effective or of no value (Illovsky 1997; Lee et al., 2009; Popa-Velea et al., 2021; Sharkin, 2004), this is also true for this study as there is no evidence to suggest the value or contributions of counseling services.

Based on prior research, the prevailing thought is that receiving counseling services decreases psychological and or psychosocial symptoms of distress leading to improvements in

academic performance (Bani et al., 2020; Biasi et al., 2017; Choi et al., 2010; Francis & Horn, 2017; Renuka Devi et al., 2013; Schwitzer et al., 2018; Turner & Berry, 2000). A recent survey of college students reported that 67.9% of the students who had received college counseling services stated that it contributed to improvements in their academic performance (AUCCCD, 2020). Bani et al. (2020) reported that counseling interventions decreased the psychological distress of college students and increased academic self-efficacy; however, academic self-efficacy was determined by a subjective self-report measure from a small subset of students who received counseling services. Bani et al posited that although academic self-efficacy is a moderate predictor of academic success, a direct impact on grades is unlikely and they suggested future quantitative and qualitative studies of academic performance. Their claim was supported by the results of this quantitative study. Kivlighan et al. (2021) suggest that reductions in psychological distress throughout counseling may be beneficial for university students' academic success. Kivlighan et al.'s (2021) study group comprised only university students who were receiving counseling services. Pre-counseling and post-counseling GPAs were compared to assess the effects of improvements in counseling on students' educational success. Although this study had a significant finding on the positive impact of counseling on academic performance, the effect was small and the study did not compare with students who did not receive or complete counseling services. One similar quantitative archival data study utilizing counseling records and academic data from a large metropolitan university found that students who completed counseling sessions had significantly higher cumulative GPAs when compared to students who did not receive or complete counseling (Schwitzer et al., 2018). Schwitzer et al. (2018) also posited that an increase in the number of counseling sessions was associated with increases in academic performance. The two main differences between the current study and

Schwitzer et al.'s (2018) study are that the initial intake session was not counted as having received counseling services in this study and this study was conducted using archived data from a two-year non-residential community college versus a four-year residential university.

Based on the available literature, there was a level of expectation that students who received counseling services would have significant improvements in academic performance over students who requested but did not receive or complete counseling services. The results of this study are contrary to the prevailing research claim that significant improvements in academic performance as measured by GPA may be realized after receiving counseling services at the community college level.

Research Question Four

Does receiving in-person mental health counseling services for psychological and or psychosocial issues contribute to a significant increase in academic performance compared to community college students receiving telemental health counseling services? The findings of this study indicate that the contributions to increases in community college students' academic performance from receiving in-person counseling services do not significantly differ from receiving TMH counseling services. There was no literature found comparing the differences in academic performance between community college students who received in-person counseling services and those who received TMH counseling services. The overall consensus of available research is that psychological and or psychosocial issues can negatively impact a college student's academic performance (Bruffaerts et al., 2018; Duffy et al., 2020; Kivlighan et al., 2021; Lee et al., 2009; Sun et al., 2016; Yoon & Yang, 2017). Likewise, the consistent findings in research are that mental health counseling can reduce college student distress and develop positive clinical outcomes that may lead to improvements in academic performance (CCMH,

2022; Kivlighan et al., 2021; Scofield et al., 2017). An assumption can be made that if college students perceived TMH as an acceptable delivery method for mental health counseling, their overall academic performance would be comparable to college students who received in-person counseling services. Miranda et al. (2017) reported that the overall college student acceptance of receiving TMH counseling services was favorable. Additionally, recent studies have found that in most circumstances TMH counseling services have been found to be an effective delivery method to produce desired clinical outcomes (Barnett et al., 2021; Chokshi et al., 2022; Lau et al., 2021; Smith et al., 2022; Thomas et al., 2021). A few studies found the efficacy of TMH counseling services to be consistent with in-person counseling services (Khatri et al., 2014; Stubbings et al., 2013; Thomas et al., 2021). Although the results of this study have limitations it is not unreasonable to expect that the impact of receiving counseling services on college student academic performance may be consistent whether the counseling services are delivered in-person or via TMH.

Implications

The focus of this study was the unique community college environment which adds to existing research on the impact of counseling services on academic outcomes. Community colleges are not exempt from the increase in the number of college students presenting with psychological and or psychosocial issues (Brunner et al., 2014; Eisenberg et al., 2016; Gamache et al., 2019; Lee et al., 2021) that may put students at a greater risk of adverse academic outcomes (Gallagher, 2015; Katz & Davidson, 2014; Samlan et al., 2021) which has created a growing need for providing counseling services at the community college (Becker & Torous, 2019; Dykes-Anderson, 2013; Sontag-Padilla et al., 2016; Xiao et al., 2017). The findings of this study have several implications for community college administrators as they develop and

implement mental health services programs focused on achieving positive student academic outcomes in support of the institution's educational mission and goals while addressing the growing needs of community college students' mental health issues and well-being. Community college administrators' efforts to improve mental health services are also supported by Biblical scripture that supports the need for counseling to provide for the well-being of others. Such as, "Where there is no counsel, the people fall; But in the multitude of counselors there is safety" (*New International Version*, 1985, Proverbs 11:14).

The study identified that the impact of mental health counseling services on persistence and academic performance did not significantly differ between in-person and TMH delivery methods at the community college. This finding provides community college administrators with insights into additional ways to expand the delivery and reach of mental health services programs. Telemental health can be utilized with greater confidence to increase the accessibility of counseling services. Some studies have found that the negative stigma associated with acquiring mental health services is decreasing (Lipson et al., 2019; Shapiro et al., 2019); however, for some college students this remains a psychological barrier to treatment. Telemental health services may provide a higher degree of privacy and comfort from not having to receive these services in a college campus environment in a counselor's office. Additionally, community colleges with limited physical or fiscal resources may collaborate and establish mental health services agreements with other educational institutions or community resources to provide TMH services for their students.

This program evaluation found that there was not a significant difference in the impact on persistence or academic performance between students who requested and did not complete counseling services and students who requested and did complete counseling services at the

community college. For community college mental health services program administrators the emphasis on accountability and the need for program evaluation remains (Kivlighan et al., 2021; Lee et al., 2009; Schwitzer et al., 2018). Therefore this study may suggest that the academic measures of persistence and academic performance alone, as defined by this study, may not be adequate measures of the contributions of community college mental health services programs as a non-academic approach to improving academic success. Additional assessments and practical evaluations of the impacts on other factors such as psychological factors which have been identified as key contributors to academic and social integration (Bean & Eaton, 2002) should be considered as part of the mental health services program's contributions to the institution's overall strategy and goals for retention and academic success. These factors may be greater contributors to college students' overall mental health and well-being which is one of the main priorities of providing counseling services.

Limitations

The following limitations of this study should be considered for future research. This study is limited by its design as an archival data research program evaluation. Internal validity is threatened because archival data research relies on secondary data not collected by the researcher. Therefore, there is a diminished degree of confidence that the tested causal relationship between receiving and not receiving mental health services on persistence or academic performance is not influenced by other variables or factors as the causal effects were not observed directly and other influencing variables or factors were not controlled for. This study did not control for other factors that might influence persistence and academic performance such as precollege academic performance data or psychological factors identified by Bean and Eaton (2002).

An additional important potential influencing factor on this study's causal relationships is the program's infancy and the counseling staff's experience. The Southern Community College Mental Health Services program is less than five years old. The program was launched in the fall semester of 2018. Before 2018, the community college did not offer mental health services. In addition, the counseling staff's primary role was that of an education counselor and not mental health counselor. This situation was further complicated due to unforeseen factors brought about by the COVID-19 pandemic. There is ample research that illustrates the profound impact that the pandemic had on students' academic outcomes and mental health (Browning et al., 2021; Hamza et al., 2021; Lee et al., 2021; Son et al., 2020). Before March 2020 the Southern Community College only offered in-person counseling. Due to the pandemic, the college embarked on a vigorous push to train and certify all of their clinicians in the delivery of TMH. The college did not resume in-person services until they returned to campus in 2021. In addition, although licensed to practice as clinicians, most counselors did not have prior clinical experience and few had ever conducted TMH counseling, which could have influenced the effectiveness of counseling services delivered.

To increase the internal validity of this study a larger population, consisting of 100 records, was utilized to determine the sample size. These records were randomly selected from the archival academic and mental health data of students who requested and did or did not complete mental health services at the community college. Archival data research studies tend to have higher external validity (Hageman, 2008) which is believed to be the case for this study. To be able to generalize the results of this study the sample population included a student population that is representative of a diverse group of college students varying in enrollment status, gender, age, race, college experience, and employment which is a better representation of the general

population.

Recommendations for Future Research

There is a need for further research on the effectiveness of mental health services programs at the community college level. Community college administrators acknowledge that there is a need to provide mental health services that provide quality counseling services to assist students' academic success and decrease attrition rates (Manyanga et al., 2017). This quantitative research method program evaluation of the Southern Community College Mental Health Services program was limited by the use of available archival data from student academic and mental health records to evaluate the impact of receiving counseling services on students' academic outcomes.

Recommendations for future research on the evaluation of community college mental health services programs could benefit from a mixed methods research design. In addition to including control variables, such as precollege academic performance to increase the internal validity, qualitative data collection and analysis may enhance the findings of this study. Students' narratives of their lived experiences, perception, and feelings on how counseling services impacted their academic success and well-being are important considerations for future research. Research supports that academic performance and persistence are not the only contributing measures of a counseling center's value and success (Popa-Vela et al., 2021; Sharkin, 2004). Bean and Eaton (2002) suggested psychological factors such as past behaviors, coping skills, and motivation shaped by an individual's life experience contribute to college students' persistence and academic performance. These factors should be considered in future research to examine causal relationships between counseling services and academic outcomes. Additionally, this study did not take into account the quality of counseling services provided or

the experience level of clinicians, its focus was on the number of counseling sessions completed. Future studies may add to these findings by evaluating the quality and effectiveness of counseling services being offered by mental health counselors.

Summary

In summary, the purpose of this study was to evaluate the impact of the Southern Community College Mental Health Services program on persistence and academic performance. The problem is that available research on the impacts of mental health services programs, including telemental health services, at the community college level is lacking. The attempt by researchers to document the impact of mental health counseling on persistence and academic performance has resulted in mixed findings. This study will add to the body of research that currently exists based on four-year university counseling centers.

Studies on the impact of college counseling on academic outcomes, including this one, vary based on the parameters of the study. These studies' limitations differ based on sample populations, study design, factors considered, and definition of variables analyzed producing mixed results. Some common areas of agreement amongst available research are that mental health issues negatively impact academic outcomes and even though results may not support improvements in academic outcomes from counseling, college counseling centers do have value in addressing students' distress and well-being. Findings on the impact of mental health services programs on persistence and academic performance at the community college level may be difficult to interpret.

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APPENDIX A: Institutional Research Review Committee

Office of Institutional Research and Analytics

5930 Middle Fiskville Road · Austin, Texas 78752-4390 · Phone 512/223-7036 · Email oieinfo@austincc.edu

Austin Community College
Institutional Research Review Committee
Letter of Agreement

DATE: October 24, 2022

TO: Rosa M. Rodriguez-Alvarez
    Dean of Counseling, North Region
    6101 Highland Campus Dr.,
    Austin, TX 78752

FROM: Jenna Cullinane Hege, Ph.D.

   On behalf of the Institutional Research Review Committee of Austin Community College, I am pleased to inform you that the proposal you submitted, "Evaluating the Impact of the Southern Community College Mental Health Services Program on Persistence and Academic Performance" has been approved.

   If you wish to pursue this proposal, please sign and return this letter to the Office of Institutional Research and Analytics by November 11, 2022. All ACC-based research must be completed within one year of this agreement, unless otherwise stated.

   If you have any questions, please contact us.

Sincerely,

               10/27/22
_____

Jenna Cullinane Hege, Ph.D.   Date
Chair, ACC Institutional Research Review Committee
Vice Chancellor, Office of Institutional Research and Analytics

             1 of 2

Austin Community College
Institutional Research Review Committee
Researcher's Statement Regarding Proposal: Community College Mental Health Services
Program on Persistence and Academic Performance

I have read the Research Review Process and agree to abide by the guidelines specified there.

I understand that my Research Proposal has been approved contingent upon the modifications listed above.

I understand that approval of this project does not imply Austin Community College's endorsement of either the project or it results.

I understand that Austin Community College is not responsible for any debts that I may incur as part of this project nor will it provide consumable resources.

I will provide a copy of the results of this study to the Institutional Research Review Committee of Austin Community College.

November 01, 2022

_____   _____
Rosa M. Rodriguez-Alvarez, Researcher   Date

APPENDIX B: Institution Review Board

[External] IRB-FY22-23-203 - Initial: Initial - Exempt

do-not-reply@cayuse.com <do-not-reply@cayuse.com>
Mon 11/7/2022 2:52 PM
To: Garcia, Mario (Community Care and Counseling) <mgarcia3@liberty.edu>;Rodriguez-Alvarez, Rosa <rrodriguezalvarez@liberty.edu>

[EXTERNAL EMAIL: Do not click any links or open attachments unless you know the sender and trust the content.]

LIBERTY UNIVERSITY.
INSTITUTIONAL REVIEW BOARD

November 7, 2022

Rosa Rodriguez-Alvarez
Mario Garcia

Re: IRB Exemption - IRB-FY22-23-203 EVALUATING THE IMPACT OF THE SOUTHERN COMMUNITY COLLEGE MENTAL HEALTH SERVICES PROGRAM ON PERSISTENCE AND ACADEMIC PERFORMANCE

Dear Rosa Rodriguez-Alvarez, Mario Garcia,

The Liberty University Institutional Review Board (IRB) has reviewed your application in accordance with the Office for Human Research Protections (OHRP) and Food and Drug Administration (FDA) regulations and finds your study to be exempt from further IRB review. This means you may begin your research with the data safeguarding methods mentioned in your approved application, and no further IRB oversight is required.

Your study falls under the following exemption category, which identifies specific situations in which human participants research is exempt from the policy set forth in 45 CFR 46:104(d):

(4) Secondary research for which consent is not required: Secondary research uses of identifiable private information or identifiable biospecimens, if at least one of the following criteria is met:

(ii) Information, which may include information about biospecimens, is recorded by the investigator in such a manner that the identity of the human subjects cannot readily be ascertained directly or through identifiers linked to the subjects, the investigator does not contact the subjects, and the investigator will not re-identify subjects;

Please note that this exemption only applies to your current research application, and any modifications to your protocol must be reported to the Liberty University IRB for verification of continued exemption status. You may report these changes by completing a modification submission through your Cayuse IRB account.

If you have any questions about this exemption or need assistance in determining whether possible modifications to your protocol would change your exemption status, please email us at irb@liberty.edu.

Sincerely,
G. Michele Baker, MA, CIP
Administrative Chair of Institutional Research
Research Ethics Office