COLLEGE COUNSELING & PSYCHOLOGICAL SERVICES KNOWLEDGE BASE:

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COLLEGE STUDENT HEALTH LITERATURE

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Low income and/or first-generation college students have the most to gain from earning a college degree in terms of economic success and upward social mobility. However, low income and/or first-generation college students are less likely to have a college degree by age 25 compared to non-low income students or students who are not first-generation. This could possibly be due to financial strain that may be experienced either directly or indirectly (through perceived stress) by low income and/or first-generation college students. The authors of this study examined the mediating effect of perceived stress on the relationship between financial strain and psychological symptomology and academic and social integration. Mediation analyses revealed that perceived stress increases the negative effects of financial strain on psychological symptomology and on academic and social integration.


College students may experience mental health difficulties due to the significant changes from home expectations to college expectations. Parenting behaviors have been associated with outcomes within the college setting. Authoritative parenting styles have been linked to lower student depression and anxiety and better adjustment to college. Conversely, permissive parenting styles have been related to higher levels of student negative affect. Authors of the current study examined the role of academic entitlement as a mediator of the relationship between permissive parenting and psychological functioning. Academic entitlement is defined at a students’ belief that they are owed more in the academic setting than is proportionate to their effort. Permissive parenting was related to higher levels of academic entitlement and lower well-being, particularly for males. Academic entitlement was associated with greater levels of depressive symptoms. Females with permissive fathers had greater levels of depression while males with permissive mothers had higher levels of depression.


Social connectedness positively affects college student life satisfaction. Social connectedness is defined as feeling a sense of belonging with others. Successful peer relationships and perceived
sense of belonging all play into successful adjustment to college. This study compared the mean levels of social connectedness and life satisfaction and analyzed their relationship. Three groups were created in this study, a not-in-counseling (NIC) sample, an initial counseling session (ICS) sample, and a brief counseling (BC) sample. Results indicated that the NIC group had higher social connectedness and life satisfaction when compared to the ICS group. The BC sample had an increase in social connectedness and life satisfaction.


While some studies have documented impairment in interpersonal functioning for college students with attention-deficit/hyperactivity disorder (ADHD) very little literature exists on romantic relationship functioning. Adults with ADHD who marry have higher rates of divorce and report marital problems and one of the most common reasons for seeking treatment for ADHD. This study examined whether ADHD symptom levels in undergraduates were associated with poorer romantic relationship quality. The study also tested whether emotion regulation difficulties, perceived stress, and hostile relationship conflict mediated the association. For both men and women, participants with ADHD combined type symptoms reported lower relationship satisfaction compared to those without ADHD. The association between ADHD symptom level and relationship satisfaction was only significant for women. In women, ADHD symptom levels were associated with poor relationship quality and higher levels of emotion regulation difficulties, perceived stress, and hostile relationship conflict.


Stress, especially reoccurring stress, may put college students at risk for mental health problems. Often students experience stress in college due to issues such as transition, academic demands, and interpersonal stressors (i.e. having few friends, peer pressure, romantic rejection). How students cope with stress can play a critical role in their success and overall well-being. This study examined associations between interpersonal stress, coping strategies, and symptoms using a control-based model of coping. Hierarchical multiple regression analyses revealed that there were positive associations between interpersonal stress levels and symptoms of depression, anxiety, and somatization. Use of coping strategies to change or adapt to the stressor were associated with fewer symptoms of depression, anxiety, and somatization. Use of coping strategies to avoid or deny the stressor were related to higher levels of depression symptoms but not anxiety or somatization.


Sexual assault (SA) is the most common form of violence on US college campuses. Previous victims of SA have a 2-3-fold risk of being revictimized. The authors of this study examined the
prevalence and correlates of precollege, college-onset, and repeat SA in a sample of 7,603 students. Broad SA was defined as sexual assault and other unwanted or uncomfortable sexual experience. Descriptive statistics and logistic regression analyses revealed that almost one fifth of the sample reported experiencing broad SA. Women reported higher rates than men. About 40% of participants who reported broad SA prior to college were revictimized while enrolled in college. For both men and women, experiencing an interpersonal trauma prior to college was a predictor of broad SA. Social support served as a protective factor for men and women.


It is common for college students to experience adverse life experiences (ALEs) such as the death of a loved one or a romantic break-up. Reactions may vary from stress to depression and anxiety. This study explored the associations among perceived stress, time spent on the Internet, underlying motives for using the Internet, problematic Internet use, and traditional approaches to coping. 267 college seniors participated in this study. Avoidant-emotional coping was positively associated with perceived stress. Coping-related motives to go online (i.e. stress relief or to forget about problems) was associated with higher stress while enhancement-related motives (going online for excitement and fun) were associated with lower stress. Number of hours per week was not associated with perceived stress. Problematic online behavior was not a predictor of perceived stress. College women reported higher levels of stress than males. More ALEs experienced was positively associated with poor outcomes.


High levels of mental illness and emotional disengagement have been found in incoming populations of college students. This study used Astin’s Input-Environment-Outcome (I-E-O) model of college impact that states that students’ college-related outcomes are influenced by precollege characteristics and aspects of the college environment. Keyes’ theory of mental health, which conceptualizes mental health as a continuum measured by emotional, psychological, and social well-being, was applied to the I-E-O model. The goal of this research was to examine predictive factors of student mental health within the college environment. Predictors of student mental health included a supportive college environment, students’ sense of belonging, professional confidence, and civic engagement. Measures of engaged learning were not predictive of mental health.


Compared to other undergraduate students, freshman experience higher levels of stress. Examining predictors of stress can help students with their adjustment to college and overall well-being. Some of these predictors include coping strategies, emotional states, and quality of sleep. This study examined changes in stress during the first semester for 197 freshman students and identified predictors of stress. Results indicated that increased stress throughout the quarter was related to academic events such as tests and exams. Females experienced higher levels of
stress compared to their male counterparts. Coping methods such as Internet usage, meditating, and isolating one’s self were associated with higher levels of stress. Exercise was associated with lower levels of stress. Quality of sleep and level of fear were the most important variables for explaining stress.


Childhood bullying has been associated with harmful adulthood outcomes. Adjusting to college may be particularly difficult for students who have experienced bullying in the past. The current study examined if childhood bullying victimization was associated with psychosocial and academic functioning at college. 413 first-year college students participated in this study. College students who had experienced bullying in the past were more likely to report depressive and anxiety symptoms in the clinical range. They also had lower global ratings of mental and physical well-being. Even when controlling for other childhood victimization experiences, these symptoms and levels of well-being were present. This study found that bullying was not associated with perceptions of overall positive quality of the college experience or social life.


Because there has been an increase in incidents of campus violence and potentially traumatic events, it is important to understand how they impact student success and adjustment. Some research has suggested that following traumatic events, students may experience higher levels of posttraumatic stress symptoms (PTSS). Hope is often a protective factor for stressful life events and has been linked to academic achievement in college students. This study examined hope as an adaptive predictor of college adjustment for students over time in the context of collective trauma, including a school shooting. Depression was measured across two consecutive years at Y1 and Y2. Collective trauma happened between Y1 and Y2. Symptoms of baseline depression or PTSS at the outset of the first year was associated with increased risk for maladjustment by the end of the year. High baseline levels of hope provided enough of the model variance that initial symptoms were no longer statistically significant predictors.


Approximately 71% of American youth have experienced exposure to at least one incident of violence in childhood. Because emerging adults commonly experience the onset of psychiatric disorders, it is important to examine connections between violence exposure and psychological functioning. This study examined typologies of childhood violence exposure (CVE) and the associations between demographic characteristics and mental health. Of the 395 college students who participated in this study, 83.46% reported a history of CVE with an average of 4 violent events. Four profiles of CVE emerged: Low-Exposed, Domestic-Exposed, Community-Exposed,
and High-Exposed. First-generation students had a higher likelihood of being in the Domestic-Exposed or High-Exposed groups. Domestic-Exposed and High-Exposed groups had higher rates of mental health problems.


College students truly have their well-being in their own hands when they reach college as this is often a time when risky behaviors may form. In order to develop programs targeted towards college student well-being, it is important to examine predictors of well-being in this population. This study evaluated well-being in 568 undergraduate students to identify health-related risk behaviors and predict well-being. The Public Health Surveillance Well-Being scale was used to evaluate mental, physical, and social components of well-being. Sleep quality was the strongest predictor of well-being. While sex was not significant in the final model, men reported higher levels of well-being compared to women. Students of LGBTQ orientation had lower levels of well-being. Diagnosis of depression and tobacco use were associated with lower levels of well-being. Grade point average and physical activity were predictors of well-being.


College is a time of transition which may present difficulty for some students especially those who lack resilience and problem-solving or coping skills. Thus, there could be an increase risk for suicidal behavior and nonsuicidal self-injury (NSSI). Some factors associated with NSSI in the college student population include, bisexual or questioning sexual orientation; history of abuse or neglect; depressive symptoms and anxiety disorder; interpersonal difficulties; and eating disorders. The researchers examined distinguishing factors between the following undergraduate groups, those who reported NSSI during the past year vs. no self-harm; those who reported NSSI and a suicide attempt (SA) vs. no self-harm; and NSSI + SA during the past year vs NSSI only. Males were just as likely as females to report NSSI. Students who recently engaged in NSSI behavior were more likely to experience internal distress, negative self-perceptions, and engage in disordered eating compared to those with no history of self-harm. Students who also attempted suicide experienced more violence/maltreatment and were more likely to have a substance use/addictive disorder compared to those not reporting self-harm.


It is common for college students to work while also pursuing higher education. This may leave some students feeling a lack of social support and less connected to their school due to work obligations. In addition, working students will experience relationships in the workplace that can be positive, negative, or a combination of the two. This study examined the effect of quality of workplace relationships on the mental health of employed students. Results indicated that most
workplace relationships were positive (supportive or ambivalent). Supportive relationships were related to fewer somatic stress symptoms, lower depression and anxiety, and higher life satisfaction. Aversive relationships were related to higher depression and anxiety. Ambivalent relationships were predictors of somatic stress symptoms and life satisfaction.


A majority of college students report sleeping for less than 8 hours a night. Lack of sleep has been linked with numerous health conditions including depression. The following study examined the relationships between stress, depression, sleep quantity, and sleep quality in a sample of 2-year college students. The participant sample in this study reported an average of 8.4 hours of sleep per night which is higher what is typically reported in previous studies. Age and working status were significant predictors of average sleep quantity. Stress and depression were not significant predictors of sleep quantity. However, stress and depression were significant predictors of quality of sleep.
THEME 2: SUBSTANCE USE


Independently depression, anxiety, and tobacco use have been linked to sleep issues. Additionally, sleep quality and tobacco use have been identified as two of the most important predictors in students’ sense of well-being. This study examined how tobacco use and depression/anxiety disorders are related to disturbed sleep in respondents of the Spring 2011 American College Health Association-National College Health Assessment II database. Odd ratio analyses found that depression/anxiety status was the strongest predictor of problematic sleep. Those that experienced both depression and anxiety had the highest rate of sleep problems. Depression/anxiety status showed a 2-fold increase in the probability of daily tobacco use. Daily tobacco use increased the risk for problematic sleep.


Recovery occurs when substance use is reduced or ceased to improve healthy functioning and quality of life. College has been described as “an abstinence hostile context” as there are high rates of substance use on college campuses that can pose a threat to recovery. The Collegiate Recovery Program (CRP) was created in response to the need for support for college students who have a history of substance use disorder (SUD). The authors of this study examined students’ reasons for joining a CRP. Of the study participants, 80% stated they joined a CRP because they wanted or needed a recovery supportive peer network. Of that 80%, 23% stressed the importance of same-age peers. A second theme that emerged was wanting to “do college sober” (integrating school and recovery) which was stated by 30% of participants. A third theme of wanting to give back and help others in recovery was cited by 14% of participants. Other reasons for participation included recommendation by a friend/peer/professional and financial and academic benefits associated with a CRP.


Emerging adults are at risk for high rates of alcohol and substance use as well as mental health disorders. Past research indicated that social networks impact various issues such as smoking, alcohol use, depression, and happiness. The following study examined the relationship between social network risk (alcohol-using close friends), perceived peer closeness, substance use, and psychiatric symptoms to discover risk and protective factors of students’ social context. Logistical regression revealed that those with risky networks were at a 10-fold increase for
hazardous drinking, a 6-fold increase for weekly marijuana use, and a 3-fold increase for weekly tobacco use. Peer effects were strongest with marijuana. Females perceived more closeness with tobacco use than their male counterparts. Perceived closeness with peers was a protective factor against psychiatric symptoms.


Compared to their noncollege peers, underage college students drink in heavier quantities. Heavy alcohol use has been linked to several negative consequences and outcomes. The researchers of this study examined associations between positive alcohol expectancies, demographics, academic status, and binge drinking in 1,553 underaged college students. Positive alcohol expectancies (PAEs) occur when a learned association is formed between performing a certain behavior and receiving a positive outcome. In this study PAEs included the factors of sociability and sexuality. Students who endorsed higher agreement of sociability and sexuality were more likely to have reported binge drinking within the past 2 weeks. This suggests that students drink with the positive expectation that it will facilitate their social engagement or enhance sexual appearance.


Heavy episodic drinking (HED) is common in both male and female college students however rates are higher for men. Weight controlled behavior (WCB) such as skipping meals, eating less, and self-induced purging are sometimes used to offset calories from drinking or enhance the effects of alcohol. The current study examined gender identity to determine if sex and gender socialization (masculine or feminine orientation) are predictive of the co-occurrence of WCB and alcohol use. Ordinal logistic regression revealed that men are more likely to engage in HED compared to females. Men were also more likely to engage in alcohol-related WCB. Participants with a masculine orientation had higher odds of alcohol-related WCB compared to feminine-oriented participants. Regardless of sex, masculine-oriented individuals show greater risk for alcohol-related WCB.


Heavy episodic drinking and depressive symptoms are commonly seen together in the college population and increase the odds of alcohol-related problems (ARPs). Drinking to cope is one variable that has been tied into heavy drinking and depressive symptoms. In this study, the authors examined the effect of gender on the association of depressive symptoms, coping motives, alcohol use, and ARPs. Structural equation modeling found that coping motives mediated associations between depressive symptoms and ARPs in males and females. A mediating path from depressive symptoms to coping motives to frequency of heavy alcohol use
to ARPs was present for females suggesting they may experience more ARPs due to drinking to cope with negative mood. Depressive symptoms were associated with greater coping motives for males which was related to greater ARPs. For males ARPs were not explained by more frequent heavy alcohol use.


The use of prescription stimulant medication without a prescription or at levels higher than prescribed is known as nonprescription stimulant use (NPSU). Higher sensation seeking and lower effortful control (effortful control and cognitive regulation) have been linked to NPSU and drug use. The current study examined if NPSU was associated with illicit drug use and other risky behaviors such as risky sexual behavior, risky driving, and risky financial behaviors. The study also investigated if effortful control abilities mediated the associations between NPSU and risky behavior. Attention-deficit and hyperactivity symptoms were controlled for in this study. Individuals who engaged in frequent NPSU were more likely to engage in illicit drug use, risky health behaviors, risky driving, and risky financial behaviors. Effortful control abilities only partially mediated the link between NPSU and risky behaviors.


Emerging adulthood is associated with increased risky behavior such as substance use. However previous research has indicated that education attainment and school enrollment may be protective factors against substance dependence. Not much is known about emerging adults in treatment and how that ties in with student status and treatment success. The current study examined differences between emerging adult students and nonstudents to understand if student status predicts treatment outcomes. Students were more likely to complete treatment than nonstudents and in a shorter period of time. Student status may serve as external motivation that potentially increases clients’ sense of urgency to complete treatment. Alcohol was reported as the primary problem substance more in the student group. Students were less likely to report marijuana as their primary problem substance.


Nonmedical use of prescription drugs (NMUPD) has increased so they are the most commonly abused substances after alcohol and marijuana. Adolescents and adults who identify as lesbian, gay, or bisexual (LGB) have higher rates of general substance abuse and may be more at risk for NMUPD. This study examined differences in NMUPD between heterosexual, lesbian, gay, bisexual, and questioning first-year students. Hierarchical regression revealed that LGBQ students reported higher rates of NMUPD than heterosexual students. Bisexual and questioning
students had higher rates of nonmedical painkiller use than heterosexual students and gay men. Compared to heterosexual females, lesbian, bisexual, and questioning females had higher nonmedical painkiller use. While significant rates were found with all of the following groups, bisexual students reported the highest nonmedical usage of anxiolytics and stimulants followed by gay and lesbian students.


While not all students who drink experience problems, issues can arise that are detrimental to educational, career, and life goals. While some students may recognize and work towards resolving issues related to drinking, others make continue to drink despite recurrent problems. Control may be important in the recognition and evaluation of alcohol problems. The authors in this study examined perceived lack of control over life outcomes (negative control) and need for control as predictors of alcohol-problem recognition, evaluation, and expectancy. Regression analyses found that while negative control was not associated with alcohol consumption, it was significantly associated with alcohol problems. Negative control was positively associated with the evaluation of alcohol problems and the expected likelihood of alcohol problems. The greater the negative control, the more likely the participant was to evaluate alcohol problems as “not too bad.” Among participants with higher levels of alcohol consumption there was a significant relationship between the need for control and alcohol-problem evaluation.


Drinking still remains a top concern across college campuses. Social anxiety is a risk factor for substance use. College students who are socially anxious engage in more frequent alcohol consumption and are more likely to have an alcohol related diagnosis compared to their nonanxious peers. The current study examined the role of social anxiety as a risk factor for excessive alcohol consumption. The study was conducted in a naturalistic field setting, 3 heavy-drinking locations near a university campus, and blood alcohol content (BAC) was assessed. Results found that the average BAC was 0.107 and males had slightly higher BACs than females. Members of Greek-life organizations also had higher BACs than non-Greek students. Those who were drinking in larger groups tended to have higher BACS. Those who scored high and low on the social interaction anxiety scale had higher BACs than those who’s scores ranged in the middle.


College students in general have been found to be highly susceptible to mental health problems which may have serious implications for nontraditional college students. Nontraditional students are more likely to have children, full-time jobs, and may not go to college directly after graduating high school. Nontraditional students may be at risk for attrition. The following
research examined the differences in life stress, anxiety, depression, and alcohol use among traditional and nontraditional college students. Results indicated that nontraditional college students experience life stress, anxiety, and depression at higher levels.
THEME 3: EATING DISORDERS


Young women are at risk for body image concerns and college aged and sorority women are at risk due to developmental changes at this phase of life. Sorority women may be at particular risk because of the focus on traditional gender role norms and sexual objectification. Most college women believe that they are overweight and are in the process of trying to lose weight. Body dissatisfaction is a predictor of eating disorders. The present study examined the relationship between conformity to feminine gender role norms, self-objectification, and body image surveillance in undergraduate women. Among undergraduate women results indicated that traditional feminine gender role norms were related to increased body consciousness, negative body image, and increased feedback regarding physical appearance. The largest variance was found between feminine gender role norms and objective body consciousness (body surveillance, body shame, and appearance control beliefs). Sorority membership did not significantly predict body consciousness, body objectification, or feedback on physical appearance.


“Drunkorexia” is defined at the tendency to restrict food intake prior to consuming alcohol. The purpose is to compensate for calories that will be consumed via alcohol. However, restricting food intake can lead to an increased risk of getting drunk and possibly experiencing negative alcohol related consequences. The authors of this study explored if women engage in drunkorexia more than men; if weight control motivation explain sex differences in drunkorexia; and if among women, weight control motivations, are a strong predictor of drunkorexia for heavier drinkers. Alcohol consumption, drunkorexia, and weight control motivations were self-reported by 63 participants. Results indicated that a large portion of those who reported drinking within the past month reported engaging in drunkorexia a least once. Women were more likely to engage in drunkorexia when compared to males and their engagement in this behavior was driven by a greater desire for weight control. Women who reported high levels of drinking were the ones for whom weight control motivations most strongly predicted engagement in drunkorexia.

Nonmedical use and misuse of stimulants used to treat attention-deficit/hyperactivity disorder (ADHD) is a common high-risk behavior at the university level. As reduced appetite is a common side effect of stimulant use, college students have misused the drug for these purposes. The goal of this study was to examine the misuse of stimulants used to treat ADHD in college-age women with a high risk for or with clinical or subclinical eating disorders. Those who endorsed ADHD-specific stimulant misuse were associated with greater severity of global eating disorder pathology, eating shape, and weight concerns, body image concerns, binge eating and purging, eating disorder-related clinical impairment, depression, stress, and anxiety. Dietary restraint was not associated with stimulant misuse in this sample.


Distorted body image may be cause college students to be more at risk for developing eating disorders (EDs). Stressors, such as experiencing sexual violence, may affect students’ ability to cope thus causing them to engage in maladaptive coping behaviors such as EDs. This study examined the relationships between sexual violence experiences, inaccurate body weight perceptions, and the presence of ED indicators in female college students. Logistic regression revealed that those who reported sexual violence were more likely to report ED indicators. Experiencing moderate sexual violence (attempted penetration) was a stronger predictor of ED than severe sexual violence (completed penetration). Sexual violence was the strongest predictor of purging behavior. Inaccurate body weight perception was the strongest predictor of the presence of ED regardless of whether or not the participant experienced sexual violence.


Multiple negative behaviors have been associated with energy drink consumption including mixing energy drinks with alcohol. The caffeine in energy drinks may also have adverse health effects. These may be intensified for those consuming energy drinks to stave off hunger and counteract fatigue associated with calorie restriction. This study examined energy drink consumption and relations with weight loss attempts and behaviors, body image, and eating disorders. Results indicated that weight loss attempts, unhealthy weight loss behaviors, and poor body image were associated with energy drink consumption. Hierarchical logistic regression was used to control for demographics and the relationships between energy drink consumption the act of trying to lose weight, use of diet pills, and use of vomiting/laxatives remained significant.


The Healthy Body Image program consist of 4 categories of activities: online screening; online, evidence-based preventive intervention for individuals at low and high risk for eating disorders;
referral to clinical services for individuals with eating disorders; and in-person community outreach and online culture change intervention delivery. This evidence-based program provides interventions across socioenvironmental levels that impact eating and activity patterns in students. This pilot study examined the Healthy Body Image program at 2 universities using either a solicited screening (invited campus-wide screen) or universal screening (first- and second-year students living in targeted residential halls). Results indicated that the solicited screening approach resulted in greater numbers of students who were at higher risk for eating disorders compared to the universal delivery model. It is suggested that when screening is encouraged for all students in a defined population, like those in the universal delivery model, it may decrease stigma and increase completion of the screening by a broader group of students.


While women tend to strive for thinness, men strive for a more muscular physique. Body image dissatisfaction is associated with an increased risk for eating disorders which can be present in males. This study examined the relationship between risk of eating disorders, body dissatisfaction, and perceptual attractiveness in male college students. The Eating Attitudes Test (EAT) was used to assess eating disorder risk while the Bodybuilder Image Grid (BIG) was used to assess body dissatisfaction and perceptual attractiveness. This study also examined differences between genders in the perception of the ideal male body image. Results indicated that there was a positive correlation between EAT scores and fat dissatisfaction. A negative correlation existed between EAT scores and muscle dissatisfaction. Males with a higher level of eating disorder risk desired to gain more muscle. Males choose significantly more muscular and leaner body types than females in the study.


Both problematic drinking and problematic eating behaviors have been associated with negative outcomes for college students. Additionally, those who engage in disordered eating behavior (DEB) are more likely to engage in problematic drinking. This study examined binge drinking, alcohol expectancies, and risky and protective drinking behaviors in relation to DEBs in college students. A combination of 7,720 male and female undergraduate students participated in this study. Results indicated that positive and negative alcohol expectancies were higher in both male and female participants with DEB. Moderate DEB in females was associated with greater expectancy for sexual opportunity while those with severe DEB expected that alcohol would improve their social life. Loss of control while drinking was highest among females with severe DEB and males with moderate and severe DEB. Engaging in risky drinking behaviors was more common in males and females with DEB. Males with DEB were more likely to pregame, choose higher alcohol concentrated drinks, and refrain from eating before drinking. Females with DEB also displayed these behaviors in addition to chugging and doing shots.

Compensatory behaviors like using laxatives, self-induced vomiting, and exercise to influence body shape or weight are often clinically significant features of eating disorders. Those who use multiple methods of compensatory behaviors tend to have worse eating disorder symptomology. This study examined rates of endorsement of eating-related compensatory behaviors in a sample of college students. Three groups of students emerged: those who did not endorse purging behaviors, those who endorsed only exercise, and those who endorsed laxative use or vomiting. Results indicated a significant level of compensatory exercise in this sample of participants. Those reporting compensatory behaviors reported higher levels of eating disorder risk. Those who utilized vomiting and laxative use had the highest scores on the Eating Disorder Examination Questionnaire (EDE-Q). Frequency of exercise was somewhat related to dietary restraint in this study.


Late adolescents and young adult women are at higher risk for developing eating disorders, especially college women. The college women eating disorder diagnostic profile was established to recognize, diagnose, and respond to commonly experienced eating concerns within this age group. Because the profile was based off of DSM-IV-TR material, this article suggests implications in the context of the new DSM-5. In the Feeding and Eating Disorders section of the DSM-5 the Eating Disorders Not Otherwise Specified (EDNOS) is removed, criteria of major eating disorder has been revised, and new categories have been added. Diagnoses now include anorexia, bulimia, Binge Eating Disorder, Other Specified Eating Disorder, and Unspecified Eating Disorder. Table 1 of this article on page 75 contains a comparison of key features of DSM-5 eating disorder diagnoses and the college women eating disorder diagnostic profile. The college women eating disorder diagnostic profile maintains consistency with the DSM-5. The profile is able to addresses dimensionality, cross-cutting assessment, and comorbidity which is useful under the new Unspecified category.


Being labeled, stereotyped, and discriminated against due to one’s weight is known as weight-related stigmatization. Weight stigmatization affects young women more than any other group. This study examined the processes through which weight stigmatization affect dietary restraint and emotional eating among college women. Path analysis were conducted. Results indicated that weight stigmatization increased stress which increased emotional eating. Weight stigmatization increased social withdrawal which resulted in increases in dietary restraint.

mass index moderate the association between stress and emotional eating?. *Journal of American College Health*, 63(3), 163-170.

Increase in obesity is most prevalent in the young adult age group. Weight gain is associated with both negative physical and psychosocial consequences. This study examined perceived stress and resources to cope as predictors of emotional eating during transition to college. The study also sought to determine if body mass index (BMI) moderated the emotional eating-stress relationship. 97 college freshman participated in this study. Participants who had fewer resources to cope with stress were more likely to have higher levels of emotional eating. Perceived stress predicts emotional eating for those within average-weight and overweight ranges. This was not true for those in the obese range.

Although examining aspects such as emotional health, mental health, and service utilization are all aspects of suicide prevention, healthy-related factors also merit examination. For example, sleep problems, being overweight, heavy drinking, and tobacco use are all associated with increased risk of suicidal ideation. Health attitudes are defined as the extent to which an individual sees their health behaviors as favorable or unfavorable. The authors of this study assessed the relationship between health attitudes, health behaviors, and suicidal ideation among a sample of 690 undergraduate college students. Positive health attitudes were negatively associated with suicidal ideation after accounting for covariates. This research supports an independent relationship between health attitudes and suicidal ideation.


Some barriers to seeking mental health care include lack of knowledge about mental health disorders or negative attitudes associated with seeking care. The Theory of Planned Behavior (TPB) examines a person’s attitudes about behavior (i.e. seeking services), their subjective beliefs about what others think about that behavior, and perceived barriers. While TPB has been used to predict the intention to seek mental health services in other populations, it has not been applied to the college student sample. The authors in this study examined attitudes, social norms, and perceived behavioral control in relation to intention to seek mental health services. Barriers to care-seeking were also explored. Students who had positive attitudes towards mental health services, perceived their peer group as having positive attitudes, and perceived less barriers to care had greater intention to seek mental health care for depression. Subjective norms were not associated with intention to seek mental health services. Attitude was the strongest predictor of intention to seek mental health services. Cost of treatment was rated as the greatest barrier to seeking services.


Many risk factors lead to suicide however, early detection of these factors can allow them to be addressed through counseling services, medication, or a combination of the two. Because of this, many gatekeeper training programs have been created to train community members to identify and respond to warning signs of suicide in order to refer individuals for services. Students are
likely to confide in their peers so in addition to training faculty and staff, it is important to train fellow students. The following study examines the effectiveness of an audience-specific, single-session, small-group interactive gatekeeper training program in which faculty, staff, and students participated. Baseline assessments were administered followed by training and posttest assessments. A 3-month follow-up was also conducted. Results indicated a significant increase in knowledge about suicide and increase in comfort in asking about suicide. There was a decrease in knowledge and comfort at the 3-month follow-up however follow-up rates were still higher than baseline rates.


Individuals using Nonsuicidal Self-Injury (NSSI) behaviors are at greater risk for suicide-related behaviors (SRB). The current study seeks to add to the literature on NSSI and SRB and how the two may be related. Within the sample of 572 undergraduate students, demographics, mental health, and negative coping were examined in relation to NSSI and SRB. Results indicated that NSSI and SRB are statistically related to one another and that demographic differences exist. Women reported more frequent cutting behavior. Those who had a history of NSSI had a seven times worse likelihood of experiencing SRB. Women, bisexual individuals, and Hispanic individuals were more likely to report both NSSI and SRB. Those who reported both NSSI and SRB had worse mental health symptoms and exhibited unhealthy coping styles. Prior exposure to suicide increased the odds of reporting both NSSI and SRB.


Self-perceptions of poor health and poor mental health have been found to be significantly associated with suicidal behavior. The authors of this study conducted a campus wide study on the mental and physical health of faculty, staff, and students. Their surveillance survey examined physical, mental, and general health status; suicide knowledge; and demographics. T-tests revealed that across eight mental health indicators, students reported worse mental health when compared to faculty/staff. Female and self-identified LGBT faculty/staff and students had lower satisfaction with their physical, mental, and general health. Mixed perceptions of overall health were found among students and faculty/staff of color. Increasing age was associated with worse physical health in both students and faculty/staff. LGBT students reported more mental health problems compared to heterosexual students. Students of color indicated more issues with energy and fatigue compared to other groups. Male students indicated fewer health problems and less overall distress.

Female victims of sexual assault and other forms of interpersonal violence are less likely to receive support and mental health care. In noncollege student samples, significant links have been identified between interpersonal victimization and suicidality. The following study examined the predictive role of victimization in suicidality among college women. The sample consisted of 258 female respondents of the American College Health Association National College Health Assessment II. After controlling for psychological related variables, college women who reported emotional, physical, or sexual victimization had more than eight times the odds of suicidality when compared to those who reported no victimization. Thus, there is support for a link between victimization and risk of suicidality among female college students.


Past research has found that interpersonal factors and difficulties are often related to suicidal ideation. Joiner’s interpersonal psychological theory of suicide states that there are three factors (acquired capability, perceived burdensomeness, and thwarted belongingness) that are underlying causes of suicide. Thwarted belongingness is the strongest and most reliable predictor for suicidal ideation. The authors of the current study sought to examine the degree to which the domains of belongingness explained suicidal ideation in a sample of 249 college undergraduates. These domains included family, peers, and the academic institution. Multiple regression analysis found that all three domains of belongingness significantly accounted for the variance in suicidal ideation. However, only family belongingness had a significant unique contribution to suicidal ideation. College students who display suicidal ideation may have low levels of family belongingness.


As emerging adults, those aged 18 to 25, begin to develop their own independence, they also continue to look to their families for support and feedback. While family connections can contribute to positive transition, emerging adults can also experience psychological problems such as depression. Past experiences of criticism and high expectations from parents may contribute to self-criticism and feelings of inferiority relative to peers. Self-criticism is predictive of depressive symptoms in college students adjusting to their first year. On the other hand, students with cohesive families tend to experience fewer emotional, academic, and social adjustment issues when transitioning to college. The following study examined relationships among emerging adults’ perceived familial criticism, their depressive symptoms, and their adaptation to college. Correlational and regression analyses found that perceived familial criticism was significantly and positively related to depressive symptoms in males and females. Females perceived familial criticism was significantly and positively related to college adaptation. Depressive symptoms were significantly and positively related to adaptation to
college for both males and females. For females, depressive symptoms fully mediated the relationship between perceived familial criticism and adaptation to college.


Early intervention can play a key role in preventing suicide attempts. The following case study examined the effects of an early intervention program for college students demonstrating risk for suicide. 108 undergraduate students who were referred to the early intervention program participated in this study. The early intervention program consists for a 2 hour appointment which includes, assessment of current suicide risk; an evaluation of willingness and ability to refrain from self-harm; conducting consultation for psychiatric, psychological, and educational services; including parents or guardians previously contacted about the incident; and a supportive educational intervention for roommates. The student and psychologist work together to list sources of support and healthy alternative to risky behaviors. Students who completed this program remained in school and had small rebounds in their GPA the semester after the incident.


Depression, weight related concerns, and life stressors are all associated with suicidal ideation among college students. The authors of this study sought to examine these factors in a single model to examine pathways through which they influence suicidality. The authors acknowledge that there are gender differences and that the relationship between weight factors and depression may operate differently when comparing males to females. A combination of 872 undergraduate and graduate students participated in this study. For the total sample, results indicated that depressive symptoms mediate the relationship between stress and suicidality and the relationship between weight-related issues and suicidality. Stress was a predictor of suicidality but weight-related issues were not. Depressive symptoms mediated the relationship between stress and suicidality for females only.
Theme 5: Counseling Interventions


While stress need not always be present for the development of anxiety and depression, it is often a precursor. This study examined a coping skills group and an online cognitive training program aimed at reducing stress and preventing psychopathology. 62 student participants were randomly assigned to either the coping skills group or cognitive training group. The goal of the coping skills group, which consisted of six weekly group sessions, was to teach students about stress and health and assist students in developing adaptive coping skills to manage stress. The cognitive training intervention consisted of games that tapped into one of three executive functioning categories: working memory, attention control/inhibition, and shifting/cognitive flexibility. Measures of stress, coping, executive function, and symptoms of anxiety, depression and attention-deficit hyperactivity disorder (ADHD) were tested before and after the intervention. Results indicated that both groups experienced a decrease in social stress, executive function difficulties, and anxiety symptoms. Those in the cognitive program improved more on measures of behavior regulation and ADHD symptoms.


Heavy episodic drinking (HED) consists of 4 or more drinks in a single occasion for women and 5 or more for men. While many risks are associated with HED, it is a common occurrence among college students. Self-regulation, the ability to monitor and alter cognition, emotions, and behaviors is believed to be related to alcohol consumption. This pilot study examined a planning-ability, executive function (EF) intervention to reduce HED. Using the AUDIT-C, 55 heavy-drinking first-year college students were identified to participate in this online study. To increase planning ability, an intervention group was given progressively more difficult tasks to challenge planning ability. This group was compared with a control group that was given the same type of tasks but at an easier and more consistent level. When the intervention did not affect the frequency of HED, it was successful in reducing the average and maximum per-occasion alcohol consumption. The experiment group consumed 1.7 standard drinks fewer than the control group on typical occasions and 2 standard drinks fewer on peak occasions.

The idea of personalized normative feedback (PNF) is to change behavior by correcting misperceptions of “normal” and “typical” behavior. These types of interventions have been used to reduce heavy drinking in college students and have been proven effective. The goal of this study was to evaluate the efficacy of a stand-alone PNF intervention targeting misperceptions of gambling among college students. Participants were randomly assigned to either the PNF condition or attention control condition. Those in the PNF group showed a decrease in perception of other students’ gambling after 1 week of the intervention. Perceptions of those in the control group remained unchanged. Those in the PNF group also demonstrated lower risk-taking performance on the 2 analog gambling tasks. Those in the control group continued to increase their risk taking over time.


Compared with their nonathletic peers, previous research has shown that student-athletes consume more alcohol. In addition to affecting educational performance, alcohol can also impact athletic performance. The authors of this study examined the effects of a single-session motivational interviewing-based in-person brief alcohol intervention containing student-athlete specific personalized drinking feedback. 170 National Collegiate Athletic Association Division I student-athletes who met the criteria for heavy episodic drinking participated in this study. Baseline measures were taken prior to the intervention and a follow-up was conducted 3 months later. Overall, this intervention was effective in reducing reports of alcohol use frequency, quantity, and alcohol-related negative consequences 3 months after the intervention. Increases in use of protective behaviors were also found. Greater corrections of norm misperceptions of drinks per week consumed by typical students were also found among the population.


Transition to college often results in an increase in responsibilities, a change in support systems, and a new social environment. It is also common to see an increase in mental health concerns among this population as they are particularly vulnerable to stress and adversity. Research on mindfulness among college students has shown that it can be effective in reducing stress, increasing emotional well-being, improving interpersonal relationships, and improving health-related behavior. This pilot study examined the effectiveness and feasibility of mindfulness training on first-year college students’ health and well-being. In this study a control group was compared with the mindfulness training group. Those in the mindfulness group indicated improvements in life satisfaction, depression, anxiety, sleep issues, and alcohol consequences when compared to the control group. The training group did not impact intrapersonal and interpersonal awareness. Students highly rated the program and were likely to recommend the program to their peers.

Koru is a word meaning the unfurling fern frond which symbolizes balanced growth. Compared to mindfulness Koru focuses on mind-body skills like abdominal breathing, guided imagery, and insight meditation and was specifically created for emerging adults (EAs). It is relatively brief consisting of four 75-minute session and 10-minutes of daily practice. Additionally, the language and metaphors used are created to resonate with the interests and concerns of EAs. It also focuses on cultivating positive emotions like self-compassion. This study evaluated the effectiveness of Koru in college students and other emerging adults. Participants either participated in the Koru group or a control wait-list group. Results indicated that those in the Koru group experienced significant improvements in perceived stress, mindfulness, sleep quality, and self-compassion in the university student sample. Gratitude was not affected. The program had high enrollment and retention.


It is common for college students to report symptoms of stress, anxiety, and depression. These symptoms have been associated with poor academic performance, increased episodic drinking, and unhealthy relationship behaviors. Resilience, the ability to positively adapt during times of adversity, can promote protection in times of challenge. Additionally, positive coping skills can decrease psychological distress. This pilot study evaluated a Resilience and Coping Intervention (RCI) with college students. RCI helps participants identify thoughts, feelings, and coping strategies following traumatic events or problematic experiences related to stressors. 129 participants were randomly assigned to either the experimental (3 RCI sessions) or control group and completed pre- and post-assessments. Those in the RCI group reported more hope and less stress and depression from pre- to post-assessment. The strongest moderating effects of RCI were reported on student stress. Those in the RCI group also experienced an increase in resilience. RCI had not effect on anxiety or coping capacity.


While there are many targeted interventions for specific disorders within the college student population, it is not common to see multiple various interventions on a single campus as this can prove to be complex, costly, and overburden students. Web-based transdiagnostic programs that address a range of mental health problems may help in targeting shared risk factors. Acceptance and commitment therapy (ACT) can address factors such as psychological flexibility and experiential avoidance to improve a range of psychological problems. The authors of this study examined the feasibility of a prototype Web-based ACT program for preventing mental health
problems in college students. The goal was to evaluate if the cost and effort of developing a full program was worthwhile. Results indicated the program may be acceptable and impactful with college freshmen. High program utilization and system usability was found. Improvements were found for ACT knowledge, education values, and depression. The ACT group experienced decreased depression and anxiety. On all outcome and process measures, improvements were found from baseline to 3-week follow-up in the ACT group.


For college students who face psychological problems it would be beneficial for treatment to address these problems while also addressing constraints of college. Dialectical behavior therapy (DBT) have been found to improve measures of suicidality, depression, and self-injury in college students. DBT skills training can be effective in emotional dysregulation across a variety of psychological disorders. This study examined the feasibility and efficacy of 2 abbreviated DBT skills training groups: emotion regulation skills only and emotion regulation with mindfulness skills. Participants engaged in 2-hour weekly group sessions for 8 weeks. Outcome measures were taken at baseline, midtreatment, posttreatment, and during at a 4-week follow-up. In both groups, participants reported improvement in emotion dysregulation, affect, skills use, and functioning. While feasibility and efficacy for abbreviated skills training for emotion dysregulation was found, there was no additive benefit of mindfulness skills. Low attrition and positive participant feedback were present but issues with recruitment and enrollment were encountered.
THEME 6: SPECIALIZED POPULATIONS


Asian American and Pacific Islanders (APIs) are a growing ethnic minority group in the United States. Historically, this group has faced exclusion and discrimination however, little research has been conducted on the relationship between discrimination and health. The following study examined perceived discrimination and its relationship to mental health and substance use in the API college population. Results found that perceived discrimination was not positively associated with substance use but was positively associated with depressive, anxiety, and somatic symptoms. Ethnic identity served as a moderator between perceived discrimination and somatic symptoms.


While few studies exist on virtues and their role with well-being, evidence suggests that they may play a role in producing positive mental health. The following study explored the relationship of virtues, perceived life stress, and psychological symptoms in Chinese students. The study found that perceived stress from minor events mediated the relationship between vitality and psychological symptoms. Conscientiousness directly affected psychological symptoms.


Asian American/Pacific Islanders (AAPIs) have low utilization of mental healthcare across all minorities. Much of the research on trauma in colleges students comes from research on white students. The purpose of this study was to test cultural betrayal trauma theory from a minority perspective in AAPI students. Participants were 108 AAPI students at a predominantly white university. MANOVA tests revealed that when controlling for interracial trauma, ethno-cultural betrayal trauma impacted mental health symptoms including dissociation, hallucinations, posttraumatic stress symptoms, and hypervigilance.

According to research lesbian, gay, bisexual, and queer (LGBQ) individuals are at higher risk for mental health disorders. Many LGBQ individuals may experience these mental health issues in adolescence or young adulthood. The current study examined the prevalence of multiple mental health disorders and associated health issues for LGBQ college students. Results found that LGBQ students reported higher levels of perceived stress, worse depressive symptoms, considered themselves less attractive, and were more likely to be overweight. They were also more likely to report historical substance use, anxiety disorders, compulsive sexual behavior, and compulsive buying.


There is a growing rate of nontraditional college students, generally those 25 or older, on college campuses across the country. These students often juggle multiple roles and as such may experience more stress. The authors of this study examined the interaction of sex, gender role identity (GRI), and student type (traditional vs. nontraditional), and how those variables influence perceived stress and coping strategies in students. GRI included masculine, feminine, and androgynous (displaying personality traits that are associated with both masculine and feminine). In nontraditional male students, higher levels of perceived stress were found in masculine males versus androgynous males. Female nontraditional students used more approach coping strategies (i.e. expressing feelings, acceptance, and positive reframing) when compared to traditional male students. Finally, traditional androgynous female students had lower levels of perceived stress when compared to their masculine counterparts.


While some aspects of heterosexist sport culture are slowly dissipating, sexual minority athletes are still marginalized and stigmatized. In addition to frequently experiencing mental health concerns, sexual minority individuals are more likely to engage in frequent alcohol consumption, tobacco, and illegal drug use. The following study examined sexual minority college student-athletes in comparison with heterosexual student-athletes to assess mental health and substance use. 196,872 undergraduate students from the Fall 2008-Fall 2012 National College Health Assessment were used in this study. Chi-square analysis and logistic regression found that sexual minority student-athletes had a higher risk of mental health difficulties compared to heterosexual student-athletes. Substance use was greater among sexual minority students, both athletic and nonathletic, and was mediate by mental health.


When examining barriers to treatment in college populations, much of the research has focused on white students. The following study examined differences in frequently cited barriers to
treatment between college students who were racial/ethnic minorities and those who were white. 122 students who participated in the study were seen at a college counseling center for intake and a follow up was conducted 6 months later. Chi squared analysis and independent-samples t tests found that racial/ethnic minority students reported less previous treatment and treatment after their intake at the counseling center compared to their white counterparts. They also endorsed more treatment barriers, especially stigma-related concerns. They frequently cited financial concerns and lack of time as barriers. Multiple linear regression and logistical regression revealed that barriers associated with not following through with counseling recommendations were associated with greater depressive severity but not suicidal ideation.


Little research has focused on the mental health status of single parents who are attending community college. While college is often a stressor on its own, being a single parent can add additional layers of stress. The current study analyzed data from the Spring 2013 American College Health Association-National College Health Assessment to examine single parent difficulties as well as any associations between negative mental health and being a single parent. Bivariate analyses found that single parents were disproportionately affected by finances, family, and relationship difficulties. Additionally, they had nearly twice as many suicide attempts as the aggregate group however, single parents were more likely to seek help verses their counterparts.

While student service members/veterans (SSM/V) often face readjustment challenges when transitioning to higher education, additional stressors may be present for those from low-income urban areas. The following study examined mental health concerns and substance use in veterans attending college who were also from New York City’s low-income predominately minority areas. Logistical regression revealed that having a traumatic brain injury or disability was positively associated with college attendance. Linear regression revealed that marriage, employment, and college attendance predicted overall life satisfaction. SSM/Vs were less likely to have depression or a drug use disorder. White and Hispanic veterans were more likely to attend college than African American veterans.


While there has been an increase in research on service members and suicide risk, little research has been conducted on service members who are also enrolled in higher education. The following study examined the prevalence of psychiatric diagnoses and suicide-related outcomes along with associations of mental health and hazardous duty for student service members/veterans (SSM/V). Data was collected from the Fall 2011 National College Health Assessment. Logistical regression found that SSM/Vs had higher probabilities of self-harm than those student without military experience. While hazardous duty was positively associated with twice the likelihood of a psychiatric diagnosis it was negatively associated with suicidal ideation.


Although studies have shown that service members/veterans (SM/V) frequently experience mental health concerns, little is known mental health status, treatment needs, and mental health service utilization of student SM/Vs. The current study compared mental health symptoms and service utilization in student and nonstudent SM/V populations. Independent-sample t tests and chi-squared analyses found that the two populations did not differ in positive screening for depression, anxiety, hazardous drinking, or PTSD. Multivariable logistic regression found that those with mental health symptoms had low levels of service utilization. Not wanting treatment on their military records and being embarrassed were barriers to treatment in this population.

Veteran suicides have increased in the past decade and one plausible reason is due to the increase in psychiatric conditions in this population. The current study sought to quantify issues surrounding suicide in 422 student service member/veterans (SSM/V) over their lifetime, the past year, and the past month. Frequency analyses and chi-squared analyses revealed that for lifetime incidents 33.4% experienced suicidal ideation, 13.7% had a suicide plan, and 6.9% made a suicide attempt. Over the past year, 14.7% experienced suicidal ideation, 3.6% had a suicide plan, and 0.7% made a suicide attempt. Over the past month, 7.6% experienced suicidal ideation, 1.9% had a suicide plan, and 0.5% made a suicide attempt. Rates for the population of study were similar to general college student rates. However, Native American SSM/Vs reported increased rates across all suicide elements under study.


Veterans who have returned from Operation Enduring Freedom/Operation Iraqi Freedom (OEF/OIF) are experiencing post deployment mental health concerns. Additionally, the rate at which veterans are enrolling in higher education is growing. This study, of 117 participants, examined the adjustment challenges of previously deployed student veterans to include psychological functioning, social support, and academic adjustment. Depression did not have a significant negative association with academic adjustment however generalized anxiety did. PTSD was positively associated with academic adjustment. Military unit support during deployment and current social support were associated with academic adjustment and also suggested that cial resources are beneficial.


Many veterans of the Afghanistan and Iraq wars are enrolling in college. It has been traditionally difficult to measure the number of lesbian, gay, and bisexual (LGB) individuals in the military due to former policies such as Don’t Ask Don’t Tell. In general, those who identify as LGB report higher rates of mental health needs. 702 student service members/veterans (SSM/V) who participated in the Fall 2011 National College Health Assessment were used in this study. Descriptive statistics and 2-sample proportion and means tests found that SSM/V who identified as LGB or unsure had higher levels of mental health symptoms and treatment except for obsessive-compulsive disorder and panic attacks.

Service members are returning home and enrolling in higher education. Often, these specific students are experiencing anxiety, depression, PTSD, and suicide risk. The following article examined adjustment to academic life for services members along with behavioral health problems, those both past and present. 200 student service members/veterans (SSM/V) completed multiple self-report instruments. T-test and chi squared test were used to analyze results. The authors found that those reporting difficulties adjusting to university life reported more behavioral and health problems and also had more problems while they were in the military. While substance use was not significant there were significantly higher levels for PTSD, depression, and mental health disorders.
THEME 8: INTAKE & ASSESSMENT


College students commonly engage in sexual activity with 70.4% reporting at least 1 partner in the past 12 months. Examining sexual health can help with resource allocation when promoting healthy sexual behavior, providing evidenced-based programming, and understanding college student sexual health overall. The 17-item Sexual Health Survey (SHS) examines student’s sexual knowledge, attitudes, and beliefs. The 5 factors scale of the SHS measures 5 sexual health primary areas: perceived sexual acceptability (PSA), comfort with sexual communication (CSC), comfort with barriers (CB), knowledge of barrier protection and STI prevention (BPSP), and rape vulnerability (RV). This study conducted a confirmatory factor analysis on the SHS. All factor loadings were significant and ranged from .55 to .99. Intercorrelations among the 5 factors were small to moderate ranging from -.03 to .52. This supports discriminant validity of the 5 constructs.


There has been an increased demand for counseling services on campuses over the years and as such many campus counseling centers find themselves overburdened. Researchers have examined motivational change to examine the likelihood of clinical success. The Transtheoretical Model (TTM) is based on motivation and looks at stages of intentional behavior change and offers insight into whether a student is likely to benefit from campus counseling services. This study explored the associations between college counseling center clients’ initial self-report of motivation (based on the TTM) and counseling outcome. Clients’ level of motivation was significantly associated with counseling outcome. Those who were in the precontemplation group had the lowest group mean for counseling outcome and were least likely to benefit from counseling services. Those in the preparation and contemplation groups had the highest symptom improvement and were most likely to benefit from counseling services. Precontemplation, action, and maintenance groups did not have significant symptom improvement.


Over time, there has been an increase in the number of students with severe psychological problems on campus. College counseling centers are serving an increased number of students taking psychotropic medication. The purpose of this study was to describe diagnostic and
psychotropic medication prescription characteristics among college students referred by college counseling centers for psychopharmacologic evaluation. The most common presenting diagnosis at time of evaluation by a consulting psychiatrist were mood disorders, anxiety disorders, substance use disorders, and attention deficit hyperactivity disorder. Almost 40% of participants reported depressive symptoms in the severe to very severe range. 55% of participants reported a history of suicidal thoughts and 12% had attempted suicide at least once in the past. Aggressive or violent behavior risks were very low among those referred for psychopharmacologic evaluation. 50% of participants had a history of psychotropic medication use at the time of referral. Antidepressant medication was the most frequently prescribed medication both before and after consultation.


Cigarette use is highest among adults aged 18 to 24. College student smokers frequently report “social smoking” and smoke in social situations. College students tend to view social contexts and parties as “permission” to use tobacco. The Social Facilitation Expectancies (SFE) scale was developed to assess social facilitation expectancies for smoking. The SFE is a 10-item measure rated on a 5-point Likert-type scale. The SFE was psychometrically supported with established reliability and construct and content validity. Use of the SFE in the young adult college student population was supported. Higher SFE scores were present among those with greater smoking experience and greater endorsement of other smoking-related beliefs.


The CAGE (cut down, Annoyed, Guilty, Eye opener) questionnaire is a commonly used screening tool for identifying alcohol abuse and/or dependence. The CAGE’s predictive accuracy varies by population. It has not “performed well” in detecting alcohol abuse and dependence in college students nor has it been successful in detecting less severe forms of problematic alcohol use. The authors of this study modified the CAGE and tailored it to the college population by adding items that address problem behaviors specific to alcohol use and dependence in college students. This study analyzed the factor structure of the CAGE; determined which of the CAGE’s items best predicted alcohol abuse or dependence in the college population; and determined if modifying the CAGE altered the factor structure or improved the CAGE’s reliability or predictive validity. Results indicated that the modified CAGE correctly classified students with alcohol abuse and alcohol dependency more often than the CAGE.

Colleges have a duty to provide trans-inclusive healthcare not only for transgender or gender nonconforming students but to comply with Title IX guidelines. This article provides several recommendations to create college environments that are inclusive and affirming of transgender, gender nonconforming, genderqueer, and similarly identified students. Recommended practices and strategies are covered on the following topics: access, health insurance, names, identity, medical records, health informatics, gender identity, personnel, continuing education, training, mental health services, and health promotion/prevention.


The goal of the current study was to explore features of campus mental health services that influence help-seeking behaviors of college students. Specifically, the authors explored the following research questions: 1. Are there segments of students who prefer different mental health services? 2. What attributes of campus mental health services influence each segment’s utilization decisions? and 3. Would students use an E-mental health service? The study used a discrete choice conjoint experiment to examine preferences among 909 surveyed Canadian students. Results indicated that three classes were a better fit compared to a two-class model. 45.5% of participants were most likely to contact a program where they could talk to psychologists or psychiatrists. 39.3% of participants choose services providing alternatives to psychotherapy or medication such as those that focused on diet and exercise. Finally, 15.2% of participants indicated they would be less likely to use psychologists, psychiatrists, or alternative services if they were experiencing mental health problems, this group also indicated greater distress. 89.5% of participants choose standard counseling over E-Mental Health however, participants who choose alternatives were most likely to choose E-Mental Health Counseling. If wait times for standard counseling were higher than E-Mental Health, participants were more likely to choose E-Mental Health.


It appears that mental health issues are increasing among college students including issues like depression, generalized anxiety, and suicide. Even though treatment is available, many students are not utilizing mental health services. College campuses are in the unique position to help students by developing and evaluating best practices for mental health treatment along with prevention. Examining variations in prevalence and treatment usage across varying universities
can help in understanding how the environment shapes student mental health. The current study examines 72 colleges and universities who participated in the Healthy Minds Study between the years of 2007 and 2013. Multivariable logistic regressions found that lower mental health outcomes were associated with institutions that were doctoral-granting, public, had large enrollment, nonresidential, less competitive, and those that had lower graduation rates. Characteristics associated with higher treatment utilization by students with mental health problems included doctoral-granting institutions, baccalaureate colleges, institutions with small enrollments, and institutions with strong residential systems.


Sexual orientation or gender identity goes beyond the terms straight, gay, lesbian, bisexual, and transgender. Fluidity exists in gender identity. For example, transgender does not automatically mean the individual wishes to transition. In fact, some individuals do not want to be male or female, some consider themselves both, and some do not want to be tied down to a binary system. It is important to remember that sexuality intersect with other identities like social class and ethnicity. Additionally, language and terminology are constantly evolving or changing over time, this article contains several sexual identity labels and definitions in Table 1 on page 504. Past research has found that nonheterosexual students engage in higher-risk behaviors (sexual health, mental health, body image) and less protective behaviors compared to heterosexual students. Rates for those who identify as bisexual may be even higher. Less is known about those who are more fluid in their identity (i.e. those whose identity may change over time). Those who identify as gender nonconforming or genderqueer are often less connected and supported by the trans and LGBQ communities and often report feeling isolated. College health professionals are encouraged to self-reflect on their own identities, increase their knowledge of evolving identities, increase awareness of the self-identified labels of students, and understand that self-identification and behaviors do not always align so it is important to avoid assumptions based on behaviors.


The authors of this study compared college employees who received Applied Suicide Intervention Skills Training (ASIST) to those who were on a wait list to receive training. ASIST trains individuals in suicide intervention generally allowing them to feel more competent and confident when interacting with a person-at-risk of suicide. ASIST uses the Pathway for Assisting Life (PAL) model which emphasizes the quality of the interaction between the caregiver and person-at-risk. Pre and post-training were analyzed to explore skills for responding to students at risk, attitudes towards suicide, knowledge about suicide, and comfort, competence, and confidence when helping a student at risk. The authors found that ASIST improved both the self-perception and intervention skills of college staff working with at risk students. Those who participated in ASIST had more knowledge about suicide when compared to the control group.
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