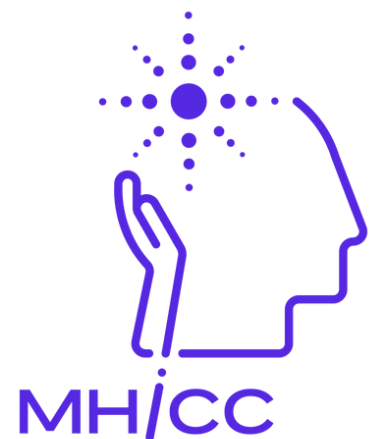
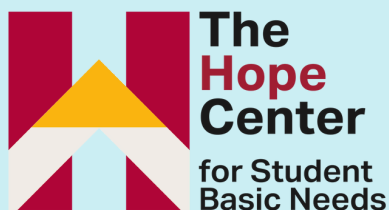


# MENTAL HEALTH LANDSCAPE REPORT *for* **WASHTENAW COMMUNITY COLLEGE**

*JUNE 2025*

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Mental Health  
Improvement through  
Community Colleges



## MHICC MISSION STATEMENT

The Mental Health Improvement through Community Colleges (MHICC) team works in partnership with Michigan community colleges to improve the availability, accessibility, and equitable distribution of mental health resources for community college students across Michigan.

## FUNDING DISCLAIMER

The MHICC initiative is supported by funds from the Center of Medicare and Medicaid Services through the Michigan Department of Health and Human Services, the Blue Cross Blue Shield Foundation of Michigan, the John G. Searle professorship, the IMPACT Center at the University of Washington, and the Michigan Health Endowment Fund.

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## BACKGROUND

Community college (CC) students often face unique mental health challenges, with over half of community college students experiencing clinically significant mental health challenges.<sup>1</sup> Despite this, community colleges often have fewer resources, funding, and infrastructure to support student mental health than 4 year colleges and universities, creating disparities in treatment access for students. The MHICC team works in partnership with Michigan community colleges to close this treatment gap through research, advocacy, partnership, and innovation.

## OBJECTIVE OF THIS REPORT

This report seeks to shed light on the availability and accessibility of mental health services for students at **Washtenaw Community College (WCC)**. The goal of this report is to support WCC faculty, staff, and administrators in their efforts to expand student access to evidence-based mental health care by highlighting how WCC compares to other Michigan community colleges.

Our research highlights significant variation in how Michigan's community colleges approach student mental health, as well as the many barriers that institutions face in trying to enhance support. We hope this report helps address some of those barriers by providing key data points to inform decision-making and strengthen advocacy efforts.

## DATA SOURCE

The data presented in this report were collected from the 2024 Michigan Mental Health Landscape Survey, an annual survey fielded to professionals at each of Michigan's 31 community colleges. Representatives from 23 colleges completed the survey in 2024. For more information, see the Methodology section on page 8 of this report.

## KEY FINDINGS

Our research finds that WCC:

- Provides a variety of mental health services to students, including individual and telehealth counseling; crisis services; a behavioral intervention team; and referrals to community care.
- Has 2 dual-role and 2 dedicated mental health providers.
- Utilizes a Digital Mental Health Intervention (DMHI) to support student mental health.
- Leverages a formal partnership with local mental health providers to expand students' access to mental health care.

For more information and resources, visit [mentalhealthcc.org](https://mentalhealthcc.org).

# MENTAL HEALTH SERVICES AVAILABLE

Students’ access to mental health support varies widely across Michigan CCs. While some colleges offer a range of in-house services, others provide none at all.

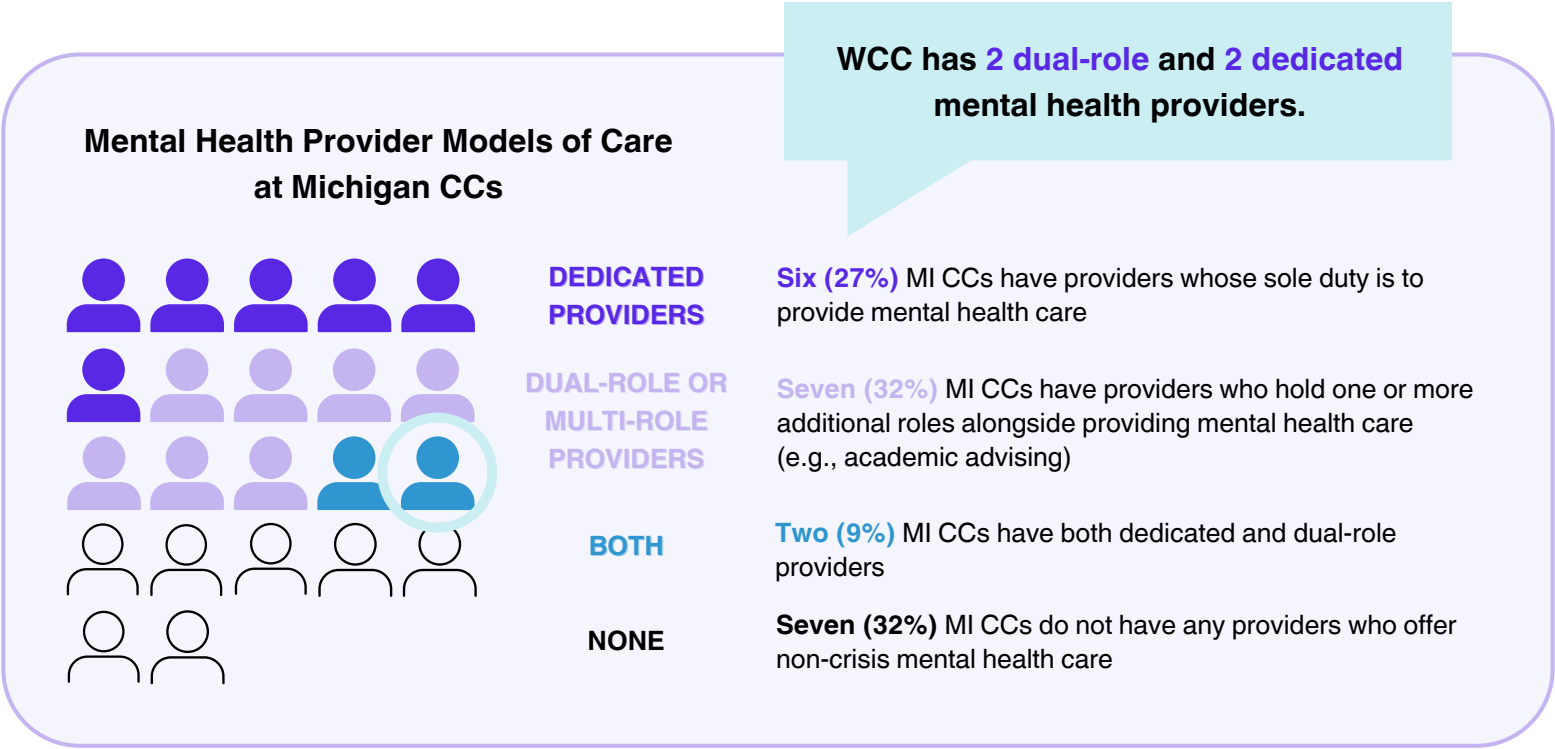
Our data show that WCC offers the following in-house mental health services:

INDIVIDUAL COUNSELING	GROUP COUNSELING	TELEHEALTH COUNSELING	CRISIS SERVICES	BEHAVIORAL INTERVENTION TEAM	COMMUNITY REFERRALS
✓	✗	✓	✓	✓	✓
70% of MI CCs provide individual counseling to students	35% of MI CCs provide group counseling to students	65% of MI CCs provide telehealth counseling to students	74% of MI CCs provide crisis services to students	61% of MI CCs have a Behavioral Intervention Team	87% of MI CCs provide community referrals to students

Note: “In-house” services are those provided directly by a college, either through college staff or contracted providers.

# MENTAL HEALTH PROVIDER STAFFING

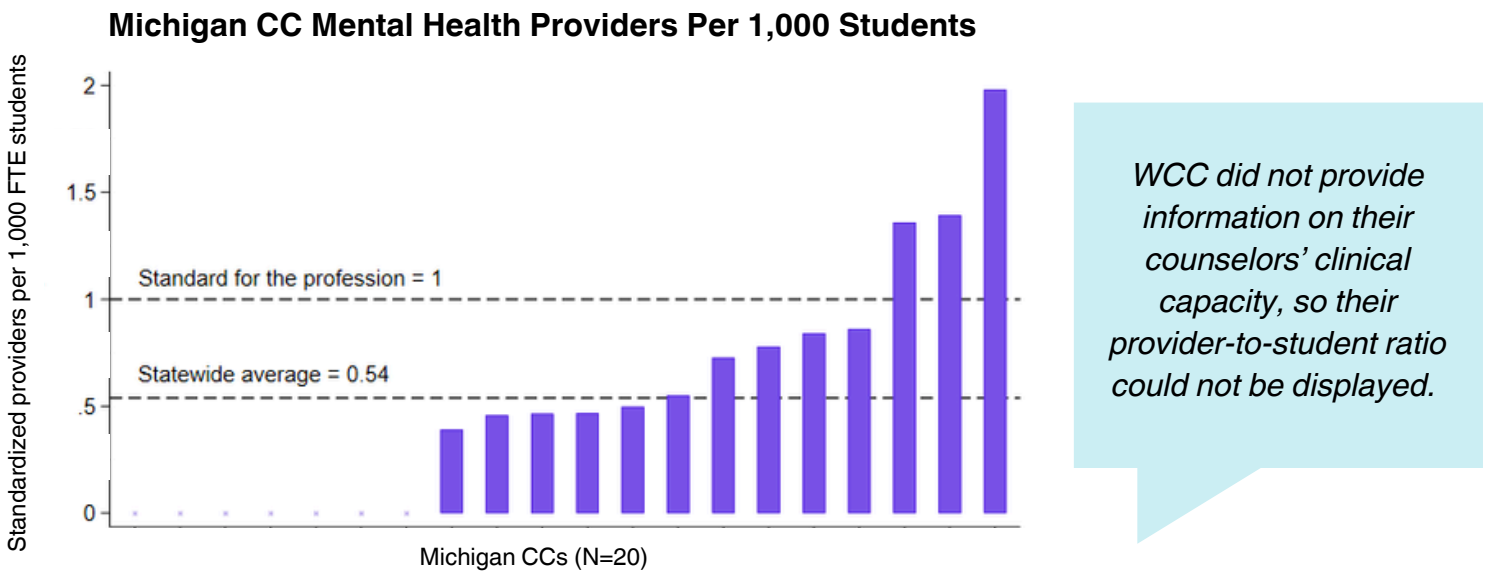
Among colleges that offer non-crisis mental health care (i.e., individual counseling), staffing models can look very different. The chart below highlights the range of care models used to support students.



# MENTAL HEALTH PROVIDER CAPACITY

The International Accreditation of Counseling Services recommends a ratio of one full-time mental health provider to every 1,000 students, often known as the standard for the profession within college counseling.<sup>2</sup>

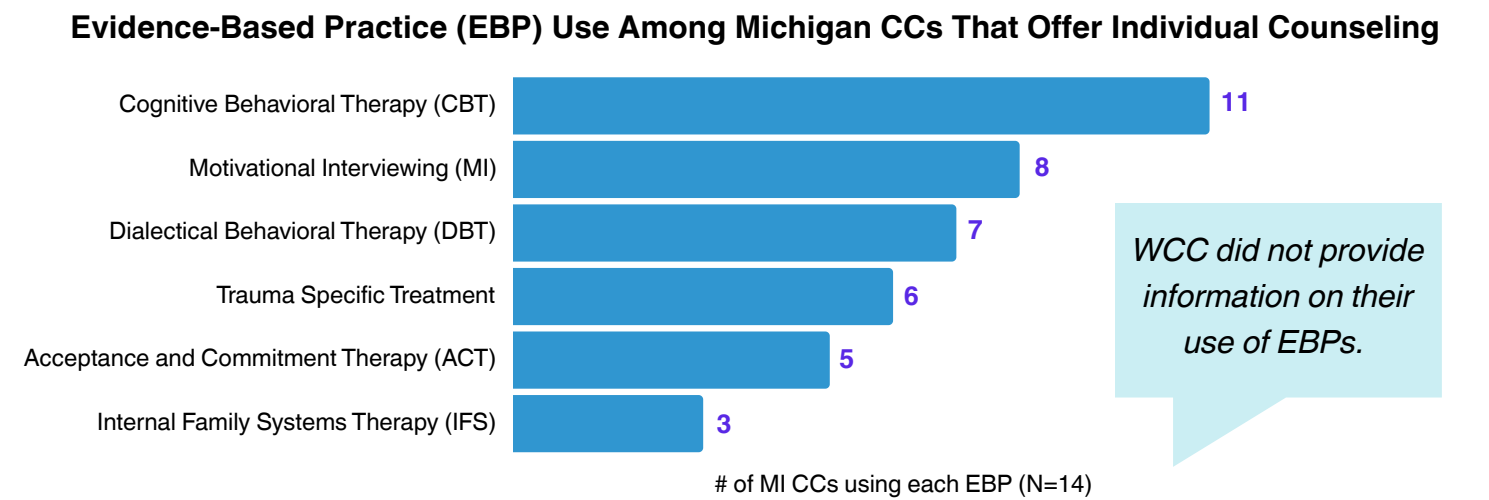
The graph below depicts the provider-to-student ratio across Michigan CCs. The statewide average is 0.54 mental health providers per 1,000 students.



*Note: This data represents colleges' total clinical capacity to provide individual counseling. One standardized provider represents a 24-hour block of clinical hours per week, assuming a provider working 40 hours per week would have 24 clinical hours per week. For more information on this measure, see the Methodology section on page 8.*

# EVIDENCE-BASED PRACTICE USE

Access to mental health evidence-based practices also varies considerably by college. The chart below illustrates different research-supported approaches used by Michigan CCs that provide individual counseling.



*Note: Trauma Specific Treatment is used here as an umbrella for various therapeutic modalities that are specific to the treatment of trauma.*

## COUNSELING SESSION LIMITS

At some colleges, students can only access a limited number of counseling sessions per year.

Among MI CCs that offer individual counseling to students:



33% of CCs with individual counseling **have a limit** on the number of counseling sessions offered to students

**10 SESSIONS**

average (mean) number of counseling sessions a student can attend per year among CCs that have a session limit

Session limits vary between colleges that enforce them, ranging between 6 - 14 sessions per year.

**WCC has a limit of ~6 counseling sessions students can access per academic year.**

Colleges often set session limits to help providers reach more students. However, for students who need long-term support — especially those facing complex or persistent mental health challenges — these limits can create additional barriers to treatment.

## DIGITAL MENTAL HEALTH INTERVENTIONS

Some colleges use third-party mobile apps and/or web-based resources, often referred to as **Digital Mental Health Interventions (DMHIs)**, to increase students' access to mental health support.



41% of MI CCs offer a DMHI to their students.



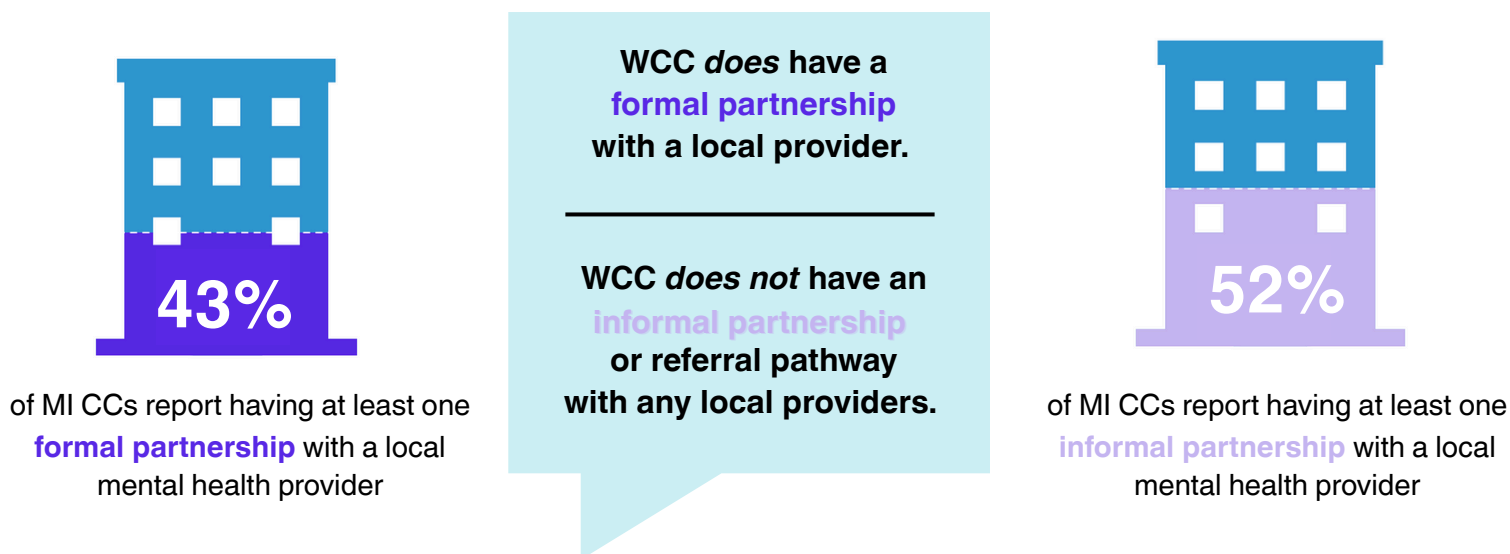
The most commonly used DMHI among MI CCs is UWill.

**WCC offers Welltrack to students.**

DMHIs don't replace on-campus counseling. Instead, they're an innovative way to offer additional support to students who can't access traditional services due to factors such as long wait times, scheduling difficulties, or discomfort with meeting with a counselor.

## COMMUNITY PARTNERSHIPS

Many Michigan CCs partner with local providers and organizations to expand students' access to comprehensive mental health services, without requiring colleges to provide every service directly. These partnerships range from informal personal connections to formal agreements where a Memoranda of Understanding or other contract is in place.



Local partnerships can be especially useful for colleges with limited in-house counseling services, and can also allow colleges to connect students with specialized providers and higher levels of care.

## NEXT STEPS & ADDITIONAL OPPORTUNITIES

Additional data and tailored resources related to mental health service provision are available at [MiTRENDS.org](https://mitrends.org), our newly launched technical assistance platform. MiTRENDS features specialized toolkits and curated external resources to further support colleges in expanding their capacity to support student mental health.

The next round of the Michigan Mental Health Landscape Survey will launch in Fall 2025. This survey will assess changes in the information presented throughout this report and more, allowing your college to update the information listed on the Michigan Mental Health Resource Navigator ([MiNav.org](https://minav.org)). Following this, updated landscape reports will be provided for each participating college to reflect the 2025 data.

If you have questions or concerns about any of the data presented in this report, please contact the MHICC team at [mhiccteam@umich.edu](mailto:mhiccteam@umich.edu).

## METHODOLOGY

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Representatives from all 31 of Michigan's community and tribal colleges were invited to participate in the Michigan Mental Health Landscape Survey in May 2024. The survey was distributed via Qualtrics to MHICC's established contacts at each institution. It remained open from May through December 2024, with targeted reminder messages sent periodically throughout the survey window. Representatives from 23 of the 31 colleges completed the survey, resulting in a 74% response rate. Respondents held a range of roles across institutions: 35% held counseling roles, 48% held administrative roles, and 17% worked in student support staff roles. All respondents confirmed that they were moderately (22%) or very (78%) familiar with mental health services available at their college.

Given that responses to survey questions were voluntary, some colleges left occasional data fields blank, while two respondents submitted partial survey responses. When compiling the survey data, colleges that were missing data for a metric were omitted from the corresponding percentages shown throughout this report.

Standardized Counselors per 1000 Students Metric: This metric was developed based on the Center for Collegiate Mental Health's (CCMH) Clinical Load Index (CLI), which assesses counselor workload and student utilization. Due to limited data on the number of students seen, our team developed a ratio of standardized counselors, defined as 24 clinical hours per week, to 1,000 students. This approach aligns with the International Accreditation of Counseling Services (IACS) recommendation of one counselor per 1,000 students. Enrollment figures for each institution were obtained from the National Center for Education Statistics (NCES), using the Full-Time Equivalent (FTE) enrollment data for the 2022–2023 academic year.

## REFERENCES

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(1) Lipson SK, Phillips MV, Winkquist N, Eisenberg D, & Lattie EG. Mental health conditions among community college students: A national study of prevalence and use of treatment services. *Psychiatr Serv.* 2024;72(10):1126–1133.

(2) International Accreditation of Counseling Services. Staff to student ratios. *International Accreditation of Counseling Services*. Accessed May 16, 2025. <https://iacsinc.org/staff-to-student-ratios/>.

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