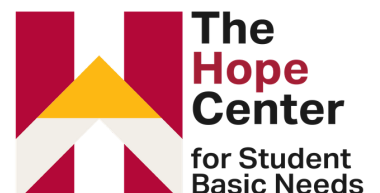


2025-2026
**MENTAL HEALTH
LANDSCAPE REPORT**
for **GLEN OAKS
COMMUNITY
COLLEGE**

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 students across the state.

FUNDING DISCLAIMER

The MHICC initiative is supported by funds from the Michigan Health Endowment Fund and the Centers for Medicare & Medicaid Services through the Michigan Department of Health and Human Services.

University of Michigan IRB #: HUM00193791

Principal Investigators:

Shawna N. Smith, PhD

MHICC Principal Investigator

Associate Professor of Health Management & Policy

University of Michigan School of Public Health

Sara Abelson, PhD, MPH

MHICC Principal Investigator

Assistant Professor and Senior Director for Education and Training Services

Hope Center for Student Basic Needs, Temple University Lewis Katz School of Medicine



mentalhealthcc.org



mhiccteam@umich.edu

© 2023 The Regents of the University of Michigan
Mental Health Improvement through Community Colleges
These materials are licensed under a Creative Commons Non-Commercial License [CC BY-NC 4.0](https://creativecommons.org/licenses/by-nc/4.0/)

First published July 2026
Last revised July 2026

BACKGROUND

Community college (CC) students often face unique mental health challenges, with over half of CC students experiencing clinically significant mental health challenges.¹ Despite this, CCs 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.^{2,3} The MHICC team works in partnership with Michigan CCs 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 **Glen Oaks Community College (GOCC)**. The goal of this report is to support GOCC faculty, staff, and administrators in their efforts to expand student access to evidence-based mental health care by highlighting how GOCC compares to other Michigan CCs.

Our research highlights significant variation in how Michigan CCs 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 2025-2026 Michigan Mental Health Landscape Survey, an annual survey fielded to mental health decision-makers at each of Michigan's 31 community colleges. Representatives from 23 colleges completed the survey during the 2025-2026 academic year. For more information, see the Methodology section on page 12 of this report.

KEY FINDINGS

Our research finds that GOCC:

- Provides a variety of mental health services to students, including individual counseling, crisis services, mental health workshops, and referrals to community resources.
- Has 1 campus mental health counselor, who operates as a dual-role provider.
- Has a counselor-to-student ratio of 1:2,822. This ratio is lower than the statewide average for Michigan CCs, but greater than the recommended ratio of 1:1,000-1,500 set by the International Accreditation of Counseling Services.
- Primarily provides short-term counseling services to students but does not have a limit on the number of sessions a student can receive.
- Utilizes a digital mental health intervention (DMHI), Uwill, to support student mental health.
- Leverages at least one informal partnership with local mental health providers to expand students' access to mental health care.

ON-CAMPUS MENTAL HEALTH SERVICES AVAILABLE

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

The table below highlights the on-campus mental health services that GOCC offers to students, and how this compares to other Michigan CCs.

Mental health service	Service provided by GOCC?	Percentage of MI CCs providing each service
Individual counseling	✓	78%
Crisis counseling	✓	78%
Mental health workshops	✓	61%
Group counseling	✗	13%
Psychiatric services	✗	9%
Peer support	✗	4%
Community referrals*	✓	96%

*While nearly all Michigan CCs provide community referrals to local mental health resources, students may encounter barriers to accessing off-campus care, including long wait times, financial constraints, insurance requirements, and transportation challenges. Providing on-campus mental health services can help mitigate these barriers and strengthen overall student support.

GOCC ***does not*** offer
telehealth counseling
to students

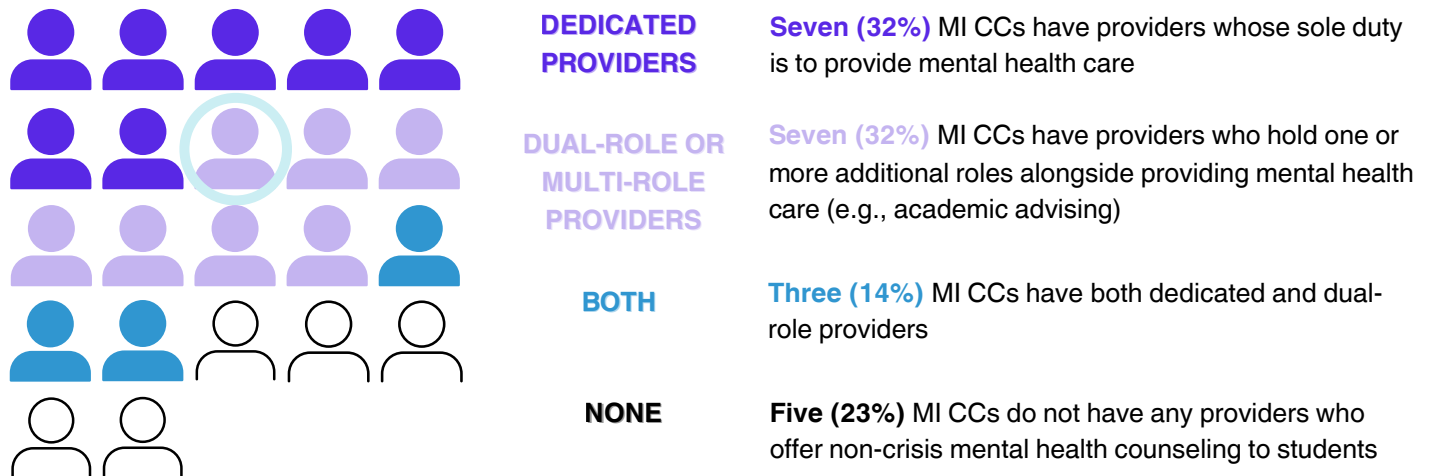
Counseling Service Modalities Available

Among colleges that provide individual counseling, **94%** report that counseling services are available **both in-person and via telehealth**.

MENTAL HEALTH PROVIDER STAFFING

Among colleges that offer on-campus counseling services to students, staffing models can look very different. The chart below highlights the range of care models used to support students.

GOCC has 1 dual-role mental health provider



Although nearly half of Michigan CCs have dual-role providers, using licensed mental health providers to also fulfill non-mental health-related roles underutilizes their expertise and can strain these providers as they work to balance multiple roles.

Additionally, dual-role providers can create confusion for students about where to go for help, especially when counseling roles overlap with other student services roles such as academic advising.

GOCC does not utilize a contracted mental health provider as their campus counselor

Use of Contracted Mental Health Providers

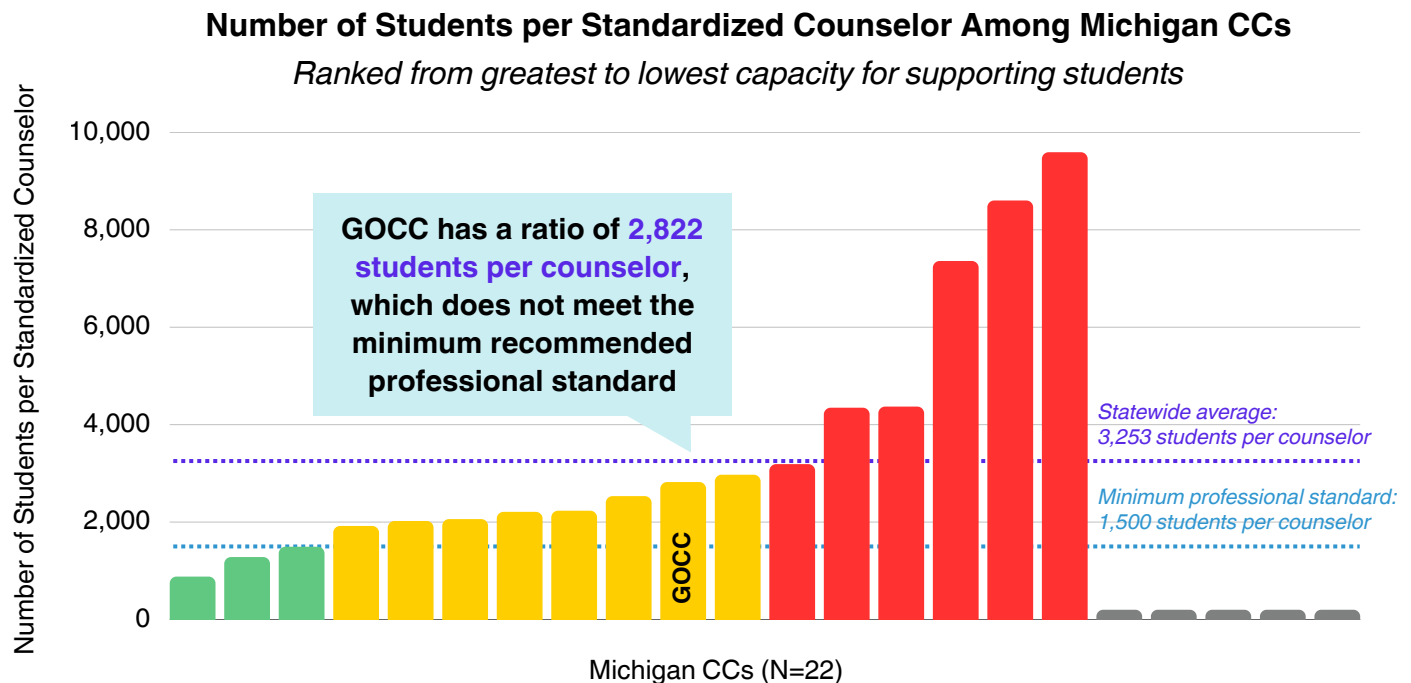
While most campus mental health counselors are college employees, 22% of Michigan CCs contract with local mental health providers from the community to provide services to students on campus for a given number of hours per week. All Michigan CCs that utilize contracted local providers report that these individuals serve as dedicated providers, and do not hold other roles on their campus.

Contracted providers are typically compensated an agreed-upon fee for every counseling session or hour of care provided to students. While the use of contracted local mental health providers can be a cost-effective approach to supporting student mental health needs, this model of care limits the amount of non-clinical effort that providers are compensated to provide (i.e., contracted providers are often not able to provide mental health awareness trainings to faculty, staff, and students, or to engage in efforts to promote campus mental health services).

MENTAL HEALTH PROVIDER CAPACITY

The International Accreditation of Counseling Services, which sets benchmarks for college counseling services, recommends a ratio of 1 full-time mental health counselor for every 1,000-1,500 students. This capacity ratio serves as the standard for the profession within college counseling.⁴

The graph below depicts the range of counselor-to-student ratios across Michigan CCs.*



Proportion of Michigan CCs That Meet Recommended Counseling Capacity

- 14%** ■ Meet or exceed the recommended counseling capacity (ratio of 1 counselor to every 1,500 or fewer students)
- 36%** ■ Have 50% to 99% of the recommended counseling capacity (ratio of 1 counselor to every 1,501-3,000 students)
- 27%** ■ Have less than 50% of the recommended counseling capacity (ratio of 1 counselor to every 3,001 students or greater)
- 23%** ■ Have no counseling capacity (individual counseling not offered at the college)

**Note: The data shown in this graph represents colleges' total clinical capacity to provide individual counseling, compared to all enrolled students with access to counseling services. For the sake of this data, one standardized mental health counselor 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 (page 14).*

As shown above, 86% of Michigan CCs fall below the recommended counselor-to-student ratio.

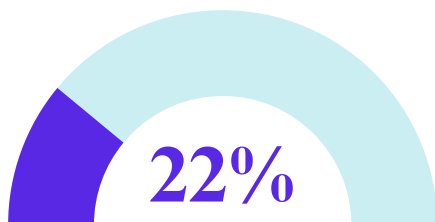
When colleges fall below this recommended capacity ratio, counselors are likely to become limited in the support they can provide to students and the broader campus, and students are more likely to experience long wait times for services. Falling below this ratio also increases a college's vulnerability to liability risks following student suicide deaths, as the college can be deemed as not abiding by the standards for the profession.⁵

LOCATION OF MENTAL HEALTH COUNSELING SERVICES

The International Accreditation of Counseling Services (IACS) recommends that campus counseling services be located in a central, accessible space that is separate from administrative or enforcement offices and designed to protect privacy through sound-insulated counseling offices and a private waiting area.⁴

While housing mental health services in a dedicated mental health counseling center is widely considered a best practice on college campuses, our data show that the location where mental health counseling services are housed varies across Michigan CCs.

Among the 78% of Michigan CCs that provide individual mental health counseling:



house their counseling services within a **dedicated mental health counseling center**

GOCC ***does not*** have a **campus counseling center**

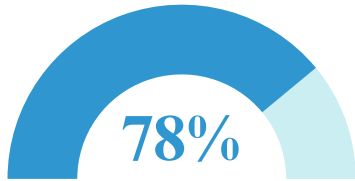
When colleges don't have a dedicated counseling center, campus counseling services are most often housed within or alongside either academic advising services or other student support services, such as basic needs or disability support services.

However, **having a dedicated counseling center that exclusively houses mental health services can minimize student confusion about where to go for different services and can enhance students' feelings of privacy and confidentiality when seeking care.**

GOCC offers primarily **short-term** counseling services

COUNSELING SERVICE DURATION

Some colleges design their counseling services to support short-term student mental health needs, while referring out students who may be seeking or needing long-term support.



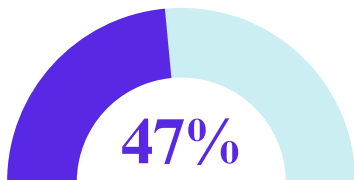
of Michigan CCs that offer individual counseling indicate that they **primarily offer short-term counseling services**

Applying a short-term focus to campus counseling services can make it challenging for providers to effectively utilize mental health evidence-based practices other than Solution-Focused Brief Therapy (SFBT), as many therapeutic evidence-based practices require at least 6 sessions for demonstrated effectiveness.

For more information on evidence-based practice use among Michigan CCs, see page 9.

COUNSELING SESSION LIMITS

Some colleges have a formal cap on the number of counseling sessions that students can receive in an effort for campus providers to reach more students.



of Michigan CCs that offer individual counseling **have a limit** on the number of sessions offered to students

GOCC does not have a **session limit** on counseling services

10
SESSIONS

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

Session limits enforced by Michigan CCs range from 3 to 16 sessions per year. However, many colleges report that exceptions to their session limit can be made on a case-by-case basis.

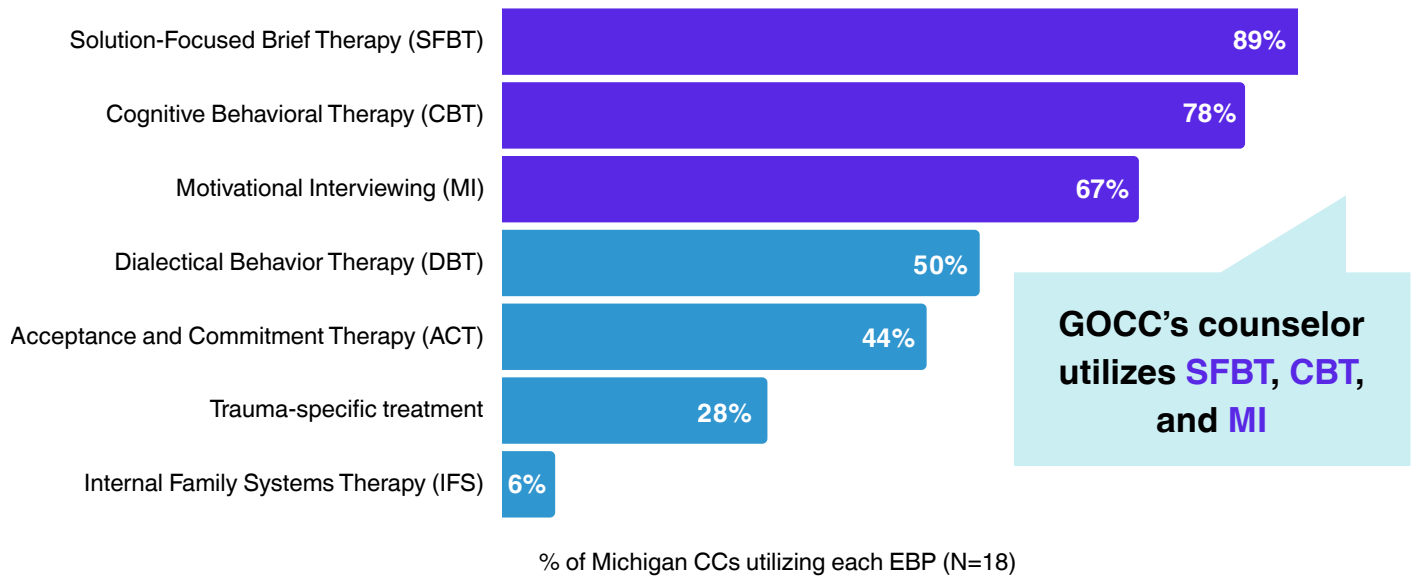
While this approach can help providers reach more students, session limits can create additional barriers to treatment for students who need long-term support, including those facing complex or persistent mental health challenges.

EVIDENCE-BASED PRACTICE USE

Mental health evidence-based practices (EBPs) are therapeutic interventions that have been scientifically proven to be effective through rigorous research. Utilizing each of these practices requires specific training, and therefore EBP use varies by provider.

The chart below highlights the EBPs most commonly used by on-campus providers at Michigan CCs.

Evidence-Based Practice (EBP) Use Among Michigan CCs That Offer Individual Counseling



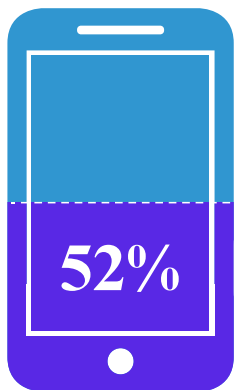
While many CC counseling services are focused on providing short-term care (as highlighted on page 8), many therapeutic EBPs require at least 6 sessions for demonstrated effectiveness, making it difficult for providers to effectively serve students in a limited number of sessions.

Desired Training in EBPs

When asked which new EBPs colleges would like to offer to students, CCs most commonly reported wanting to use **trauma-specific treatments**, such as Eye Movement Desensitization and Reprocessing therapy (EMDR), Trauma-Focused CBT, and somatic-based treatments.

DIGITAL MENTAL HEALTH INTERVENTION USE

Some colleges are using third-party mobile apps and/or web-based resources, often referred to as **digital mental health interventions (DMHIs)**, to increase student access to mental health support.



of Michigan CCs report
offering a DMHI to their
students

GOCC offers
Uwill
to students

DMHIs Used by Michigan Community Colleges

- 1 **Uwill**
- 2 **TimelyCare**
- 3 **BetterMynd**
- 4 **TalkCampus**
- 5 **Welltrack**

Offering a DMHI can provide students with access to a greater variety of provider identities than may be available on-campus, as well as a wider range of hours that services are available. However, DMHIs generally don't meet the mental health needs and preferences of all students (as many students prefer in-person services and some students lack reliable access to the technology, internet connection, and privacy required to engage with a DMHI). Given these limitations, **DMHIs do NOT replace the need for on-campus mental health services**, but have potential as an additive support.



Related Resource

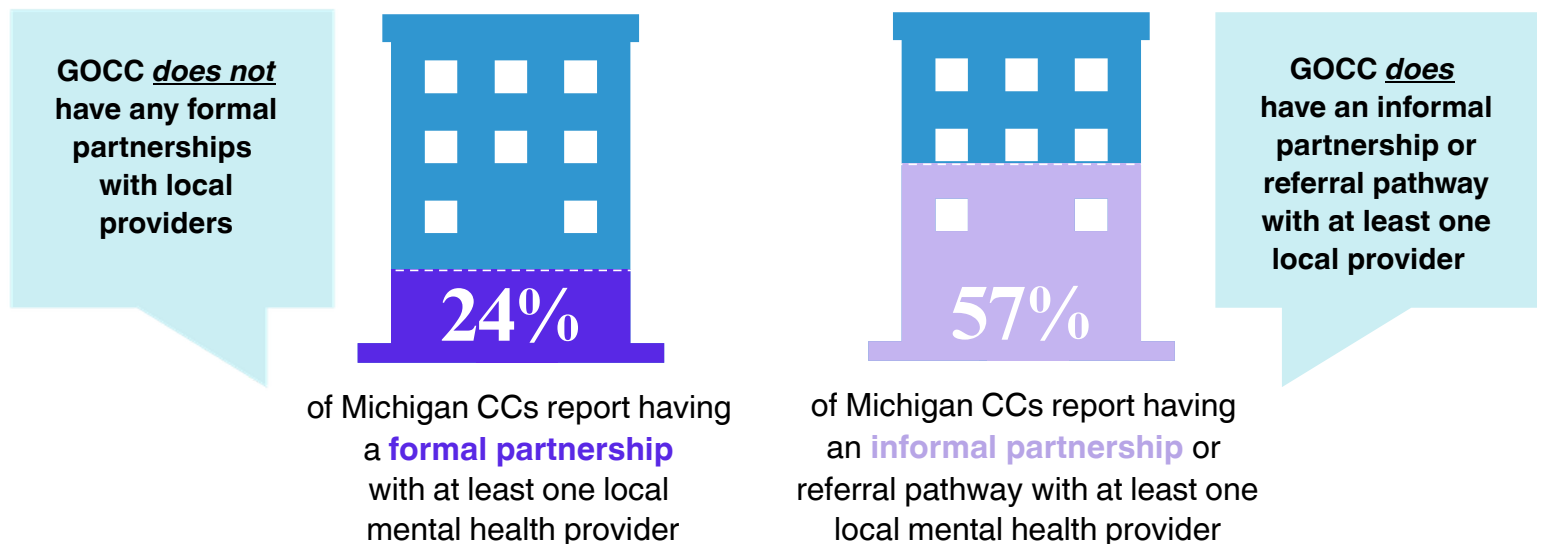
**Digital Approaches to Supporting Student Mental Health:
Key Considerations for Michigan Community Colleges**



This resource discusses the role of Digital Mental Health Interventions (DMHIs) in supporting student mental health, while also offering guidance to aid CC administrators and mental health providers in making informed decisions about implementing DMHIs at their college.

PARTNERSHIPS WITH LOCAL MENTAL HEALTH PROVIDERS

Many Michigan CCs partner with local mental health providers and service organizations to expand students' access to comprehensive mental health services. These partnerships range from informal or personal connections to formal agreements where a memorandum of understanding (MOU) or other contract is in place.



Community partnerships can significantly enhance students' access to mental health care without requiring colleges to provide every service directly. These partnerships can be especially useful for colleges with limited on-campus counseling services, and can also allow colleges to connect students with specialized providers and higher levels of care.

Informal partnerships vary greatly across institutions, ranging from offering students information on a local provider, to providing “warm handoffs” with the student and local provider. Strengthening and formalizing these partnerships can help ensure more reliable and sustainable support for all students.



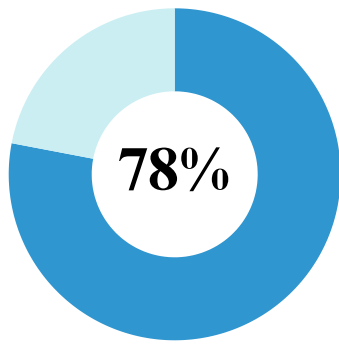
Related Resource

Developing Memoranda of Understanding: A “How-To” Guide for Creating Formal Partnerships with Local Mental Health Providers



This resource discusses the purpose and potential uses of formal partnerships between colleges and local mental health providers, describes action steps and considerations for developing an MOU with local mental health providers, and provides tangible examples and templates for drafting a comprehensive MOU.

ADDITIONAL RESOURCES AVAILABLE TO SUPPORT STUDENTS



GOCC does have a BIT

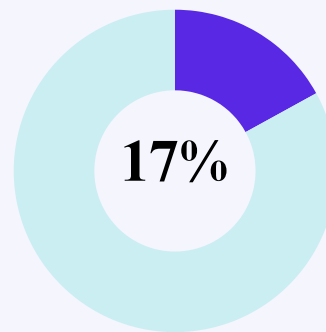
of Michigan CCs report having a **Behavioral Intervention Team (BIT)**

Behavioral Intervention Teams (BITs; sometimes referred to as Care Teams) are comprised of representatives from multiple campus units who collaboratively develop a campus response to students showing signs of a behavioral concern.

BITs play an important role in the prevention of critical incidences, while connecting students who are struggling to appropriate resources and ensuring a coordinated response across institutional departments.

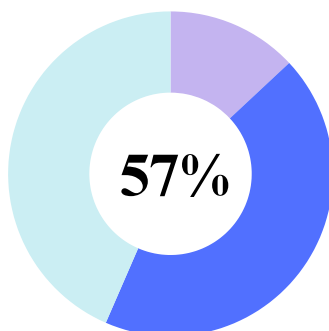
Campus primary care services can play a role in supporting student mental health by providing students with access to psychiatric medication management, and can serve as an important point of connection to other mental health services. Campus primary care services are common at 4-year colleges and universities, and are typically offered through a student health center.

Only a few Michigan CCs offer primary care services to students, and all do so through contracts with local healthcare organizations.



GOCC does not offer primary care services

of Michigan CCs report offering **primary care services** to students



GOCC does not offer self-guided mental health resources

of Michigan CCs report having **self-guided mental health resources** available to students

Self-guided mental health resources are asynchronous, self-paced tools that students can use independently (e.g., coping skill cards, mindfulness exercises). Most CCs that offer self-guided resources do so through a DMHI; when not provided through a DMHI, these resources are often available through the college's website or a resource library within the counseling office.

Self-guided resources can be helpful for students with mild mental health challenges that may not require the support of a mental health provider, allowing campus counseling staff to focus on supporting students with the most acute levels of need.

- 44% offer self-guided mental health support through a DMHI
- 13% offer self-guided mental health support through campus resources (e.g., through the college website or a resource library)

BASIC NEEDS SUPPORTS AVAILABLE TO STUDENTS

Basic needs – such as food, housing, transportation, and childcare – are crucial for students’ mental health and well-being: research indicates that college students experiencing basic needs insecurities are significantly more likely to report anxiety and depression, while mental health challenges can further increase students’ vulnerability to basic needs insecurity and threaten their ability to persist in higher education.^{5,6}

The chart below highlights the basic needs resources available at GOCC.

CAMPUS PANTRY	TRANSPORT- ATION SUPPORT	BASIC NEEDS NAVIGATOR	EMERGENCY AID	HEALTHCARE ENROLLMENT ASSISTANCE	ON-CAMPUS CHILDCARE
96% of MI CCs provide a campus pantry to students	78% of MI CCs provide transportation support to students	70% of MI CCs provide basic needs navigators to students	87% of MI CCs provide emergency aid to students	30% of MI CCs provide healthcare enrollment assistance to students	9% of MI CCs provide on-campus childcare to students

Nearly all (96%) of Michigan CCs provide some form of basic needs resources to students, but these resources are often housed in a separate location than counseling services. As such, integration and coordination between these resources is critical for effectively identifying students’ needs and referring them to the appropriate campus resources.



Related Resource

Barriers to Bridges: Strengthening Michigan Communities by Addressing College Student Basic Needs



To learn more about how basic needs and mental health challenges impact the state of Michigan’s educational attainment goals and what colleges and advocacy organizations are doing to support Michigan students, explore this report from the Michigan Department of Lifelong Education, Advancement, & Potential (MiLEAP)’s Student Basic Needs Task Force.

NEXT STEPS & ADDITIONAL OPPORTUNITIES

Additional data and tailored resources to further support colleges in expanding their capacity to support student mental health are available on our technical assistance platform, the MiTRENDS Mental Health Hub (mitrends.org).

The next round of the Michigan Mental Health Landscape Survey will launch in Fall 2026. This survey will assess changes in the information presented throughout this report, and will allow 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 2026-2027 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.

METHODOLOGY

Representatives from all 31 of Michigan's community and tribal colleges were invited to participate in the Michigan Mental Health Landscape Survey in September 2025. The survey was distributed via Qualtrics to individuals identified as key mental health decision-makers at each institution through MHICC's established contacts and college directories. The survey remained open from September 2025 through April 2026 in order to capture as many responses as possible, with targeted reminder messages sent periodically throughout the survey window. Invited participants were offered a small financial incentive as compensation for their time spent completing the survey.

Representatives from 23 of the 31 colleges completed the 2025-2026 survey, resulting in a 74% response rate. Respondents held a range of roles across institutions, with 48% holding counseling roles and 52% holding administrative roles. All respondents confirmed that they were moderately (9%) or very (91%) familiar with the mental health services available at their college.

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

Mental Health Provider Clinical Capacity Metric: This metric was calculated by the MHICC team as the ratio of standardized counselors to enrolled students, which is compared to the International Accreditation of Counseling Services (IACS)'s recommended ratio of 1 full-time counselor for every 1,000 - 1,500 students. Within this ratio, one standardized provider represents a 24-hour block of clinical hours per week, assuming a provider working 40 hours per week would spend an average of 24 hours providing counseling to students each week. Enrollment figures for each institution were obtained from the National Center for Education Statistics (NCES)' Integrated Postsecondary Education Data System (IPEDS), using the enrollment data for the 2023–2024 academic year.

Due to limited counseling utilization data provided by respondents, this metric serves as a proxy for the Center for Collegiate Mental Health (CCMH)'s Clinical Load Index (CLI), which is computed using colleges' counseling capacity and student utilization.

REFERENCES

- (1) Lipson SK, Phillips MV, Winquist 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) Scofield B & Abelson S. A comparison of college counseling center characteristics at two-year/community colleges versus four-year institutions. Center for Collegiate Mental Health; 2026.
https://ccmh.psu.edu/index.php?option=com_dailyplanetblog&view=entry&year=2026&month=03&day=29&id=68:a-comparison-of-college-counseling-center-characteristics-at-two-year-community-colleges-versus-four-year-institutions
- (3) Rusch A, Ammann A, Mosher K, Choi SY, Bell J, Abelson S, Smith SN. Understanding mental health service provision at community colleges: Findings from a statewide landscape analysis. *J Am Coll Health*. Published online June 12, 2026.
- (4) International Accreditation of Counseling Services. IACS standards. *International Accreditation of Counseling Services*. Accessed May 26, 2026. <https://www.iacsinc.org/iacs-standards>.
- (5) International Accreditation of Counseling Services. Staff to student ratios. *International Accreditation of Counseling Services*. Accessed May 26, 2026. <https://iacsinc.org/staff-to-student-ratios/>.
- (6) The Hope Center for Student Basic Needs. 2023–2024 Student Basic Needs Survey Report. Temple University; 2025. Accessed June 25, 2026. <https://hope.temple.edu/research/hope-center-basic-needs-survey/2023-2024-student-basic-needs-survey-report>.
- (7) Freudenberg N, Goldrick-Rab S, Poppendieck J, et al. Understanding the cumulative burden of basic needs insecurities: associations with health and academic achievement among college students. *Am J Health Promot*. 2021;35(2):275-278.

CONTACT US



mhiccteam@umich.edu



mentalhealthcc.org



@mentalhealth_cc



linkedin.com/company/gomhicc



Shawna N. Smith, PhD

Department of Health Management & Policy,
University of Michigan School of Public Health
shawnana@umich.edu



Sara Abelson, PhD, MPH

Hope Center for Student Basic Needs,
Temple University Lewis Katz School of Medicine
sara.abelson@temple.edu