

I. Reflection Memo

The selection of my assignment topic on the University of Maryland's counseling services was driven by personal relevance and the pressing need for change. My experiences and discussions with peers about the inadequacies of the university's mental health services, especially in the context of a growing global mental health crisis, heavily influenced this choice. Additionally, my active role in a nonprofit organization, where I collaborated with healthcare professionals and led mental health awareness initiatives, further cemented my interest in this topic.

Feedback from Ashfiha Rahman was a turning point. It affirms the clarity with which I had defined and addressed my audience and the effectiveness of how I articulated the issue and proposed a viable solution. This positive feedback was integral to reinforcing my methodological and structural decisions in the document.

Christia Skye Ellerman's feedback was crucial in steering me toward proper MLA formatting, especially concerning citations and the nuanced interplay between the gatekeeper and the primary audience. After much consideration, I decided not to make significant changes, primarily due to the specific role of my chosen gatekeeper, Dr. Joshi, whose focus is more on administrative and policy aspects rather than direct counseling services.

Professor Daune O'Brien's critique highlighted the importance of an articulated problem supported by solid evidence. This feedback prompted me to refine my proposal further, adding more detailed evidence to underscore the benefits of long-term therapy, particularly cognitive behavioral therapy. I specifically addressed the discrepancy between the number of therapy sessions provided by the university and the recognized average needed for meaningful impact.

Combining these varied feedback sources was invaluable in shaping my approach to audience-based writing. This process significantly improved my understanding and application of transparent, evidence-based arguments and meticulous formatting. Each piece of feedback, whether affirming or challenging, played a critical role in developing my writing skills, particularly in addressing specific audiences, which was evident in my final submission.

II: Audience Selection

Gatekeeper:

The pivotal figure in this scenario is Dr. Chetan Joshi, the University of Maryland Counseling Center director. As the gatekeeper, Dr. Joshi's role is central to policy change decision-making and implementation processes within the center. He possesses in-depth knowledge of the center's operational dynamics, resources, and current scope of services. The proposal will likely significantly impact his role, necessitating a thorough evaluation of logistical requirements, budget implications, and potential staffing expansions or restructurings needed to incorporate long-term counseling services.

Primary Audience:

The primary audience is the Counseling Center's staff, including a diverse team of licensed psychologists, counselors, and administrative personnel. These professionals are directly engaged in providing mental health services to the student population and have a range of specializations and expertise in various aspects of mental health. Their direct interaction with students places them at the forefront of understanding the limitations of current short-term counseling practices and the potential benefits of extended services. Implementing long-term counseling would directly influence their daily practices, potentially necessitating new training programs, additional resources, and a shift in counseling methodologies.

Secondary Audience:

This group includes University administrators, such as deans, department heads, and other leaders responsible for student life and welfare. While not directly involved in counseling, these individuals play a crucial role in shaping the overall environment and policies that affect student well-being. They must consider how the proposed expansion aligns with the university's

broader objectives and strategies. Their support is vital for ensuring the allocation of necessary resources, facilitating policy adaptations, and endorsing the proposal across the campus.

Tertiary Audience:

Encompassing the larger university community, including students, faculty, staff, and possibly alumni, the tertiary audience is the broadest and most diverse. This group, although not directly involved in the delivery or administration of counseling services, is deeply affected by the mental health and well-being of the student body. Expanding counseling services to include long-term options could lead to a paradigm shift in the university's approach to mental health, promoting a more inclusive, supportive, and health-conscious campus culture. Their awareness, advocacy, and acceptance of the proposal are crucial for its acceptance and integration into the university's ethos.

III. Cover Letter:

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January 12th, 2024

Dr. Chetan Joshi
Director, Counseling Center
University of Maryland
1101 Shoemaker Building
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College Park, MD

Dear Dr. Joshi,

I am writing to you as an advocate for enhanced mental health support at the University of Maryland, proposing implementing long-term counseling services. My involvement with Health and Education for All (HAEFA) and my birthplace, Bangladesh, have profoundly influenced my perspective on healthcare accessibility and diversity. Endorsed by Dr. Ruhul Abid, a Nobel Peace Prize nominee and esteemed academic, my journey at HAEFA has encompassed roles from student intern to fundraising coordinator, where I have honed vital skills in outreach and empathy.

My time at HAEFA, notably leading a poignant documentary project on the Rohingya refugees, has shaped my approach to inclusive support systems, mirroring the values of your esteemed center. Establishing the HAEFA-UMD chapter and our upcoming spring 2024 fundraiser for underserved populations reflect my commitment to community welfare, a principle I believe is essential for the university's counseling services.

My proposal advocates for long-term mental health support, addressing a critical gap in our current services. This initiative transcends service expansion; it's a step towards cultivating a resilient, empathetic, and inclusive university culture. My experiences, coupled with the expertise of the Counseling Center's team, position us uniquely to effect a substantial positive change in the mental well-being of our students.

I appreciate your consideration of this proposal and look forward to discussing how we can collaboratively realize this vision for our university community.

Sincerely,
Areeb Uzzaman

IV. Cover Page:

University of Maryland College Park

Enhancing Mental Health Support at UMD: A Proposal for Long-Term Counseling Services

Proposal for implementing long-term counseling services at the University of Maryland

Areeb Uzzaman

ENGL393-WB19: Technical Writing

Professor Daune O'Brien

January 16th, 2024

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Part I: Introduction and Context

The University of Maryland, College Park (UMD) is a prestigious institution known for its diverse and vibrant student body, comprehensive academic offerings, and commitment to excellence in higher education. As of the 2022-2023 academic year, UMD boasts a total enrollment of 41,272 students, comprising 30,922 undergraduates and 10,350 graduate students. The gender distribution is nearly balanced, with 20,946 male and 20,326 female students. Notably, UMD offers a range of online learning opportunities, with 1,847 students enrolled exclusively in online programs (UnivStats, 2023). The racial and ethnic diversity at UMD is a testament to its inclusive culture. The student population includes 17,853 White, 7,184 Asian, 4,588 Black/African American, and 3,693 Hispanic students. This diverse milieu enriches the campus experience and highlights its students' varied backgrounds and experiences (UnivStats, 2023).

Despite its many strengths, UMD faces a significant challenge in meeting the mental health needs of its diverse student population. The current counseling services, while robust, are primarily geared towards short-term interventions. This model may not adequately address the complexities and ongoing nature of mental health issues that a significant portion of the student body experiences.

Recent studies indicate that college students nationally have experienced elevated rates of stress and anxiety, especially during the COVID-19 pandemic (Maryland Matters, 2024). This period saw a considerable increase in adverse mental health conditions among young adults, as reported by the Centers for Disease Control and Prevention. At the same time, a study conducted across 63 institutions by Penn State University's Center for Collegiate Mental Health revealed a

32% average decrease in university counseling center utilization, partly attributed to students leaving campus. A nationwide survey revealed that 60% of college students reported being diagnosed with a mental health condition, highlighting an urgent need for comprehensive mental health support on campuses (Maryland Today, 2022).

Dr. Chetan Joshi, Director of the UMD Counseling Center, noted that during this time, issues like academic demands, caring for family, and financial challenges often took precedence over seeking mental health treatment. The pandemic has reshaped the landscape of mental health services, with an increased reliance on online platforms. While these services have offered new opportunities for accessibility, they also present challenges in terms of personal connection and the effectiveness of remote counseling.

Students like Bill Kassay, a senior at UMD, have expressed difficulties finding the right therapist and noted the differences between in-person and online counseling experiences. At UMD, a survey conducted among undergraduates revealed that 92% of the respondents stated that the pandemic had a negative impact on their mental health (The Diamondback, 2021).

To address these challenges, UMD has undertaken various initiatives. For instance, a new course titled "U SAD?: Coping with Stress, Anxiety, and Depression" was introduced to provide students with tools to manage mental health issues (Maryland Today, 2023). The Counseling Center at UMD also offers various services, including short-term individual and group therapy and wellness workshops focusing on anxiety and depression (Maryland Today, 2022). While commendable in their efforts, the University's current counseling services are not comprehensive enough to address students' issues. This is especially true when individual counseling sessions are limited to a maximum of eight sessions per student.

Long-term mental health services, including various forms of psychotherapy such as psychodynamic, cognitive-behavioral, humanistic, and systemic therapies, are generally more comprehensive and are designed to address complex, deep-seated psychological issues. For example, psychodynamic therapies, often influenced by Freud's psychoanalysis, traditionally focus on uncovering unconscious emotions and conflicts, a process that is not constrained by a fixed time limit (Biomedcentral, n.d.). Such therapies are considered particularly beneficial for enduring conditions like personality disorders, where the goal is to alter longstanding emotional, behavioral, and interpersonal patterns (Systematic Reviews, n.d.).

Cognitive and behavioral therapies (CBT), historically derived from the learning theories of Pavlov and Skinner and later integrated with cognitive components by Beck, are often delivered as short-term treatments; however, these typically range between 12 and 20 sessions. These therapies are employed for a range of psychiatric disorders, including depressive and anxiety disorders, but also exist in long-term formats for conditions like borderline personality disorder (Systematic Reviews, n.d.).

The university has expanded its mental health resources, including introducing a suicide prevention program and culturally responsive care (Maryland Today, 2022). However, there remains a gap in providing long-term, sustained mental health support. The need for long-term counseling services is not just a matter of expanding existing services; it is about adapting to the evolving needs of a diverse student population, ensuring their mental well-being, and fostering a supportive campus environment.

The proposal to introduce long-term counseling services at UMD is not just an extension of existing services; it's a strategic move toward addressing a critical gap in student welfare. Like many university counseling services, the University of Maryland's Counseling Center does not

offer long-term counseling services due to a model designed to meet the needs of a large student population with diverse and immediate mental health needs. The decision to not offer long-term counseling services is also influenced by practical considerations, including the licensure requirements of counselors, which may restrict the provision of therapeutic services to students not physically located in Maryland. However, with students increasingly facing complex and multifaceted challenges, the need for a service that offers continued support cannot be overstated. Implementing such a service would mark a significant step towards creating a more resilient, understanding, and inclusive environment at the University of Maryland, aligning with its commitment to student well-being and academic success.

Part II: Literature Review and Available Models

The University of Maryland's Counseling Center offers various short-term services, including individual and group therapy, short-term counseling, wellness workshops, suicide prevention programs, and career counseling, all free for students. These services are designed to be concise, structured, and focused on specific goals. However, these services are inadequate for students needing long-term mental health support, highlighting a significant shortfall in the current model ("Counseling & Mental Health Center | Scope of Care").

While the university's efforts are laudable, adopting a more comprehensive approach, such as the stepped-care model, could enhance its capacity to provide long-term mental health support. For instance, Gordon College utilizes the Stepped Care Model, prioritizing delivering the most effective yet minimally resource-intensive treatment first. The treatment's intensity is adjustable based on client needs, ranging from less intensive methods like self-help or peer support to more involved options like individual therapy or psychiatric consultations. This model

underscores prompt access to care, personalized treatment plans, and technological integration for flexible mental health services (Gordon College).

Other institutions, like Texas Christian University (TCU) and the University of Texas at San Antonio (UTSA), adopt distinct comprehensive approaches. TCU's Counseling and Mental Health Center offer clinical treatment and recovery services supplemented by partnerships with community providers for students with significant mental health needs. This system includes various counseling tracks assigned after initial assessments, including short-term individual counseling, group counseling, and long-term counseling transition tracks (“Counseling & Mental Health Center | Scope of Care”). UTSA's Wellness 360 counseling center integrates student physical and mental health services, providing short-term individual and group counseling, psychiatry, and ongoing virtual appointments through TimelyCare (“Wellness 360 Counseling Services”).

These models exemplify diverse strategies for addressing student mental health needs, especially for long-term support. The multi-track system at TCU and UTSA's integration of virtual counseling services are potential models for UMD to adapt. Implementing similar systems or incorporating virtual services could enhance comprehensive support for UMD students, particularly those requiring ongoing care.

Additionally, UMD could leverage its community for mental health support. For example, Le Moyne College's "Dolphins Spreading HOPE!" program trains students as mental health ambassadors on campus and in local high schools (Mowreader, Paragraph 6). The University of Alabama at Birmingham's Mental Health Advocate Program equips students with tools to support peers (Mowreader, Paragraph 7). The University of Miami's COPE Peer Educators program involves student training and mentoring by counseling staff to aid peers in

navigating college mental health challenges (Mowreader, Paragraph 12). These peer support models offer immediate help and promote a campus-wide mental health awareness culture.

Princeton University's approach involves referring students to off-campus psychological services for long-term, intensive, or specialized treatment, acknowledging that ongoing mental health care typically falls under private health responsibilities. Students are often directed to providers within their insurance networks (“CPS Referral Guide for Off-Campus Psychological Services | University Health Services”). This strategy and peer support models could augment UMD's existing services, offering a more flexible and responsive solution to its student body's diverse mental health needs.

Part III. Analysis and Synthesis

UMD, renowned for its academic rigor and diverse student body, faces a critical challenge in addressing its students' mental health needs. Despite offering a range of short-term mental health services, UMD's current approach does not fully meet the ongoing mental health requirements of its diverse student population, especially in the backdrop of the COVID-19 pandemic and its resultant increased stress levels.

Analyzing the situation at UMD requires a deep understanding of the complexity of student needs. The university's student body is not only diverse in terms of race and ethnicity but also in their mental health needs, which the pandemic has exacerbated. This diversity necessitates a varied and multifaceted approach to mental health services. Moreover, the recent reduction in funding for these services poses a significant challenge in maintaining, let alone expanding, the quality and reach of mental health support.

In exploring alternative models, Gordon College's Stepped-Care Model offers a flexible and efficient approach. This model adjusts the intensity of treatment based on individual needs

and ensures timely access to care. However, it might not fully address more complex individual needs and would require robust assessment tools to be effective.

Texas Christian University's (TCU) multi-track system presents another solution, offering a range of services post-assessment to cater to different levels of mental health needs. While this approach is comprehensive, it could be resource-intensive and complex. Similarly, the University of Texas at San Antonio's (UTSA) integrated approach to physical and mental health services offers a holistic model that requires significant interdisciplinary coordination and could be costly.

As implemented in institutions like Le Moyne College and the University of Alabama at Birmingham, peer support programs enhance the campus mental health culture by providing accessible peer support. These programs, however, are not substitutes for professional care and require adequate training and monitoring. Princeton University's model of referring students to off-campus services for specialized long-term treatment is another viable option. However, it relies heavily on students' insurance coverage and may lead to a disconnect with campus life.

The decision-making process for UMD should begin with a comprehensive assessment of student needs, followed by evaluating available resources. Based on these assessments, UMD could consider integrating models like the stepped-care approach with elements of peer support programs. Such a combination could provide professional and peer assistance, catering to a broader range of student needs while considering resource limitations.

Additionally, UMD could explore collaborations and partnerships for resource sharing and best practices. Implementing the chosen models should be gradual, with continuous monitoring for effectiveness and responsiveness to student feedback. This flexible and responsive approach would allow for adjustments as student needs and the external environment evolve. Addressing UMD's mental health challenges requires a strategic, multifaceted approach

combining various models to offer long-term support, technological integration, and peer involvement. Such a strategy would address the current service gaps and align with UMD's commitment to fostering a supportive and inclusive environment conducive to student well-being and academic success.

Part IV: Proposed Solution

A nuanced and multi-dimensional approach is essential to effectively address the mental health challenges at the University of Maryland (UMD). This approach should draw upon the successful strategies employed by other universities while being tailored to UMD's unique context and resources.

A cornerstone of this strategy is the implementation of the Stepped-Care Model, mirroring the success seen at Gordon College. This model prioritizes efficiency and adaptability, offering various intervention levels tailored to the severity and nature of each student's mental health needs. The range of services in this model can span from accessible self-help resources and online tools for mild issues to more intensive therapy sessions for complex mental health conditions. By ensuring that each student receives the level of care appropriate to their situation, the model maximizes resource efficiency and increases the likelihood of positive outcomes.

In addition to the Stepped-Care Model, incorporating a multi-track system like the one at Texas Christian University can provide a spectrum of post-assessment services tailored to individual student needs. This system would allow UMD to offer various tracks of mental health support, ranging from short-term counseling for immediate issues to more specialized tracks designed for students requiring in-depth, long-term support. By diversifying the types of support available, UMD can better cater to the wide range of mental health issues that its student body might face.

UMD can also benefit from enhancing its online mental health services. In the wake of the COVID-19 pandemic, the need for accessible and effective remote counseling options has become increasingly apparent. This enhancement should focus on developing user-friendly, secure digital platforms that offer various online counseling and therapy services. By doing so, UMD can extend its reach to students enrolled in online programs who prefer remote counseling or need flexible scheduling options.

Peer support programs, inspired by those at Le Moyne College, the University of Alabama at Birmingham, and the University of Miami, present another vital component of the proposed strategy. These programs train students to act as mental health ambassadors, providing peer-to-peer support and fostering a culture of empathy and mental health awareness on campus. While not a substitute for professional care, peer support can be an invaluable first line of response, offering immediate assistance and reducing the stigma around seeking help.

Finally, adopting a model similar to Princeton University's, which involves referring students to specialized off-campus services, can address the need for long-term and intensive mental health care. This model recognizes that some mental health conditions require specialized treatment beyond what university resources can provide. Establishing a robust referral system ensures students access to necessary care while maintaining a connection with the campus support system.

Implementing this comprehensive approach will require careful financial planning and strategic resource allocation. UMD should explore diverse funding avenues, including grants, partnerships, alum funding, and reallocating existing resources. The success of this model hinges on the availability of skilled professionals and trained peer supporters, necessitating a significant investment in recruitment and training programs.

Moreover, regular evaluation and adaptation of these services are crucial to ensure they effectively meet the evolving needs of UMD's student population. By combining various proven models and tailoring them to the unique needs of its student body, UMD can enhance its mental health services, providing immediate and long-term support, leveraging technology for broader accessibility, and fostering a community-driven support system. This approach addresses the current gaps in services and aligns with UMD's commitment to fostering a supportive and inclusive environment conducive to student well-being and academic success.

Part V: Conclusion

In concluding this proposal for enhancing mental health services at UMD, it's crucial to reiterate the strategic importance of a comprehensive and multi-dimensional approach to addressing its student body's diverse mental health needs. This approach, inspired by successful models from other institutions, is designed to provide a more robust, inclusive, and accessible mental health support system.

The cornerstone of this strategy is the implementation of a Stepped-Care Model similar to the one used at Gordon College. This model is not just a treatment method but a philosophy of care. It aligns mental health services with the varying degrees of student needs, ensuring that each individual receives the appropriate level of support. From initial self-help and online resources for milder cases to more intensive therapy for complex conditions, the stepped-care approach ensures efficient resource allocation and maximizes the potential for positive mental health outcomes.

Additionally, introducing a multi-track system modeled after Texas Christian University provides various post-assessment services. This system would facilitate the delivery of tailored mental health support, ranging from brief counseling sessions for immediate issues to specialized

tracks designed for students requiring more profound, long-term intervention. The diversity of this system allows for flexibility and responsiveness to the unique mental health landscapes of different student groups.

To further enhance the mental health support system, UMD should significantly invest in expanding online mental health services. This expansion is critical in an era where digital accessibility is paramount. The focus should be on creating secure, user-friendly digital platforms offering various online counseling and therapy services, catering to students who prefer remote counseling or require flexible scheduling options.

Drawing inspiration from Le Moyne College, the University of Alabama at Birmingham, and the University of Miami, peer support programs should be developed to create a supportive campus culture. These programs are not just about providing immediate assistance; they are about cultivating an environment where mental health is openly discussed and students feel empowered to support one another. Training students to act as mental health ambassadors can bridge formal mental health services gaps and create a more empathetic and understanding campus community.

Lastly, adopting a referral system for specialized care, in line with Princeton University's model, is essential for addressing needs that require long-term and intensive treatment. This system would facilitate seamless connections between UMD's mental health services and external specialized care providers, ensuring continuity of care for students requiring more comprehensive mental health interventions.

Implementing this integrated mental health support model at UMD will require careful planning, allocation of resources, and active involvement from various stakeholders, including university administration, mental health professionals, students, and the wider university

community. This includes securing funding through various channels such as grants, partnerships, and alums contributions and ensuring the recruitment and training of competent professionals and peer supporters.

Moving forward, the first step involves creating a detailed action plan outlining the specific steps and timelines for implementing each component of the proposed model. This plan should include strategies for stakeholder engagement, funding acquisition, staff training, and developing digital and peer support infrastructures. Regular evaluation mechanisms should also be established to monitor the effectiveness of the implemented services and make necessary adjustments based on feedback and changing needs.

This proposal for UMD is about creating a comprehensive, practical, empathetic, and inclusive mental health support system. It is about building a community where mental health support is accessible, stigma is reduced, and every student feels supported in their journey toward mental well-being. This strategic and multi-faceted approach is a significant step towards enhancing the mental health landscape at UMD, aligning with its commitment to fostering an environment that supports its students' holistic well-being and academic success.

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