

Association for University and College Counseling Center Directors (AUCCCD)  
Statement on Parental Notification, Mandatory Counseling and  
Counseling Center Director Status

The last several years have brought an increased national focus on college mental health issues as evidenced by internal reports of increased need for clinical services, high profile law suits, numerous articles in the national media, and the tragic shootings at Virginia Tech. All of these events have triggered a variety of responses, but the Virginia Tech shootings, with the subsequent reports and panels at the federal and state levels, have generated the greatest response. At one level, this attention has been much needed and brought focus to an important issue; however, some of the attention has included statements and information that presents only part of a much more complex picture. The purpose of this statement from the Association for University and College Counseling Center Directors (AUCCCD) is to provide balance to that picture.

College and university students have been characterized in various stories and reports as a young and vulnerable population. As mental health professionals working with this population, we would be the first to acknowledge the developmental issues confronted by these students; however, 18-24 year olds who are not in college or who serve in the military share many of the same developmental issues. In many respects college students are no different from their peers in the issues that they face and actually have a suicide rate that is half that of their peers who do not attend college. AUCCCD affirms that the college students we work with are legally adults and that they are entitled to the same confidentiality that protects all adults who seek counseling from a mental health professional. This is codified in state mental health law and psychology, social work, and counseling licensure laws. These laws acknowledge that confidentiality in treatment does save lives. Some writers and reports have recommended that colleges and universities notify parents when their student appears troubled. This procedure often makes sense for faculty, residence life staff, and other student affairs professionals, and it is allowed under the federal law known as the Family Educational Rights and Privacy Act (FERPA) if there are serious concerns about student behavior. Counseling staff, too, often involve parents or others with the student's consent in the treatment process if doing so would aid in the treatment of the troubled student. However, suggestions that counseling staff routinely involve parents in the treatment process against a student's will are ill-considered. This abrogation of the student's rights should only be used when state law allows, when it is a treatment team decision, and when it is a last resort in cases where other options for safety have been explored and discarded. It should also be acknowledged that a requirement to involve parents is not always an effective treatment intervention and in some situations can actually make a difficult situation worse.

Another issue that has received considerable attention is related to a recommendation that college and university administrators mandate ongoing counseling for troubled college students. Mental health services at their heart respect the ethical principle of autonomy for clients or patients. Accrediting standards of the International Association of Counseling Services (IACS) have long prohibited mandating counseling for students at any accredited counseling service. AUCCCD supports this stance. While AUCCCD is opposed to ongoing mandated treatment, we recognize the value of mandated assessment when it is precipitated by clear problematic behavior and violation of college and university conduct codes.

Administrative models and the counseling center's relationship with the campus health service have also been the focus of media attention. In particular, a recent article in the New England Journal of Medicine has suggested that college and university counseling services could provide more effective services if the "stature and visibility" of the person in charge of mental health services was raised. AUCCCD strongly supports efforts to raise the stature and visibility of all directors of counseling services, but we believe that effective leadership of a mental health service is more about the leadership qualities of the individual as well as experience working with college students, and less about the professional affiliation of the person holding the position of director. AUCCCD affirms that there are many different models of providing counseling services on college and university campuses. Effective directors may hold the professional title of counselor, social worker, psychologist or, of course, physician. Our position on this issue is reflective of the amazing diversity of college campuses across the globe which our nearly 700 members represent. AUCCCD also affirms that it is the responsibility of both college and university counseling services and health services to work together in a collegial and cooperative manner in service to the same students. We acknowledge that there is no one, single administrative structure to accomplish this task best. A recent article has quoted data from AUCCCD's most recent 2006 survey which found that 65% of counseling services were not administratively integrated with health services. This statistic does not mean that those services do not have strong and effective professional relationships. Quite the contrary! Many counseling and health centers operate within the same division and/or under the purview of the same senior administrator. Our study does not support the conclusion that merging campus counseling and health services is the most effective nor sole administrative structure that would serve our students well. A merged counseling and health center is simply one of many effective models for provision of services.

A final complexity that is often overlooked is that college and university counseling services for decades have been leaders in the provision of counseling service to our students. We have pioneered student outreach, worked effectively to lower barriers to students seeking services, routinely considered the role that culture might play in services provided, designed and implemented mental health triage systems (including crisis hotlines), structured policies and procedures for health and mental health leaves from campus, as well as other issues addressed by these articles, lawsuits, and task forces. AUCCCD continues to recommend that administrators and state governments seek input from the professionals who have a wealth of experience and information to share—the counseling center director at the local campus. We respectfully request that these individuals listen to the directors and their staffs at the various institutions when forming policy to address these very important issues.

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