

ANNUAL



REPORT

CCMH CENTER FOR
COLLEGIATE
MENTAL HEALTH

Table of Contents

Acknowledgements	3
CCMH Contributors	3
CCMH Staff	3
Research Team	3
Advisory Board	3
2026 Report Introduction	4
2026 Highlights	4
Annual Trends	5
Data sets	5
Mental Health Trends	5
CCAPS Trends	7
CLICC Trends	8
Mode of Service Trends	9
2025-2026 Data Summary	10
Appointment Statistics	10
Clinician Index of Client Concerns (CLICC)	12
Case Closure Form	14
SDS - Client Demographic Information	17
Provider Data	27
Center Data	28
Institutional Data	31

Acknowledgements

The 2026 Annual Report was made possible by:

- Collaborative efforts of approximately 850 university and college counseling centers
- Association for University and College Counseling Center Directors (AUCCCD)
- Titanium Software, Inc.
- Penn State University Student Affairs
- Penn State University Counseling and Psychological Services

CCMH Contributors

CCMH Staff

Brett E. Scofield, Ph.D. - Executive Director

Rebecca Janis, Ph.D. - Associate Director of Data Science

Alaina Cummins, M.Ed. - Assistant Director of Operations and Partnerships

Tyler White, Ph.D. - Data Analyst

Jodi Williams - Administrative Assistant

Research Team

Louis Castonguay, Ph.D. - Senior Faculty Advisor, Professor of Clinical Psychology, Penn State

Jeff Hayes, Ph.D. - Senior Faculty Advisor, Professor of Counseling Psychology, Penn State

Wilson Trusty, Ph.D. - Faculty Advisor, Assistant Professor of Clinical Psychology, Idaho State University

Sultan McGruder, Ph.D. - Clinical Advisor, CAPS Assistant Director, Diversity, Equity, and Inclusion, Penn State

Elana Szczesny, Ph.D. - Clinical Advisor, CAPS Assistant Director, Commonwealth Campuses, Penn State

Caitlin Chun-Kennedy, Ph.D. - Clinical Advisor, CAPS Externship Coordinator, Penn State

Henry Xiao, Ph.D. - Clinical Advisor, CAPS Operations Coordinator, Penn State

Hongjun Tan, M.S. - Doctoral Student in Clinical Psychology, Penn State

Emily Beattie, M.S. - Doctoral Student in Clinical Psychology, Penn State

Serena Chen, M.S. - Doctoral Student in Clinical Psychology, Penn State

Andrew Nadermann, M.Ed. - Doctoral Student in Counselor Education, Penn State

Advisory Board

Eri Bentley, Ph.D. - Executive Director of Counseling and Prevention Services, Utah State University

Cindy Bruns, Ph.D. - Director of Counseling, Central Washington University (AUCCCD Representative)

Jay Choi, Ph.D. - Director of Counseling Services, Fashion Institute of Technology

Brittany Cooper, Ph.D. - Director of Counseling, Health and Wellness, Northeastern University, Oakland

Alesha Harris, Ph.D. - Dean of Student Holistic Health, Georgia Gwinnett College

Chris Hanes, Ph.D. - Assistant Vice Provost for Student Well-being, Division of Student Life, Purdue University

Holly Harmon, Ph.D. - Director of Counseling Services, University at Buffalo

Trevor Jones, LCSW, MS. - Assistant Director of Informatics, Counseling and Psychological Services, Rochester Institute of Technology

Eileen Kennedy, LCSW-R - Associate Director of Counseling Workshops, Programming & Development, Counseling Services, CUNY/Hunter College

Monique Marsh-Bell, Psy.D. - Director of Counseling Services, Southern Methodist University

Riley McGrath, Ph.D. - Director of Counseling Services, University of Wisconsin Eau Claire

Adam Sargent, Ph.D. - Director of Counseling Services, Colorado State University, Fort Collins

Joshua Turchan, Ph.D., ABPP - Assistant Director - Training, Assessment, and Research at Counseling and Psychiatric Services, Michigan State University

Board Members Beginning 2026

David Browne, LICSW - Coordinator of Clinical Systems, Center for Counseling and Psychological Health, UMass Amherst

Kaitlin Hill, MS, LPC-S - Associate Dean of Counseling and Psychological Services, Dallas College

Aaron Jeffrey, PhD, LMFT - Director, Counseling and Psychological Services Center, Weber State University

Vonchell Lewis, LCSW - Mental Health Clinician, Student Counseling Center, Hampton University

2026 Report Introduction

The 2026 Annual Report summarizes data contributed to CCMH during the 2025-2026 academic year, beginning July 1, 2025 and closing on June 30, 2026. De-identified data were contributed by 200 college and university counseling centers, describing 164,380 unique college students seeking mental health treatment, 4,440 clinicians, and 1,128,157 appointments.

The following are critical to understand when reading this report:

1. This report describes college students receiving mental health services, not the general college student population.
2. This report is not a survey. The data summarized herein is gathered during routine clinical practice at participating counseling centers, de-identified, then contributed to CCMH.
3. The number of clients will vary by question due to variations in clinical procedure and implementation of CCMH data forms.
4. Counseling centers are required to receive permission from their institution (e.g., Institutional Review Board) to participate in client-level data contribution to CCMH. Although CCMH maintains membership of over 850 institutional counseling centers, only a percentage of these institutions participate in client-level data contribution. However, all counseling center members contribute center-level data for research.
5. Starting in 2026, CCMH has updated its data dissemination approach to publish the Annual Report with trends and data summaries sooner and share investigations of important questions in collegiate mental health throughout the year. The Annual Report's former "Special Topic" section is moving to Data Briefs, published several times throughout the year. Data Briefs will use CCMH's national data to explore emerging trends and timely questions in collegiate mental health. These reports will translate complex findings into actionable insights for clinicians, institutional leaders, policymakers, and advocates, while complementing CCMH's peer-reviewed research and annual reports.

2026 Highlights

- Rates of prior counseling and psychotropic medication usage were relatively unchanged compared to last year, after rising in prior years. Past counseling remains the mental health history item with the largest 14-year increase.
- After a period of annual increases between 2012 and 2023, history of trauma slightly declined in the past three years; however, it has increased overall during the past 14 years, growing from 37.5% in 2012 to 43.0% last year.
- Prior to 2020, many threat-to-self variables were climbing, which was followed by an immediate slight decline. However, since 2020–2021, the proportion of students with histories of threat-to-self characteristics has generally remained stable. Of note, in 2025-2026, non-suicidal self-injury (29.9%) and suicide attempt(s) (11.4%) reached their highest rates since this data has been collected.
- All CCAPS Subscale scores declined over the past year. This included areas that were previously increasing, such as Generalized and Social Anxiety. Social Anxiety continued to display the greatest 16-year change across all areas of distress.
- Anxiety continues to be the most common presenting concern, with 63.1% of clients entering treatment with anxiety assessed by clinicians. Stress and Relationship Problem (specific) continued to show an upward trend as a top concern, while Trauma declined after reaching its highest level in 2022–2023.
- From 2020 to 2026, the percentage of students who received exclusively in-person individual counseling services increased from 1.7% to 71.2%, and the proportion of those who were solely provided video care declined from 96.1% to 8.9%. For the past five years (2021–2026), the proportion of students who received hybrid care (combination of in-person and video) remained relatively stable around 20%.
- In 2025-2026, clients averaged 6.58 total attended appointments and 5.41 individual treatment appointments. The average wait time between when an appointment was scheduled and attended was 1.67 business days for brief screening/walk-in appointments and 4.37 for initial clinical evaluations. Approximately 33% of students were seen for their first appointment on the same day it was scheduled, while 82% were seen within 5 business days.

Annual Trends

Data sets

As of this report, CCMH has generated 16 annual data sets (2010-2011 through 2025-2026), making it possible to examine numerous years of trends among college students seeking mental health services. The table below summarizes the amount of data contributed to CCMH over the past 16 academic years. It is important to note the annual changes in number of clients merely reflect fluctuations in data that has been contributed by counseling centers and not a change in utilization of counseling center services.

Year	Number of Centers	Number of Clients
2010-2011	97	82,611
2011-2012	120	97,012
2012-2013	132	95,109
2013-2014	140	101,027
2014-2015	139	100,736
2015-2016	139	150,483
2016-2017	147	161,014
2017-2018	152	179,964
2018-2019	163	207,818
2019-2020	153	185,440
2020-2021	180	153,233
2021-2022	180	190,907
2022-2023	195	185,114
2023-2024	213	173,536
2024-2025	209	162,187
2025-2026	200	164,380

Mental Health Trends

To examine trends across key mental health indicators, items from the Mental Health History section of the Standardized Data Set (SDS) were simplified to “Yes” or “No,” providing a proxy for the lifetime prevalence of each item. These items may have changed slightly over time; please refer to prior versions of the SDS for details.

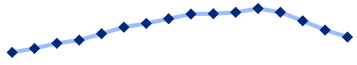
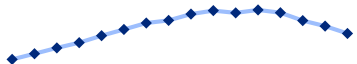
Rates of prior counseling and psychotropic medication usage were relatively unchanged compared to last year, after increasing in prior years. Past counseling remains the mental health history item with the largest 14-year increase. After a period of annual increases between 2012 and 2023, history of trauma has declined in the past three years. Since 2020–2021, the proportion of students with histories of threat-to-self characteristics generally remained stable. However, history of non-suicidal self-injury demonstrated small incremental annual increases since 2020-2021 and is now at its highest prevalence rate of 29.9%. Threat to others (considered or intentionally caused serious injury to another) has shown minimal to no changes over the past several years. Notably, alcohol use variables have decreased over the past 13 years, with binge drinking declining by an actual rate of 10.5%. After initially increasing during the 14-year timeframe, cannabis use plateaued for several years and has waned the past several years.

Item	14-Year Change	2012-2026	Lowest	Highest	2025-2026
Prior Treatment					
Counseling	+16.5%		47.8%	64.4%	64.3%
Medication	+7.9%		32.4%	40.3%	40.3%
Hospitalization	-0.1%		8.0%	10.3%	10.0%
Threat to Self					
Non-Suicidal Self-Injury	+6.9%		23.0%	29.9%	29.9%
Serious Suicidal Ideation	+3.2%		30.1%	36.9%	33.3%
Serious Suicidal Ideation (last month)	-1.7%		5.3%	8.2%	5.3%
Suicide Attempt(s)	+2.8%		8.7%	11.4%	11.4%
Some Suicidal Ideation (past 2 weeks)	-2.4%		31.5%	39.6%	31.5%
Threat to Others					
Considered causing serious physical injury to another person	-5.6%		5.2%	11.2%	5.6%
Intentionally caused serious injury to another person	-2.0%		1.2%	3.4%	1.3%
Traumatic Experiences					
Had unwanted sexual contact(s) or experience(s)	+5.2%		18.9%	27.4%	24.2%
Experienced harassing, controlling, and/or abusive behavior	+1.2%		32.8%	39.6%	34.5%
Experienced traumatic event	+5.5%		37.5%	46.8%	43.0%
Drug and Alcohol					
Felt the need to reduce alcohol/drug use	-3.4%		23.7%	27.5%	23.7%
Others concerned about alcohol/drug use	-5.4%		12.1%	17.6%	12.1%
Treatment for alcohol/drug use	-2.7%		1.7%	4.4%	1.7%
Binge drinking	-10.5%		30.3%	41.5%	31.0%
Cannabis use	+1.1%		19.1%	26.0%	21.9%

CCAPS Trends

The Counseling Center Assessment of Psychological Symptoms (CCAPS) is a multidimensional assessment and routine outcome monitoring instrument used by CCMH counseling centers. The frequency and clinical timing of CCAPS administration vary by counseling center. For each item, students rate how well it describes them during the past two weeks on a five-point scale ranging from 0 (*not at all like me*) to 4 (*extremely like me*). The following figures provide information regarding trends in student clients' self-reported distress upon entry to counseling services as indicated by the CCAPS subscales.

All CCAPS Subscale scores declined over the past year. This included areas that were previously increasing, such as Generalized and Social Anxiety. Academic Distress has reached its lowest level after a substantial elevation during the peak of the COVID-19 pandemic in 2020. Social Anxiety continued to display the greatest 16-year change across all CCAPS subscales, although it has decreased from its highest value.

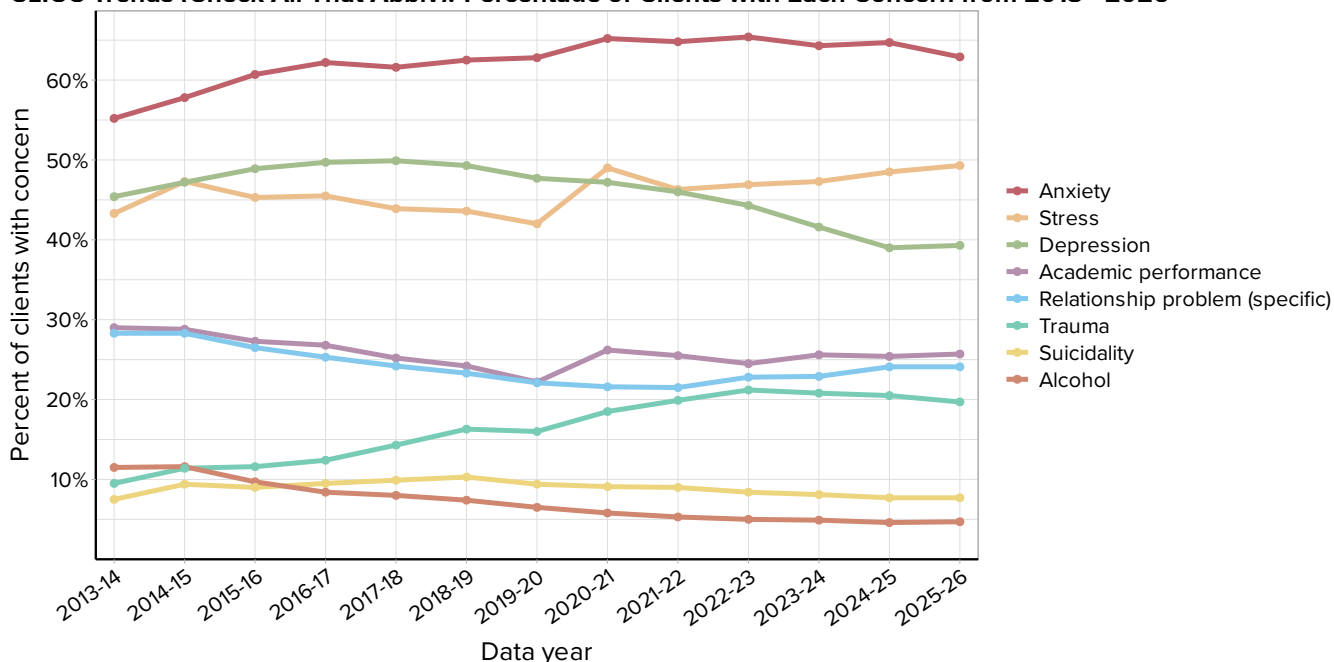
Subscale	16-Year Change	2010-2026	Lowest	Highest	2025-2026
CCAPS-62					
Depression	+0.09		1.59	1.84	1.68
Generalized Anxiety	+0.19		1.61	1.91	1.81
Social Anxiety	+0.23		1.82	2.14	2.04
Academic Distress	-0.03		1.82	2.05	1.82
Eating Concerns	+0.09		1.00	1.12	1.09
Frustration/Anger	-0.12		0.93	1.04	0.93
Substance Use	-0.28		0.49	0.77	0.49
Family Distress	+0.11		1.29	1.45	1.41
CCAPS-34					
Depression	-0.03		1.52	1.74	1.52
Generalized Anxiety	+0.15		1.77	2.05	1.92
Social Anxiety	+0.23		1.77	2.10	2.00
Academic Distress	-0.07		1.86	2.10	1.86
Eating Concerns	+0.08		0.94	1.07	1.02
Frustration/Anger	-0.16		0.76	0.93	0.76
Alcohol Use	-0.33		0.39	0.73	0.39
DI	+0.02		1.65	1.83	1.67

CLICC Trends

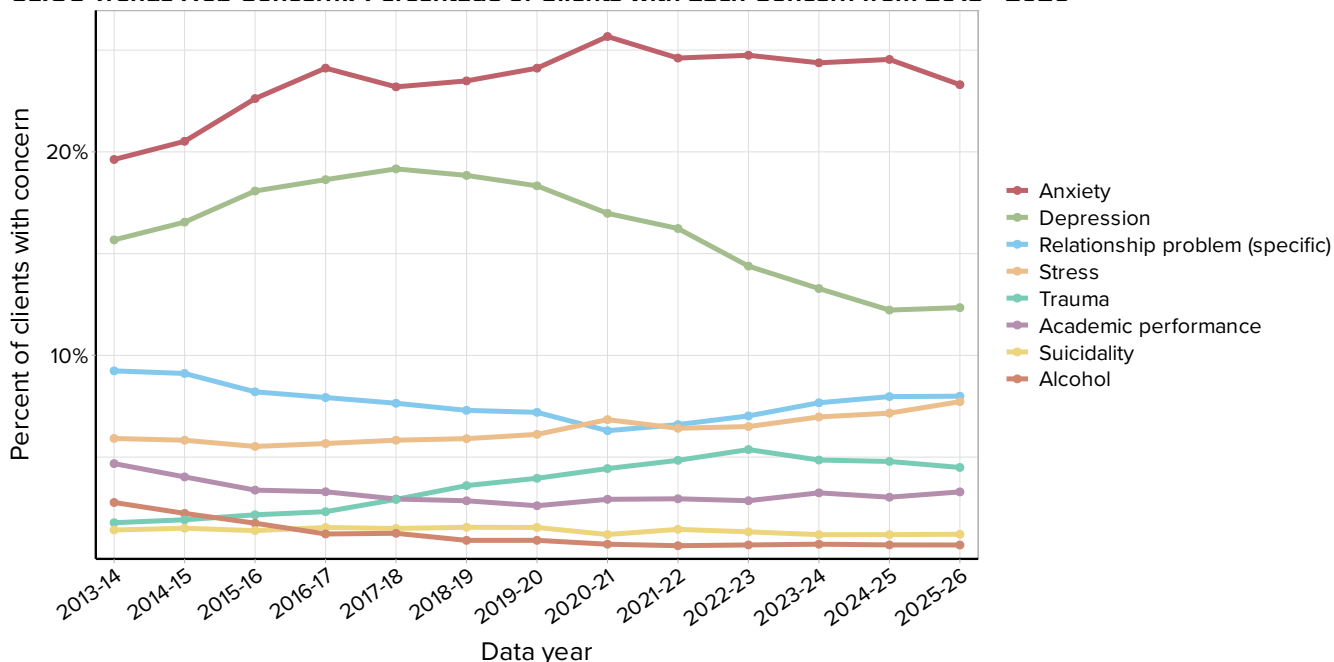
The Clinician Index of Client Concerns (CLICC) captures the presenting concerns of counseling center clients, as assessed by the clinician during an initial appointment. The CLICC includes 55 concerns and asks the clinician (a) to check all that apply and (b) to identify the “top concern” of those selected.

The figures below display notable trends in the most frequently assessed CLICC items by clinicians. After steadily increasing since 2014–2015, Trauma as a general and top concern slightly declined the past three years. Notably, stress and relationship problem (specific) continued to show a modest growing trend as a top concern since 2020–2021. Anxiety decreased as a general and top concern the past year after remaining relatively stable for many years prior. After declining for several years, Depression leveled off over the last year.

CLICC Trends (Check All That Apply): Percentage of Clients with Each Concern from 2013 - 2026

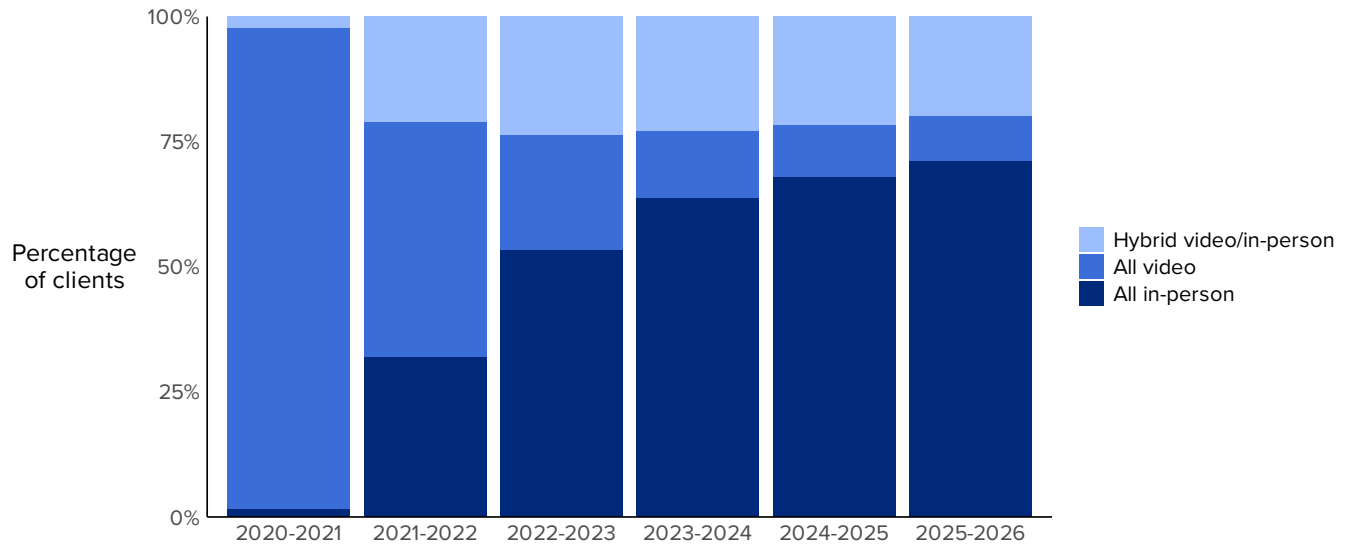


CLICC Trends (Top Concern): Percentage of Clients with Each Concern from 2013 - 2026



Mode of Service Trends

After the onset of COVID-19 in 2020, CCMH began collecting data on the mode of counseling service delivery, which included in-person, video, audio, or text. The figure below highlights the changes in the mode of services from 2020 to 2026. Audio and text were excluded from the analyses due to their relatively infrequent usage across the years. From 2020 to 2026, the percentage of students who received exclusive in-person services increased from 1.7% to 71.2%, and the proportion of those who were solely provided video care declined from 96.1% to 8.9%. For the past five years (2021-2026), the proportion of students who received hybrid care (combination of in-person and video) remained relatively stable around 20%.



2025-2026 Data Summary

Appointment Statistics

Utilization

Appointment data from 2025-2026 was analyzed to determine how counseling center resources were distributed among students seeking services. The following points describe how counseling center appointments were utilized by 152,249 students across participating CCMH centers:

- The most common number of appointments per client per year is one, with 22% of clients attending only one appointment.
- Clients averaged 5.92 total attended appointments of any kind, with a median of 4 appointments, and a range of 1-145 appointments.
- Clients averaged 5.29 attended *Individual Treatment* (initial clinical evaluations and individual counseling) appointments, with a median of 4 attended appointments, and a range of 1-77 attended appointments.
- 20% of clients accounted for 57% of all appointments, averaging 15 appointments.
- 10% of clients accounted for 34% of all appointments, averaging 20 appointments.
- 5% of clients accounted for 22% of all appointments, averaging 24 appointments.
- 1% of clients accounted for 6% of all appointments, averaging 36 appointments.

Appointment Types

Individual psychotherapy/counseling accounted for almost 60% of scheduled appointments in the data.

Appointment Type	Appointments	Percent
Individual psychotherapy/counseling	669,022	59.3%
Initial clinical evaluation	112,352	10.0%
Brief Screening or Walk-in	91,372	8.1%
Group – psychotherapy	67,369	6.0%
Other individual	51,629	4.6%
Psychiatric follow-up	38,308	3.4%
Case management	38,007	3.4%
Specialized individual treatment	10,936	1.0%
Other individual (client not present)	7,819	0.7%
Psychiatric evaluation	7,206	0.6%
Couple's therapy	7,012	0.6%
Other group	6,642	0.6%
Group – workshop	6,419	0.6%
Psychological Testing or Assessment	4,417	0.4%
Other group (client not present)	3,714	0.3%
Medical	2,480	0.2%
Specialized treatment without a therapist	1,754	0.2%
Group – clinic	1,698	0.2%

Most students in the data attended at least one individual appointment type (Brief screening or walk-in, Initial clinical evaluation, Individual psychotherapy/counseling), approximately 7% of students utilized group therapy, while 6% of students attended both group and individual appointments.

Service	Students	Percent
Individual treatment	136,239	94.7%
Group treatment	10,233	7.1%
Both individual and group	8,136	5.7%
Case management	15,705	10.9%
Psychiatry	7,995	5.6%

Attendance

Out of 1,128,157 appointments, 76% were attended.

Client Attendance	Frequency	Percent
Attended	852,369	75.7%
Center Closed	6,022	0.5%
Client Cancelled	51,056	4.5%
Client Cancelled Late	26,081	2.3%
Client No Show	81,654	7.3%
Client Rescheduled	62,068	5.5%
Counselor Cancelled	26,612	2.4%
Counselor Rescheduled	20,349	1.8%

Attendance rate by appointment type

When examining the attendance rates of specific types of appointments, Brief Screening or Walk-in had the highest attendance rate, while Group (psychotherapy, workshop, clinic) appointments had the lowest.

Appointment Category	Sessions	% Attended
Individual psychotherapy/ counseling	669,022	73.6%
Initial clinical evaluation	112,352	78.0%
Brief Screening or Walk-in	91,372	85.2%
Group – psychotherapy	67,369	64.6%
Psychiatric follow-up	38,308	73.3%
Case management	38,007	84.1%
Specialized individual treatment	10,936	74.2%
Psychiatric evaluation	7,206	80.4%
Couple's therapy	7,012	74.4%
Group – workshop	6,419	58.7%
Psychological Testing or Assessment	4,417	80.1%
Group – clinic	1,698	62.4%

Appointment Mode

Appointment mode information was provided for 536,973 attended appointments in 2025-2026. From 2021-2022 to 2025-2026, the frequency of in-person appointments increased from 37% to 75%, while video appointments declined from 51% to 15%.

Mode	Sessions	Percent
In person	401,441	74.8%
Video	81,449	15.2%
Audio	29,638	5.5%
Text	24,445	4.6%

Appointment Length

Appointment length for all types of appointments was rounded up to the next 15-minute increment for 0 to 60 minutes and the next 30-minute interval for appointments 60 to 120 minutes in length. Over two thirds of appointments were 60 minutes. Only 7.2% of appointments were over 60 minutes in length.

Appointment Length (Minutes)	N	Percent
15	49,346	5.8%
30	111,981	13.1%
45	41,330	4.8%
60	588,552	69.0%
90	50,887	6.0%
120	10,276	1.2%

Wait Time for First Appointment

Wait time captures the time (in days) between when an appointment was scheduled and attended. If an appointment was attended on the same day it was scheduled, the wait time is 0 days. The table below describes the average wait time in business and calendar days for the first attended Brief Screening/Walk-In (quick screen, triage, or walk-in consultation) and Initial Clinical Evaluation (first appointment or "Intake" that includes detailed information gathering) appointments of the year. The data includes 109,695 students who sought care in 2025-2026.

Appointment Category	Business Days	Calendar Days
Brief Screening/ Walk-In	1.67	2.31
Initial Clinical Evaluation	4.37	6.07

Approximately 33% of students were seen for their first appointment of the year on the same day it was scheduled, while 82% were seen within 5 business days or 7 calendar days.

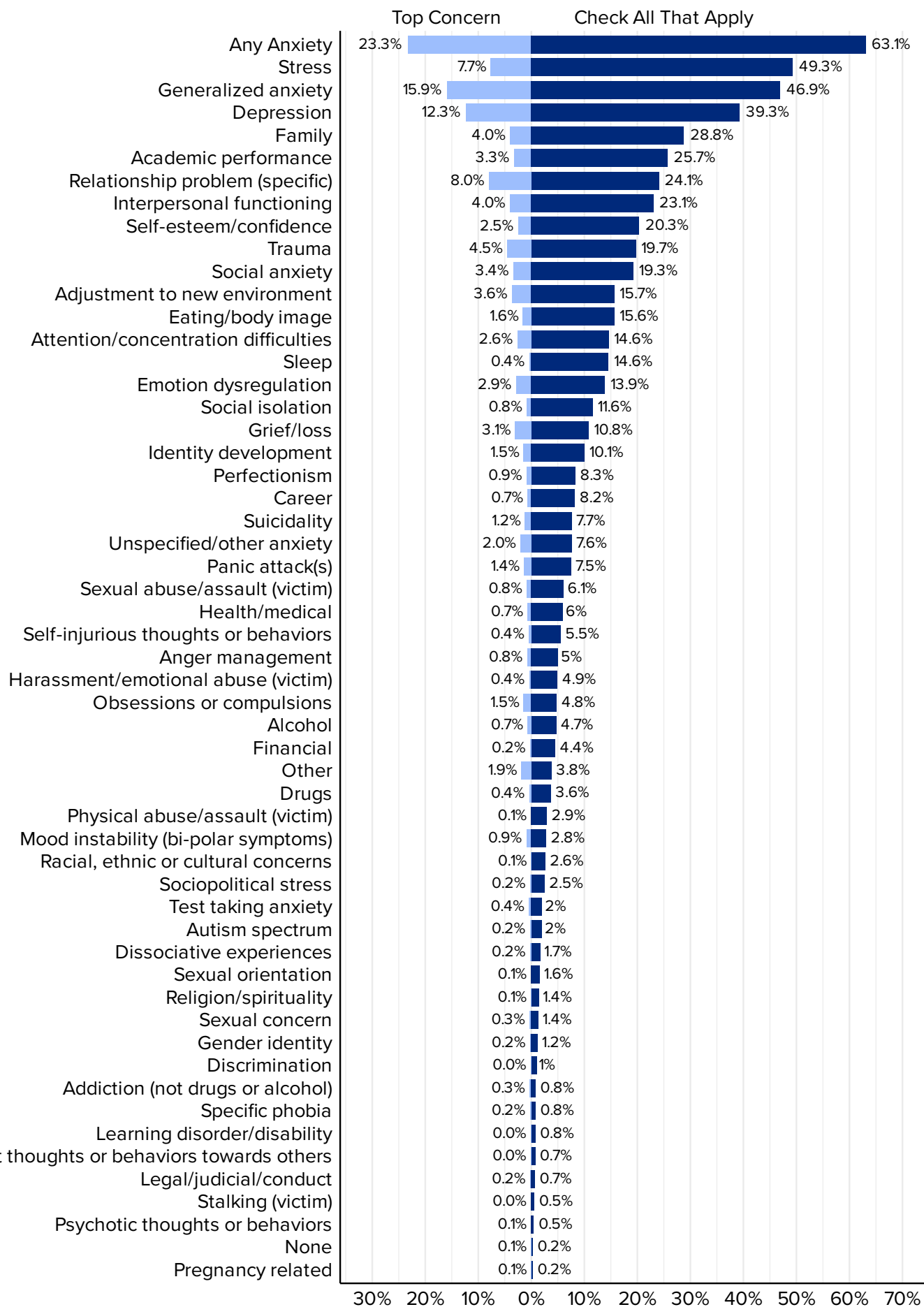
Clinician Index of Client Concerns (CLICC)

The CLICC was designed by CCMH to capture and facilitate reporting on the most common presenting concerns of counseling center clients, as assessed by the clinician during an initial appointment. This data allows CCMH and individual centers to quickly and easily identify the most common client concerns treated at each center, which informs and supports a wide array of research initiatives. The CLICC includes 55 total concerns. Beginning in July 2017, the category of “Anxiety” was expanded to include options for 6 specific types of anxiety, including Generalized, Social, Test Anxiety, Panic Attacks, Specific Phobias, as well as unspecified/other.

The figure on the next page illustrates the presenting concerns of 56,841 clients during the 2025-2026 academic year. For each client, clinicians are asked to “check all that apply” from the list of CLICC concerns (as one client can have many concurrent concerns). The blue bars on the right portion of the graph illustrate the frequency of each concern regardless of how many other concerns a student experienced.

Clinicians are then asked to choose one primary concern (i.e., the top concern) per client. The light blue bars on the left in the graph provide the frequency of each primary (top) concern.

Collectively the two bars highlight the proportion of clients who were experiencing each concern (check all that apply) and the proportion for which the specific concern was the primary problem (top concern). For example, while many clients experienced sleep as a concern (14.6%), it was the *top* concern for far fewer clients (0.4%). On the other hand, 24.1% of clients had Relationship problem (specific) endorsed as a concern, but a higher percent (8%) had it endorsed as their top concern. The specific types of anxiety are displayed among the other concerns.



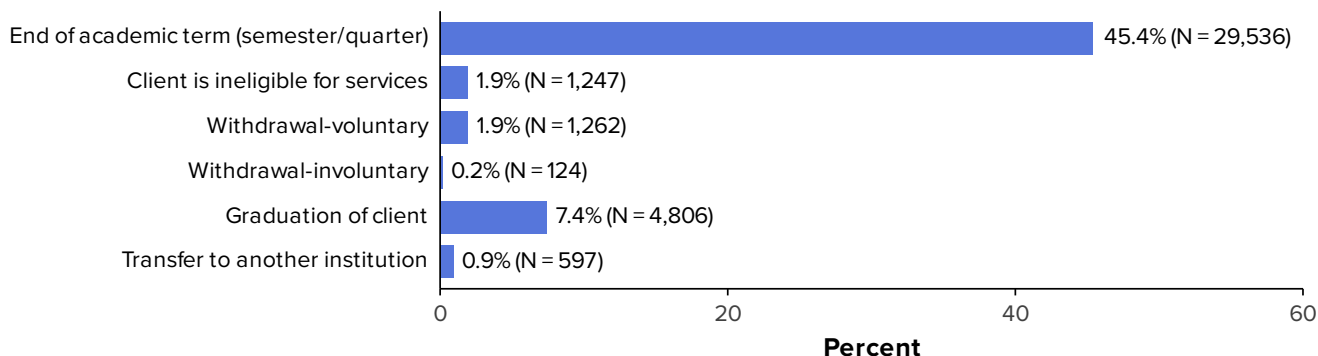
Case Closure Form

The Case Closure Form captures a range of reasons (academic, clinical, and client factors) why services ended, as well as significant events that might have occurred during the course of a student's services. Clinicians are asked to complete this form following the end of their service provision with a client. Clinicians can "select all that apply" from a checklist of 20 reasons why services may have ended for a given client and indicate the top reason. They can also specify any of 13 significant events that might have occurred during services.

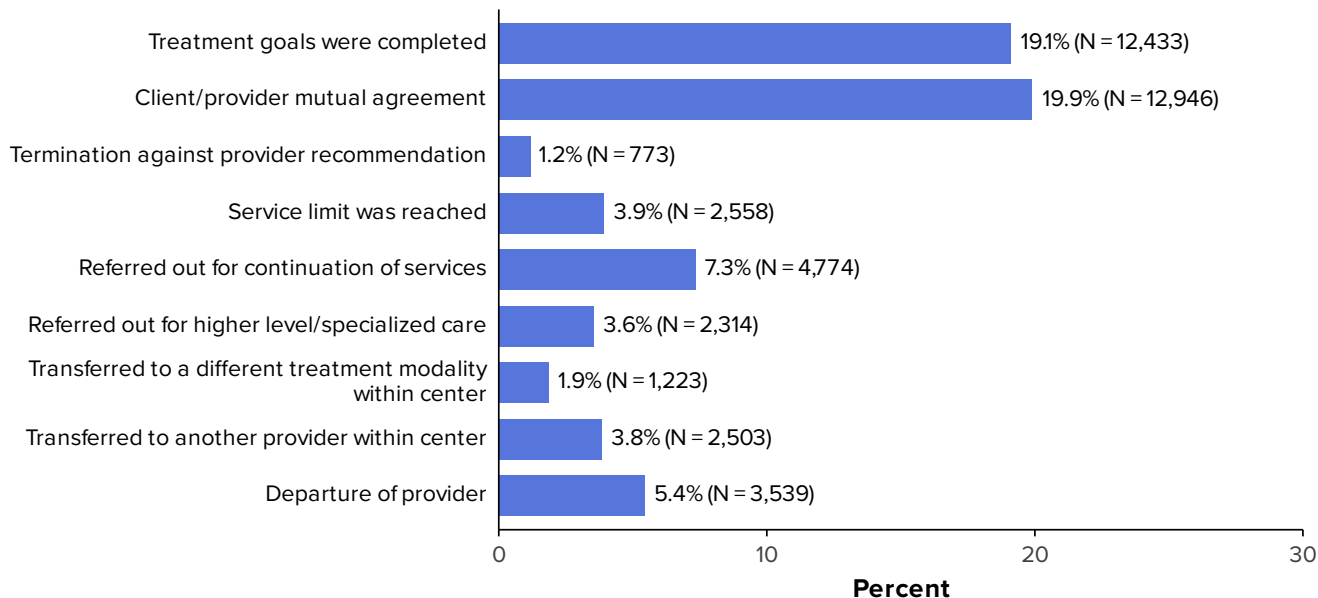
Reasons for Closure of Case

The following figures describe the frequency of various reasons why services ended for students who received treatment during the 2025-2026 academic year ($N = 65,076$). Of note, the top reason was the ending of the academic term (45.4%), followed by the client not returning for their last appointment (26.4%), client/provider mutual agreement (19.9%), and treatment goals being completed (19.1%).

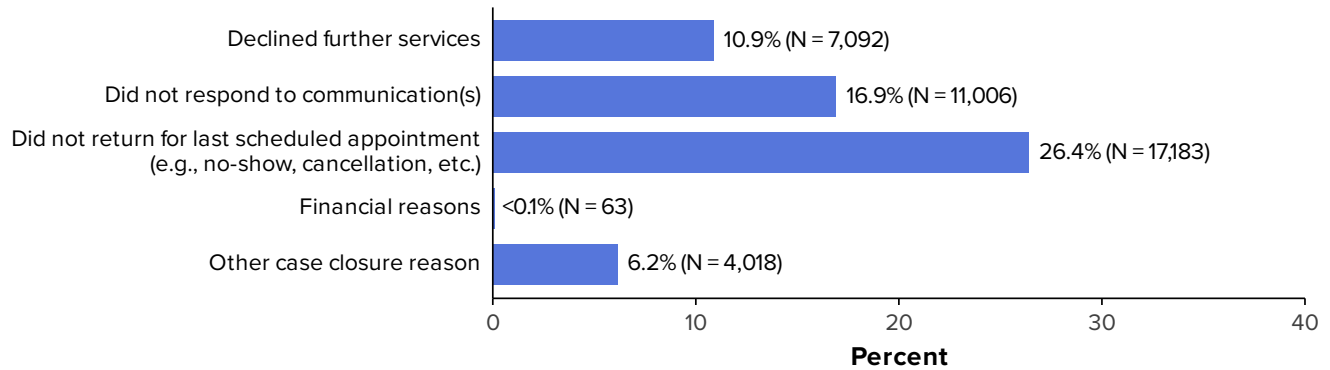
Academic Status Reasons



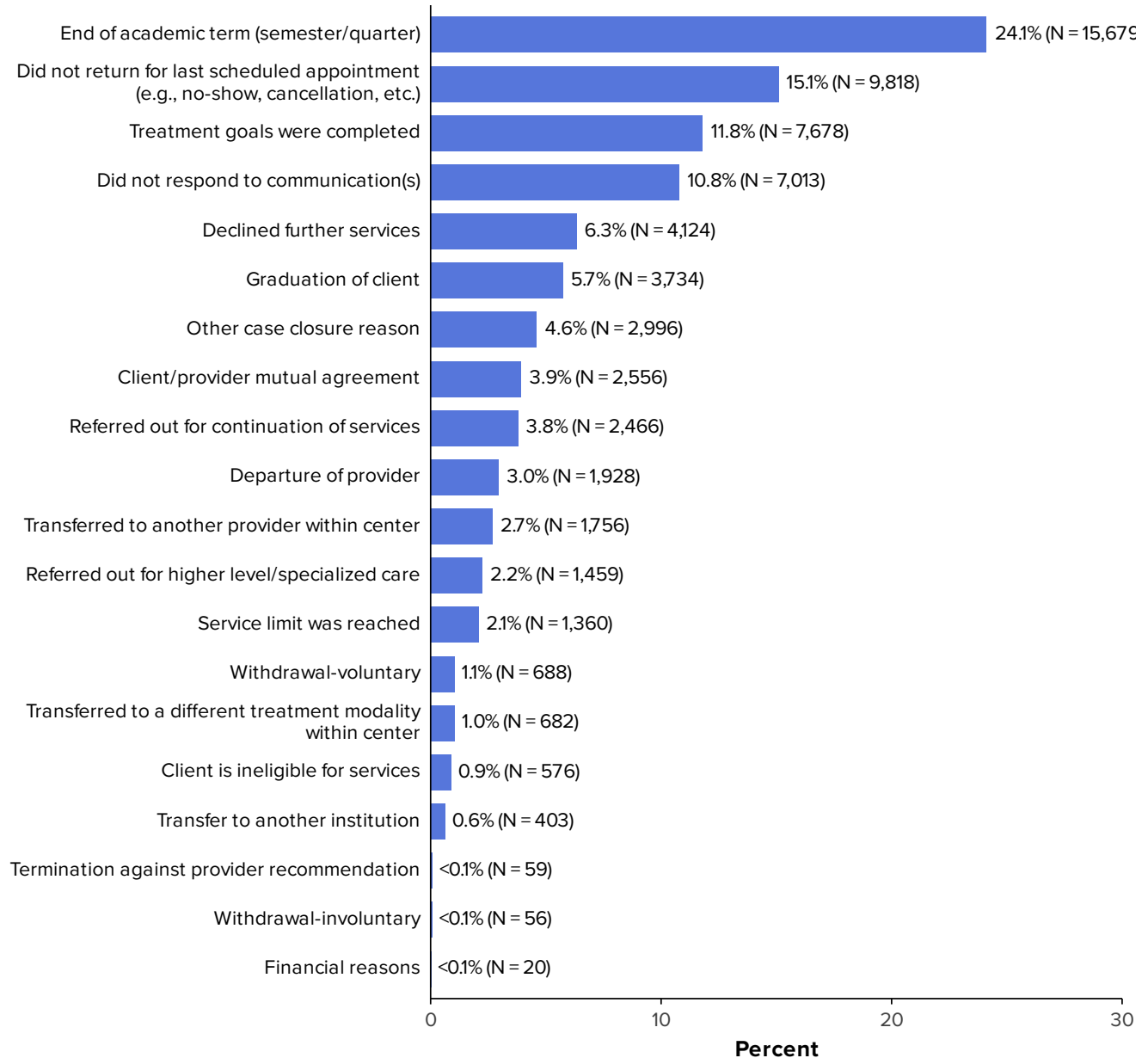
Clinical Factor Reasons



Client Factor Reasons



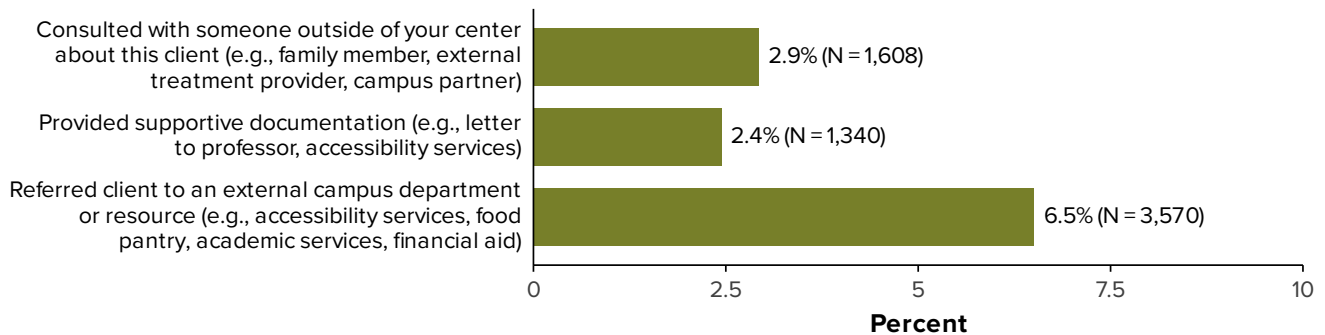
Top Case Closure Reason



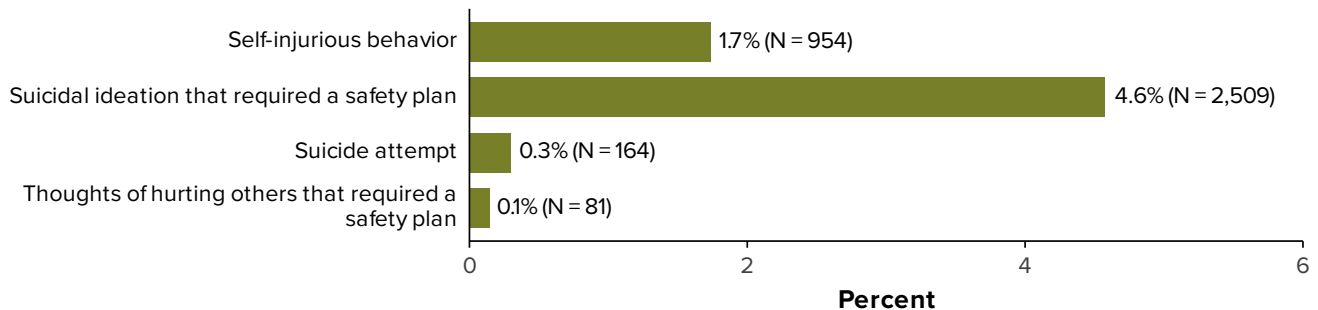
Case Events

The following figures describe the frequency of significant events occurring during a course of services for students during the 2025-2026 academic year (N= 54,833).

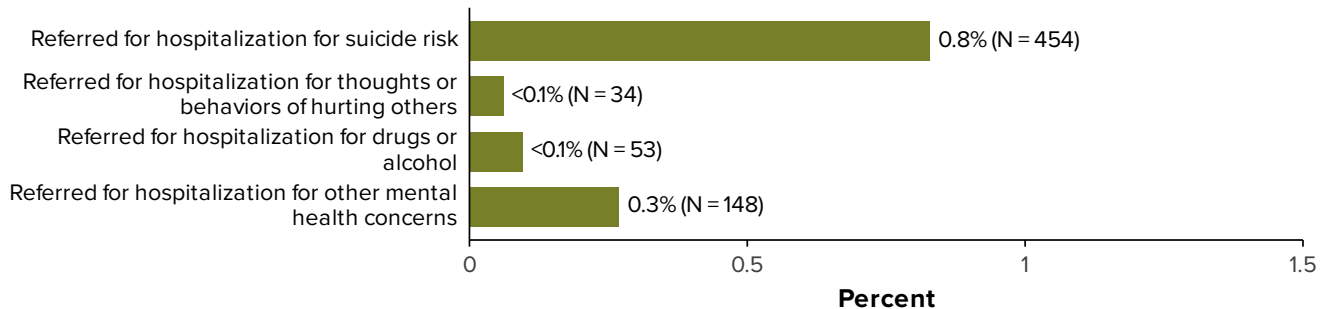
Clinical Consultation and Referral



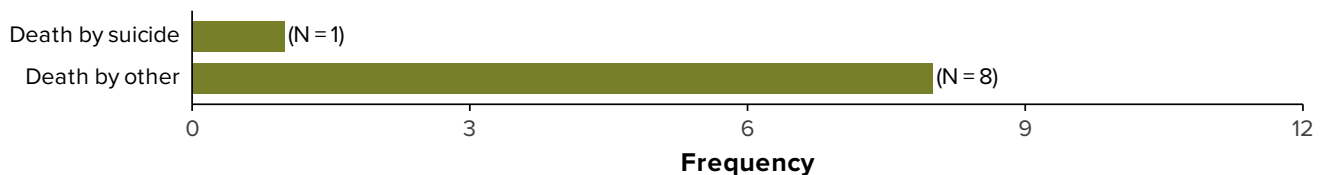
Client Actions and Events



Hospitalization Events



Client Deaths



SDS - Client Demographic Information

The Standardized Data Set (SDS) for client demographic information contains numerous different questions related to client background characteristics. The tables below include the specific item text and number. Because counseling centers differ in the questions they choose to ask from the SDS, the total number of responses varies by question.

Client age

Mean	SD	Range
21.95	4.18	18-60

What is your gender identity?

SDS 88 (N = 88,271)	Frequency	Percent
Woman	54,834	62.1%
Transgender woman	649	0.7%
Man	28,553	32.3%
Transgender man	876	1.0%
Non-binary	2,538	2.9%
Self-identify	821	0.9%

What was your sex at birth?

SDS 90 (N = 28,408)	Frequency	Percent
Female	18,428	64.9%
Male	9,971	35.1%
Intersex	9	<0.1%

Do you consider yourself to be:

SDS 91 (N = 82,912)	Frequency	Percent
Asexual	2,240	2.7%
Bisexual	11,499	13.9%
Gay	2,224	2.7%
Heterosexual/Straight	55,902	67.4%
Lesbian	2,761	3.3%
Pansexual	2,426	2.9%
Queer	2,916	3.5%
Questioning	1,998	2.4%
Self-identify	946	1.1%

What is your race/ethnicity? (check all that apply)

SDS 1095 (N = 81,646)	Frequency	Percent
African American/Black	11,015	13.5%
American Indian or Alaska Native	1,183	1.4%
Asian American/Asian	11,816	14.5%
Hispanic/Latino/a/e	12,181	14.9%
Middle Eastern/North African	1,591	1.9%
Native Hawaiian or Pacific Islander	496	0.6%
White	53,182	65.1%
Self-identify (please specify)	821	1.0%

11.8% of clients endorsed multiple race/ethnicity options.

Where do you currently live?

SDS 1042 (N = 58,895)	Frequency	Percent
On-campus	25,289	42.9%
Off-campus	33,245	56.4%
I do not live in one stable, secure residence	166	0.3%
Other (please specify)	195	0.3%

With whom do you live (check all that apply):

SDS 44 (N = 89,430)	Frequency	Percent
Alone	12,914	14.4%
Spouse, partner, or significant other	7,721	8.6%
Roommates	58,150	65.0%
Children who I parent/co-parent	1,209	1.4%
Parent(s) or guardian(s)	12,789	14.3%
Family (other)	5,162	5.8%
Other	1,087	1.2%

Relationship status:

SDS 33 (N = 93,157)	Frequency	Percent
Single	56,586	60.7%
Serious dating or committed relationship	32,152	34.5%
Civil union, domestic partnership, or equivalent	319	0.3%
Married	3,432	3.7%
Divorced	279	0.3%
Separated	360	0.4%
Widowed	29	<0.1%

What is your country of origin?

Country	Frequency	Country	Frequency	Country	Frequency
United States	76,592	Puerto Rico	260	Russian Federation	138
India	2,266	Philippines	244	Haiti	121
China	1,682	Nepal	236	Japan	116
Mexico	560	Venezuela	221	Cuba	115
Bangladesh	455	United Kingdom	217	United States Minor Outlying Islands	109
Korea, Republic of	384	Ghana	158	Spain	108
Nigeria	354	Peru	158	Ethiopia	103
Canada	335	Taiwan	153	Ecuador	101
Vietnam	333	Dominican Republic	152	Egypt	99
Colombia	307	Germany	142	Saudi Arabia	98
Pakistan	303	Jamaica	140	Honduras	93
Brazil	291	Turkey	140	Italy	91
Iran, Islamic Republic of	283	Guatemala	138		

Countries with less than 90 (0.1%) individuals:

Afghanistan; Aland Islands; Albania; Algeria; American Samoa; Andorra; Angola; Antarctica; Antigua and Barbuda; Argentina; Armenia; Australia; Austria; Azerbaijan; Bahamas; Bahrain; Barbados; Belarus; Belgium; Belize; Benin; Bermuda; Bolivia; Bosnia and Herzegovina; Botswana; British Indian Ocean Territory; Brunei Darussalam; Bulgaria; Burkina Faso; Burundi; Cambodia; Cameroon; Cape Verde; Cayman Islands; Central African Republic; Chad; Chile; Christmas Island; Congo; Congo, The Democratic Republic of the; Costa Rica; Cote D'ivoire; Croatia; Cyprus; Czech Republic; Denmark; Djibouti; Dominica; El Salvador; Eritrea; Estonia; Fiji; Finland; France; French Guiana; Gambia; Georgia; Gibraltar; Greece; Grenada; Guam; Guinea; Guyana; Hong Kong; Hungary; Iceland; Indonesia; Iraq; Ireland; Israel; Jordan; Kazakhstan; Kenya; Kiribati; Korea, Democratic People's Republic of; Kuwait; Kyrgyzstan; Lao People's Democratic Republic; Latvia; Lebanon; Lesotho; Liberia; Libyan Arab Jamahiriya; Lithuania; Luxembourg; Macao; Macedonia, The Former Yugoslav Republic of; Madagascar; Malawi; Malaysia; Maldives; Mali; Marshall Islands; Mauritius; Micronesia, Federated States of; Moldova, Republic of; Mongolia; Montenegro; Morocco; Mozambique; Myanmar; Netherlands; Netherlands Antilles; New Zealand; Nicaragua; Niger; Northern Mariana Islands; Norway; Oman; Palau; Palestinian Territory; Panama; Paraguay; Poland; Portugal; Qatar; Romania; Rwanda; Saint Kitts and Nevis; Saint Lucia; Saint Vincent and the Grenadines; Samoa; Senegal; Serbia; Sierra Leone; Singapore; Slovakia; Slovenia; Somalia; South Africa; Sri Lanka; Sudan; Suriname; Swaziland; Sweden; Switzerland; Syrian Arab Republic; Tajikistan; Tanzania, United Republic of; Thailand; Timor-leste; Togo; Tonga; Trinidad and Tobago; Tunisia; Turkmenistan; Uganda; Ukraine; United Arab Emirates; Uruguay; Uzbekistan; Vanuatu; Virgin Islands, British; Virgin Islands, U.S.; Wallis and Futuna; Yemen; Zambia; Zimbabwe

Are you an international student?

SDS 32 (N = 98,391)	Frequency	Percent
No	89,960	91.4%
Yes	8,431	8.6%

Are you the first generation in your family to attend college?

SDS 56 (N = 96,322)	Frequency	Percent
No	71,044	73.8%
Yes	25,278	26.2%

Current academic status:

SDS 1037 (N = 84,661)	Frequency	Percent
1st year undergraduate	19,583	23.1%
2nd year undergraduate	17,999	21.3%
3rd year undergraduate	17,759	21.0%
4th year undergraduate	12,501	14.8%
5th year or more undergraduate	2,603	3.1%
Graduate student	12,053	14.2%
Professional degree student	1,357	1.6%
Non-student	86	0.1%
High-school student taking college classes	15	<0.1%
Non-degree student	177	0.2%
Faculty or staff	79	0.1%
Other (please specify)	449	0.5%

Graduate or professional degree program:

SDS 39 (N = 29,851)	Frequency	Percent
Post-Baccalaureate	2,474	8.3%
Masters	4,724	15.8%
Doctoral degree	2,946	9.9%
Law	896	3.0%
Medical	1,056	3.5%
Pharmacy	267	0.9%
Dental	180	0.6%
Veterinary Medicine	282	0.9%
Not applicable	15,394	51.6%
Other (please specify)	1,632	5.5%

What year are you in your graduate/professional program?

SDS 41 (N = 16,555)	Frequency	Percent
1	6,628	40.0%
2	4,042	24.4%
3	2,635	15.9%
4	2,533	15.3%
5+	717	4.3%

Did you transfer from another campus/institution to this school?

SDS 46 (N = 91,031)	Frequency	Percent
No	75,305	82.7%
Yes	15,726	17.3%

Are you considering withdrawing or taking a leave of absence from school?

SDS 127 (N = 35,945)	Frequency	Percent
No	32,994	91.8%
Yes	2,951	8.2%

Please indicate your level of involvement in organized extra-curricular activities (e.g., sports, clubs, student government, etc.):

SDS 48 (N = 50,045)	Frequency	Percent
None	15,397	30.8%
Occasional participation	11,346	22.7%
One regularly attended activity	8,273	16.5%
Two regularly attended activities	7,335	14.7%
Three or more regularly attended activities	7,694	15.4%

Do you currently participate in any of the following organized college athletics? Intramurals:

SDS 1151 (N = 68,905)	Frequency	Percent
No	63,662	92.4%
Yes	5,243	7.6%

Do you currently participate in any of the following organized college athletics? Club:

SDS 1152 (N = 68,946)	Frequency	Percent
No	57,601	83.5%
Yes	11,345	16.5%

Do you currently participate in any of the following organized college athletics? Varsity:

SDS 1153 (N = 68,612)	Frequency	Percent
No	65,688	95.7%
Yes	2,924	4.3%

Are you a member of a social fraternity or sorority?

SDS 117 (N = 33,550)	Frequency	Percent
No	29,343	87.5%
Yes	4,207	12.5%

Religious or Spiritual Preference:

SDS 97 (N = 82,346)	Frequency	Percent
Agnostic	13,147	16.0%
Atheist	8,109	9.8%
Buddhist	701	0.9%
Catholic	11,674	14.2%
Christian	26,134	31.7%
Hindu	1,926	2.3%
Jewish	1,280	1.6%
Muslim	1,936	2.4%
No preference	14,935	18.1%
Self-identify	2,504	3.0%

To what extent does your religious or spiritual preference play an important role in your life?

SDS 36 (N = 71,326)	Frequency	Percent
Very important	12,815	18.0%
Important	15,549	21.8%
Neutral	23,234	32.6%
Unimportant	10,417	14.6%
Very unimportant	9,311	13.1%

How would you describe your financial situation right now?

SDS 57 (N = 84,365)	Frequency	Percent
Always stressful	9,700	11.5%
Often stressful	16,883	20.0%
Sometimes stressful	29,772	35.3%
Rarely stressful	19,724	23.4%
Never stressful	8,286	9.8%

How would you describe your financial situation while growing up?

SDS 58 (N = 58,477)	Frequency	Percent
Always stressful	5,932	10.1%
Often stressful	9,064	15.5%
Sometimes stressful	14,162	24.2%
Rarely stressful	16,409	28.1%
Never stressful	12,910	22.1%

What is the average number of hours you work per week during the school year (paid employment only)?

SDS 1055 (N = 74,149)	Frequency	Percent
0	30,568	41.2%
1-5	4,894	6.6%
6-10	8,355	11.3%
11-15	7,752	10.5%
16-20	10,160	13.7%
21-25	4,444	6.0%
26-30	2,842	3.8%
31-35	1,403	1.9%
36-40	1,920	2.6%
40+	1,811	2.4%

Please indicate how much you agree with the statement: "I get the emotional help and support I need from my family":

SDS 22 (N = 72,590)	Frequency	Percent
Strongly disagree	7,517	10.4%
Somewhat disagree	11,488	15.8%
Neutral	12,864	17.7%
Somewhat agree	22,844	31.5%
Strongly agree	17,877	24.6%

Please indicate how much you agree with the statement: "I get the emotional help and support I need from my social network (e.g., friends, acquaintances)":

SDS 23 (N = 70,136)	Frequency	Percent
Strongly disagree	3,969	5.7%
Somewhat disagree	7,613	10.9%
Neutral	13,706	19.5%
Somewhat agree	27,130	38.7%
Strongly agree	17,718	25.3%

How often do you feel that you lack companionship?

SDS 124 (N = 47,828)	Frequency	Percent
Hardly ever	13,491	28.2%
Some of the time	22,971	48.0%
Often	11,366	23.8%

How often do you feel left out?

SDS 125 (N = 47,872)	Frequency	Percent
Hardly ever	13,568	28.3%
Some of the time	23,194	48.5%
Often	11,110	23.2%

How often do you feel isolated from others?

SDS 126 (N = 47,876)	Frequency	Percent
Hardly ever	11,255	23.5%
Some of the time	21,704	45.3%
Often	14,917	31.2%

Are you a member of ROTC?

SDS 51 (N = 62,608)	Frequency	Percent
No	62,023	99.1%
Yes	585	0.9%

Have you ever served in any branch of the US military (active duty, veteran, National Guard or reserves)?

SDS 98 (N = 96,290)	Frequency	Percent
No	95,012	98.7%
Yes	1,278	1.3%

Did your military experience include any traumatic or highly stressful experiences which continue to bother you?

SDS 53 (N = 940)	Frequency	Percent
No	560	59.6%
Yes	380	40.4%

Please select any disabilities you have been diagnosed with (check all that apply):

SDS 2061 (N = 15,537)	Frequency	Percent
Difficulty hearing	622	4.0%
Difficulty seeing	1,664	10.7%
Difficulty speaking or language impairment	220	1.4%
Mobility limitation/orthopedic impairment	425	2.7%
Traumatic brain injury	307	2.0%
Specific learning disabilities	939	6.0%
ADD or ADHD	8,075	52.0%
Autism spectrum disorder	1,394	9.0%
Cognitive difficulties or intellectual disability	299	1.9%
Health impairment/condition, including chronic conditions	1,931	12.4%
Psychological or psychiatric condition	5,393	34.7%
Other	1,636	10.5%

Are you registered for accessibility or academic accommodations on campus for a diagnosed disability?

SDS 1060 (N = 43,797)	Frequency	Percent
No	38,085	87.0%
Yes	5,712	13.0%

In the past 6 months, have you experienced discrimination or unfair treatment due to any of the following parts of your identity?

SDS 111-116 (N = 56,508)	Frequency	Percent
Disability	1,467	2.6%
Gender	4,618	8.2%
Nationality/County of Origin	2,169	3.9%
Race/Ethnicity/Culture	4,692	8.4%
Religion	1,855	3.3%
Sexual Orientation	2,747	4.9%

18.6% of clients endorsed discrimination related to at least one identity.

Are you unable to pay for or are you having great difficulty paying for any of the following?

SDS 119-123 (N = 64,353)	Frequency	Percent
Enough food to eat	8,959	14.0%
Housing/utilities	10,447	16.3%
Basic transportation needs	8,363	13.1%
Necessary medical care	10,289	16.1%
Educational materials (books, technology)	10,198	16.0%

26.8% of clients endorsed financial insecurity in at least one area.

In the past two weeks, how nervous or stressed have you felt about sociopolitical issues (e.g., politics, laws, societal problems, world events)?

SDS 131 (N = 34,183)	Frequency	Percent
Not at all	7,023	20.5%
Slightly	8,449	24.7%
Moderately	8,557	25.0%
Very	6,161	18.0%
Extremely	3,993	11.7%

COVID Impact Items

Are your reasons for seeking services in any way related to the COVID-19 pandemic and related events?

SDS 102 (N = 44,873)	Frequency	Percent
No	42,104	96.9%
Yes	1,349	3.1%

When asked to endorse negative impacts from COVID-19, 70% of students endorsed at least one impacted area, and 57% endorsed multiple areas.

Which area(s) of your life have been negatively impacted by COVID-19? (check all that apply)

SDS 100 (N = 44,873)	Frequency	Percent
Academics	19,024	42.4%
Mental health	18,991	42.3%
Loneliness or isolation	16,972	37.8%
Motivation or focus	14,530	32.4%
Missed experiences or opportunities	14,160	31.6%
Relationships (Significant other, friends, family)	7,859	17.5%
Financial	6,143	13.7%
Health concerns (self)	5,098	11.4%
Career/Employment	4,719	10.5%
Health concerns (others)	4,439	9.9%
Grief/loss of someone	4,276	9.5%
Food or housing insecurity	1,900	4.2%
Discrimination/Harassment	910	2.0%
Other (please specify)	637	1.4%

How many times have you had COVID-19?

SDS 103 (N = 15,938)	Frequency	Percent
1 time	5,398	33.9%
2-3 times	5,188	32.6%
4-5 times	532	3.3%
More than 5 times	114	0.7%
I don't think I've had COVID-19	4,706	29.5%

Mental Health History Items

Attended counseling for mental health concerns:

SDS 01 (N = 94,892)	Frequency	Percent
Never	33,830	35.7%
Prior to college	25,954	27.4%
After starting college	16,810	17.7%
Both	18,298	19.3%

Are you currently in counseling elsewhere for mental health concerns?

SDS 130 (N = 44,273)	Frequency	Percent
No	40,699	91.9%
Yes	3,574	8.1%

Taken a prescribed medication for mental health concerns:

SDS 02 (N = 86,131)	Frequency	Percent
Never	51,391	59.7%
Prior to college	9,890	11.5%
After starting college	11,302	13.1%
Both	13,548	15.7%

Are you currently taking a prescribed medication for mental health concerns?

SDS 128 (N = 35,130)	Frequency	Percent
No	25,714	73.2%
Yes	9,416	26.8%

Note: The following paired questions ask the student to identify “How many times” and “The last time” for each experience/event. Frequencies for “The last time” questions are based on students who reported having the experience one time or more.

Been hospitalized for mental health concerns (how many times):

SDS 64 (N = 100,240)	Frequency	Percent
Never	90,196	90.0%
1 time	6,570	6.6%
2-3 times	2,599	2.6%
4-5 times	474	0.5%
More than 5 times	401	0.4%

Been hospitalized for mental health concerns (the last time):

SDS 65 (N = 9,579)	Frequency	Percent
Never	3	<0.1%
Within the last 2 weeks	548	5.7%
Within the last month	331	3.5%
Within the last year	1,433	15.0%
Within the last 1-5 years	4,501	47.0%
More than 5 years ago	2,763	28.8%

Purposely injured yourself without suicidal intent (e.g., cutting, hitting, burning, etc.) (how many times):

SDS 72 (N = 99,612)	Frequency	Percent
Never	69,828	70.1%
1 time	5,129	5.1%
2-3 times	7,920	8.0%
4-5 times	3,016	3.0%
More than 5 times	13,719	13.8%

Purposely injured yourself without suicidal intent (e.g., cutting, hitting, burning, etc.) (the last time):

SDS 73 (N = 28,805)	Frequency	Percent
Never	6	<0.1%
Within the last 2 weeks	2,973	10.3%
Within the last month	2,143	7.4%
Within the last year	5,396	18.7%
Within the last 1-5 years	11,331	39.3%
More than 5 years ago	6,956	24.1%

Seriously considered attempting suicide (how many times):

SDS 74 (N = 99,137)	Frequency	Percent
Never	66,149	66.7%
1 time	11,503	11.6%
2-3 times	11,825	11.9%
4-5 times	2,559	2.6%
More than 5 times	7,101	7.2%

Seriously considered attempting suicide (the last time):

SDS 75 (N = 31,485)	Frequency	Percent
Never	21	0.1%
Within the last 2 weeks	2,870	9.1%
Within the last month	2,363	7.5%
Within the last year	5,578	17.7%
Within the last 1-5 years	13,407	42.6%
More than 5 years ago	7,246	23.0%

Made a suicide attempt (how many times):

SDS 76 (N = 98,812)	Frequency	Percent
Never	87,528	88.6%
1 time	6,978	7.1%
2-3 times	3,333	3.4%
4-5 times	430	0.4%
More than 5 times	543	0.5%

Made a suicide attempt (the last time):

SDS 77 (N = 11,062)	Frequency	Percent
Never	1	<0.1%
Within the last 2 weeks	261	2.4%
Within the last month	253	2.3%
Within the last year	991	9.0%
Within the last 1-5 years	5,069	45.8%
More than 5 years ago	4,487	40.6%

Considered causing serious physical injury to another (how many times):

SDS 78 (N = 98,644)	Frequency	Percent
Never	93,077	94.4%
1 time	1,754	1.8%
2-3 times	2,038	2.1%
4-5 times	396	0.4%
More than 5 times	1,379	1.4%

Considered causing serious physical injury to another (the last time):

SDS 79 (N = 5,307)	Frequency	Percent
Never	1	<0.1%
Within the last 2 weeks	607	11.4%
Within the last month	510	9.6%
Within the last year	1,162	21.9%
Within the last 1-5 years	1,992	37.5%
More than 5 years ago	1,035	19.5%

Intentionally caused serious physical injury to another (how many times):

SDS 80 (N = 98,119)	Frequency	Percent
Never	96,795	98.7%
1 time	630	0.6%
2-3 times	451	0.5%
4-5 times	73	0.1%
More than 5 times	170	0.2%

Intentionally caused serious physical injury to another (the last time):

SDS 81 (N = 1,264)	Frequency	Percent
Never	1	0.1%
Within the last 2 weeks	56	4.4%
Within the last month	46	3.6%
Within the last year	165	13.1%
Within the last 1-5 years	444	35.1%
More than 5 years ago	552	43.7%

Someone had sexual contact with you without your consent (e.g., you were afraid to stop what was happening, passed out, drugged, drunk, incapacitated, asleep, threatened or physically forced) (how many times):

SDS 82 (N = 95,446)	Frequency	Percent
Never	72,390	75.8%
1 time	11,281	11.8%
2-3 times	7,530	7.9%
4-5 times	1,330	1.4%
More than 5 times	2,915	3.1%

Someone had sexual contact with you without your consent (e.g., you were afraid to stop what was happening, passed out, drugged, drunk, incapacitated, asleep, threatened or physically forced) (the last time):

SDS 83 (N = 22,060)	Frequency	Percent
Never	1	<0.1%
Within the last 2 weeks	453	2.1%
Within the last month	527	2.4%
Within the last year	3,440	15.6%
Within the last 1-5 years	9,590	43.5%
More than 5 years ago	8,049	36.5%

Experienced harassing, controlling, and/or abusive behavior from another person (e.g., friend, family member, partner, authority figure) (how many times):

SDS 84 (N = 95,880)	Frequency	Percent
Never	62,829	65.5%
1 time	6,053	6.3%
2-3 times	7,392	7.7%
4-5 times	2,072	2.2%
More than 5 times	17,534	18.3%

Experienced harassing, controlling, and/or abusive behavior from another person (e.g., friend, family member, partner, authority figure) (the last time):

SDS 85 (N = 31,167)	Frequency	Percent
Never	1	<0.1%
Within the last 2 weeks	2,328	7.5%
Within the last month	2,123	6.8%
Within the last year	6,325	20.3%
Within the last 1-5 years	13,008	41.7%
More than 5 years ago	7,382	23.7%

Experienced a traumatic event that caused you to feel intense fear, helplessness, or horror (how many times):

SDS 86 (N = 91,737)	Frequency	Percent
Never	52,266	57.0%
1 time	13,889	15.1%
2-3 times	13,732	15.0%
4-5 times	2,880	3.1%
More than 5 times	8,970	9.8%

Experienced a traumatic event that caused you to feel intense fear, helplessness, or horror (the last time):

SDS 87 (N = 37,009)	Frequency	Percent
Never	5	<0.1%
Within the last 2 weeks	2,648	7.2%
Within the last month	2,098	5.7%
Within the last year	7,125	19.3%
Within the last 1-5 years	15,251	41.2%
More than 5 years ago	9,882	26.7%

Please select any adverse life event(s) you have experienced:

SDS 1099 (N = 48,689)	Frequency	Percent
Childhood physical abuse	5,522	11.3%
Childhood sexual abuse	4,297	8.8%
Childhood emotional abuse	13,858	28.5%
Witnessed violence at home as a child	8,219	16.9%
Physical attack (e.g., mugged, beaten up, shot, stabbed, threatened with weapon)	2,661	5.5%
Sexual violence (e.g., rape or attempted rape, sexual assault)	7,939	16.3%
Stalking	2,830	5.8%
Abuse by a romantic partner	5,352	11.0%
Sextortion (e.g., threat or experience of having sexual content released)	1,820	3.7%
Bullying	14,906	30.6%
Loss of loved one	17,882	36.7%
Diagnosed with life threatening illness	891	1.8%
Military combat or war zone experiences	169	0.3%
Kidnapped or taken hostage	226	0.5%
Serious accident, fire, or explosion (e.g., an industrial, farm, car, plane, or boating accident)	2,184	4.5%
Terrorist attack	101	0.2%
School/mass shooting	970	2.0%
Natural disaster (e.g., flood, quake, hurricane)	2,042	4.2%
Imprisonment or torture	194	0.4%
Other traumatic event (please specify)	3,787	7.8%

Felt the need to reduce your alcohol or drug use (how many times):

SDS 66 (N = 88,248)	Frequency	Percent
Never	67,377	76.3%
1 time	6,709	7.6%
2-3 times	7,966	9.0%
4-5 times	1,522	1.7%
More than 5 times	4,674	5.3%

Felt the need to reduce your alcohol or drug use (the last time):

SDS 67 (N = 19,754)	Frequency	Percent
Within the last 2 weeks	5,355	27.1%
Within the last month	3,675	18.6%
Within the last year	6,170	31.2%
Within the last 1-5 years	3,948	20.0%
More than 5 years ago	606	3.1%

Others have expressed concern about your alcohol or drug use (how many times):

SDS 68 (N = 87,974)	Frequency	Percent
Never	77,308	87.9%
1 time	4,119	4.7%
2-3 times	4,016	4.6%
4-5 times	734	0.8%
More than 5 times	1,797	2.0%

Others have expressed concern about your alcohol or drug use (the last time):

SDS 69 (N = 10,107)	Frequency	Percent
Never	2	<0.1%
Within the last 2 weeks	1,837	18.2%
Within the last month	1,637	16.2%
Within the last year	3,547	35.1%
Within the last 1-5 years	2,596	25.7%
More than 5 years ago	488	4.8%

Received treatment for alcohol or drug use (how many times):

SDS 70 (N = 95,439)	Frequency	Percent
Never	93,852	98.3%
1 time	1,100	1.2%
2-3 times	329	0.3%
4-5 times	40	<0.1%
More than 5 times	118	0.1%

Received treatment for alcohol or drug use (the last time):

SDS 71 (N = 1,491)	Frequency	Percent
Within the last 2 weeks	130	8.7%
Within the last month	103	6.9%
Within the last year	338	22.7%
Within the last 1-5 years	631	42.3%
More than 5 years ago	289	19.4%

Think back over the last two weeks. How many times have you had four or more drinks in a 2-3 hour period? (A drink is a bottle of beer, a glass of wine, a wine cooler, a shot glass of liquor, or a mixed drink.)

SDS 1019 (N = 55,131)	Frequency	Percent
None	38,065	69.0%
Once	7,850	14.2%
Twice	5,029	9.1%
3 to 5 times	3,369	6.1%
6 to 9 times	597	1.1%
10 or more times	221	0.4%

Have you experienced any undesired consequences due to using alcohol within the past month (e.g., problems with relationships, academics, employment, health, or legal issues)?

SDS 132 (N = 30,046)	Frequency	Percent
No	18,047	60.1%
Yes	2,296	7.6%
I did not use alcohol	9,703	32.3%

Think back over the last two weeks. How many times have you used recreational or medical cannabis/THC?

SDS 2096 (N = 45,458)	Frequency	Percent
None	35,293	77.6%
Once	2,289	5.0%
Twice	1,727	3.8%
3 to 5 times	2,487	5.5%
6 to 9 times	1,125	2.5%
10 or more times	2,537	5.6%

Have you experienced any undesired consequences due to using recreational or medical cannabis/THC within the past month (e.g., problems with relationships, academics, employment, health, or legal issues)?

SDS 133 (N = 34,416)	Frequency	Percent
No	15,183	44.1%
Yes	1,803	5.2%
I did not use cannabis/THC	17,430	50.6%

Have you used any recreational drugs or non-prescribed medications in the past month (excluding cannabis/THC)?

SDS 134 (N = 34,753)	Frequency	Percent
No	33,064	95.1%
Yes	1,689	4.9%

Have you experienced any undesired consequences due to using any recreational drugs or non-prescribed medications (excluding cannabis/THC) in the past month (e.g., problems with relationships, academics, employment, health, or legal issues)?

SDS 135 (N = 31,580)	Frequency	Percent
No	10,736	34.0%
Yes	468	1.5%
I did not use any recreational drugs or non-prescribed medications	20,376	64.5%

In the past 12 months, did you gamble more than you intended (e.g., betting on sports, playing table or card games, buying lottery tickets)?

SDS 136 (N = 35,563)	Frequency	Percent
No	13,528	38.0%
Yes	797	2.2%
I did not gamble	21,238	59.7%

Provider Data

The Standardized Data Set includes basic demographic information about providers (clinicians) at participating counseling centers. Answer totals vary by question since some counseling centers do not gather this data on providers or a provider may choose not to answer one or more questions.

Gender

Gender	Frequency	Percent
Woman	1,360	73.0%
Transgender woman	4	0.2%
Man	421	22.6%
Transgender man	4	0.2%
Non-binary	56	3.0%
Prefer not to answer	19	1.0%

Age

N	Mean	Mode
1,692	39.1	33

Race/Ethnicity

Ethnicity	Frequency	Percent
African-American/Black	143	13.0%
American Indian or Alaskan Native	8	0.7%
Asian American/Asian	69	6.3%
White	714	65.1%
Hispanic/Latino/a	93	8.5%
Native Hawaiian or Pacific Islander	4	0.4%
Multi-racial	48	4.4%
Prefer not to answer	10	0.9%
Other	8	0.7%

Position Type (descending order):

Position	Frequency	Percent
Professional staff member	1,405	75.5%
Master's level trainee	147	7.9%
Doctoral level trainee (not an intern)	64	3.4%
Pre-doctoral intern	123	6.6%
Post-doctoral level (non-psychiatric)	49	2.6%
Psychiatric resident	11	0.6%
Other (please specify)	62	3.3%

Highest Degree (descending order):

Highest Degree	Frequency	Percent
Doctor of Philosophy	355	19.2%
Master of Arts	330	17.8%
Master of Social Work	318	17.2%
Master of Science	303	16.4%
Doctor of Psychology	215	11.6%
Master of Education	85	4.6%
Bachelor of Arts	73	3.9%
Bachelor of Science	66	3.6%
Other	34	1.8%
Doctor of Medicine	26	1.4%
Education Specialist	18	1.0%
Doctor of Education	14	0.8%
Nursing (e.g. RN, RNP, PNP)	7	0.4%
Doctor of Osteopathy	6	0.3%
Doctor of Social Work	3	0.2%

Highest Degree-Discipline (descending order):

Highest Degree - Discipline	Frequency	Percent
Clinical Psychology	413	22.5%
Counseling Psychology	363	19.7%
Mental Health Counseling/Clinical Mental Health Counseling	347	18.9%
Social Work	336	18.3%
Other	147	8.0%
Counselor Education	120	6.5%
Marriage and Family Therapist	44	2.4%
Psychiatry	36	2.0%
Nursing	14	0.8%
Higher Education	11	0.6%
Educational Psychology	6	0.3%
Community Psychology	1	0.1%
Health Education	1	0.1%

Are you licensed under your current degree?

Highest Degree Licensed	Frequency	Percent
Yes	1,411	76.7%
No	429	23.3%

Center Data

The information below describes 797 colleges and universities that renewed membership for the 2025-2026 academic year.

Utilization: The total number of students who attended at least 1 appointment between July 1st and June 30th. The average utilization is 796.

	Frequency	Percent
under 151	84	12.2%
151-200	51	7.4%
201-300	76	11.0%
301-350	44	6.4%
351-400	38	5.5%
401-500	68	9.9%
501-600	43	6.2%
601-700	41	6.0%
701-850	48	7.0%
851-1000	33	4.8%
1001-1200	22	3.2%
1201-1500	39	5.7%
1501-2000	39	5.7%
2001-3000	37	5.4%
3001+	25	3.6%

Utilization Rate: The proportion (%) of enrolled/eligible students who attended at least 1 appointment in the counseling center between July 1st and June 30th. The average percent utilization was 10.2%.

	Frequency	Percent
less than 5%	159	23.1%
5-7%	132	19.2%
7-10%	149	21.7%
10-12%	65	9.4%
12-15%	50	7.3%
15-20%	59	8.6%
20-30%	54	7.8%
more than 30%	20	2.9%

Clinical Capacity: The total number of contracted/expected clinical hours for a typical/busy week when the center is fully staffed (not including case management and psychiatric services). One Standardized Counselor represents one unit of 24 clinical hours per week. The average clinical capacity is 197 hours.

	Frequency	Percent
48 or less (0-2 Standardized Counselors)	68	9.9%
49-72 (2-3 Standardized Counselors)	83	12.1%
73-96 (3-4 Standardized Counselors)	84	12.2%
97-120 (4-5 Standardized Counselors)	70	10.2%
121-144 (5-6 Standardized Counselors)	62	9.0%
145-168 (6-7 Standardized Counselors)	55	8.0%
169-192 (7-8 Standardized Counselors)	28	4.1%
193-240 (7-9 Standardized Counselors)	61	8.9%
241-312 (9-13 Standardized Counselors)	52	7.6%
313-432 (13-18 Standardized Counselors)	53	7.7%
over 433 (18+ Standardized Counselors)	72	10.5%

Does your center have an APA accredited doctoral internship program?

	Frequency	Percent
No	650	81.6%
Yes	147	18.4%

Is your counseling center currently accredited by IACS (International Accreditation of Counseling Services)?

	Frequency	Percent
No	617	77.4%
Yes	180	22.6%

Is the director of your center a member of AUCCCD?

	Frequency	Percent
N/A	2	0.3%
No	178	22.3%
Yes	617	77.4%

Clinical Characteristics

Does your center have session limits for individual counseling?

	Frequency	Percent
No	539	67.6%
Yes	258	32.4%

Routine individual counseling appointments usually occur weekly.

	Frequency	Percent
No	383	48.1%
Yes	414	51.9%

After-hours crisis services are primarily handled by counseling center staff (i.e., not by a 3rd party such as ProtoCall).

	Frequency	Percent
No	603	75.7%
Yes	194	24.3%

Staff are required to absorb a specified number of new clients into their caseload per week (regardless of current caseload).

	Frequency	Percent
No	624	78.3%
Yes	173	21.7%

We have one or more staff who focus on community referrals (e.g., case/care manager, referral coordinator).

	Frequency	Percent
No	460	57.7%
Yes	337	42.3%

A student's first clinical contact is usually a full (45-60 min) assessment.

	Frequency	Percent
No	253	31.7%
Yes	544	68.3%

Clinicians in our center regularly engage in remote work (i.e., working from home on a scheduled basis as opposed to occasionally working from home as needed).

	Frequency	Percent
No	501	62.9%
Yes	296	37.1%

Our campus police/public safety uses a co-responder model (i.e., a mental health worker goes with or instead of campus police/public safety to respond to crisis or mental health calls).

	Frequency	Percent
No	655	82.2%
Yes	142	17.8%

In our co-responder model, the mental health worker is a counseling center employee.

	Frequency	Percent
No	47	32.4%
Yes	98	67.6%

Do your students pay out-of-pocket for individual counseling?

	Frequency	Percent
No, students do not pay for individual counseling sessions	748	93.9%
Yes, but students only pay after a certain number of sessions	19	2.4%
Yes, some students pay depending on insurance	7	0.9%
Yes, all students pay for all individual counseling sessions	11	1.4%
Other	12	1.5%

Third-party vendors

Does your center have a contract with a third-party vendor for individual counseling?

	Frequency	Percent
No	425	53.3%
Yes	372	46.7%

Does your center have a contract with a third-party vendor for psychiatric services?

	Frequency	Percent
No	634	79.5%
Yes	163	20.5%

Does your center have a contract with a third-party vendor for intensive outpatient services?

	Frequency	Percent
No	745	93.5%
Yes	52	6.5%

Does your center have a contract with a third-party vendor for peer support?

	Frequency	Percent
No	672	84.3%
Yes	125	15.7%

Does your center have a contract with a third-party vendor for coaching?

	Frequency	Percent
No	760	95.4%
Yes	37	4.6%

Does your center have a contract with a third-party vendor for crisis services?

	Frequency	Percent
No	379	47.6%
Yes	418	52.4%

Does your center have a contract with a third-party vendor for referral services?

	Frequency	Percent
No	696	87.3%
Yes	101	12.7%

Does your center have a contract with a third-party vendor for mental health screening?

	Frequency	Percent
No	743	93.2%
Yes	54	6.8%

Does your center have a contract with a third-party vendor for training?

	Frequency	Percent
No	785	98.5%
Yes	12	1.5%

Institutional Data

Data for 2025-2026 has been contributed by 795 colleges and universities that hold membership with CCMH. Characteristics for these institutions are listed below.

Institutional Enrollment: The total number of students enrolled at the institution who are eligible for services. The average enrollment is 11,732.

	Frequency	Percent
under 1,501	91	13.2%
1,501-2,500	82	11.9%
2,501-5,000	123	17.9%
5,001-7,500	70	10.2%
7,501-10,000	65	9.4%
10,001-15,000	81	11.8%
15,001-20,000	52	7.6%
20,001-25,000	36	5.2%
25,001-30,000	18	2.6%
30,001-35,000	19	2.8%
35,001-45,000	29	4.2%
45,001+	22	3.2%

Public or Private

	Frequency	Percent
Combined	4	0.5%
Private	323	40.5%
Public	470	59.0%

Type of institution (Check all)

	Frequency	Percent
4-year College/University	700	88%
Religious-Affiliated School	60	8%
2-year College/University	51	6%
Community College	46	6%
Health Professional School	46	6%
STEM Institution	36	5%
Other	32	4%
Creative Focus	13	2%
Historically Black College/ University (HBCU)	12	2%
Tribal	1	0%

Location of Campus

	Frequency	Percent
Canada	11	1.4%
International	22	2.8%
Midwest (IA, IL, IN, MI, MN, MT, ND, NE, OH, SD, WI)	166	20.8%
Northeast (CT, DE, MA, MD, ME, NH, NJ, NY, PA, RI, VA, VT, WV)	266	33.4%
South (AL, AR, FL, GA, KS, KY, LA, MO, MS, NC, NM, NV, OK, SC, TN, TX)	211	26.5%
West (AK, AZ, CA, CO, HI, ID, OR, UT, WA, WY)	121	15.2%

Athletic Division

	Frequency	Percent
Division I	283	35.5%
Division II	132	16.6%
Division III	215	27.0%
None	167	21.0%

Recommended Citation

Center for Collegiate Mental Health.
(2026, October). 2026 Annual Report
(Publication No. STA 26-544).

Contact Information

Center for Collegiate Mental Health, Penn State
University
501 Student Health Center
542 Eisenhower Road
University Park, PA 16802
Phone: 814-865-1419
Email: ccmh@psu.edu
Web: ccmh.psu.edu

This publication is available in alternative media on request. Penn State is an equal opportunity employer and is committed to providing employment opportunities to all qualified applicants without regard to race, color, religion, age, sex, sexual orientation, gender identity, national origin, disability or protected veteran status. UBR STA 26-544.