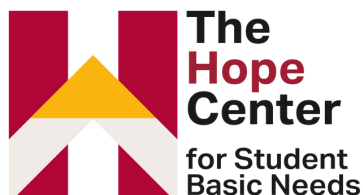


MICHIGAN MENTAL HEALTH LANDSCAPE REPORT

JUNE 2025

Mental Health
Improvement through
Community Colleges



MHICC MISSION STATEMENT

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

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EXECUTIVE SUMMARY

Community college (CC) students often face unique mental health challenges, with over half of CC students experiencing clinically significant mental health challenges. Despite this, community colleges often have fewer resources, funding, and infrastructure to support student mental health than 4 year colleges and universities, creating disparities in treatment access for students.

This report is intended to shed light on the availability and accessibility of mental health services for students across Michigan community colleges. The data presented in this report were collected from the 2024 Michigan Mental Health Landscape Survey, a survey fielded to mental health providers and decision-makers at each of Michigan's 31 community and tribal colleges. In 2024, 23 colleges submitted responses.

The data presented through this report show that:

- 70% of Michigan CCs offer individual counseling to their students. Many CCs offer referrals to community care (87%), crisis services (74%), teletherapy (65%), and/or have a Behavioral Intervention Team (61%). Fewer CCs offer group counseling to their students (35%).
- 13% of Michigan CCs don't have any in-house mental health services.
- Many colleges have limited capacity to support student mental health, with 85% of Michigan CCs falling below the recommended full-time counselor-to-student ratio of 1 counselor to 1000 students.
- Counseling staff at Michigan CCs often serve additional roles other than mental health counseling (e.g., academic advising): 41% of CCs have providers that serve additional roles.
- Few CCs have limitations as to which students can access counseling services, and for how long. Nine percent of CCs limit their services to students above age 18, and 33% have a cap on the number of sessions a student can attend.
- 41% of CCs offer mental health services to students via third-party digital apps.
- Many colleges leverage community mental health providers or other local agencies to support their students: 43% report having formalized partnerships with community providers, while 52% report utilizing informal partnerships or referral pathways with community providers.
- Expanding the mental health services provided and increasing the number of mental health providers are the top reported priorities for improving colleges' support for student mental health.
- Lack of funding, competing priorities, and lack of counseling staff time are the most commonly reported barriers to improving mental health services at Michigan CCs.

For more information about the MHICC initiative, visit mentalhealthcc.org.

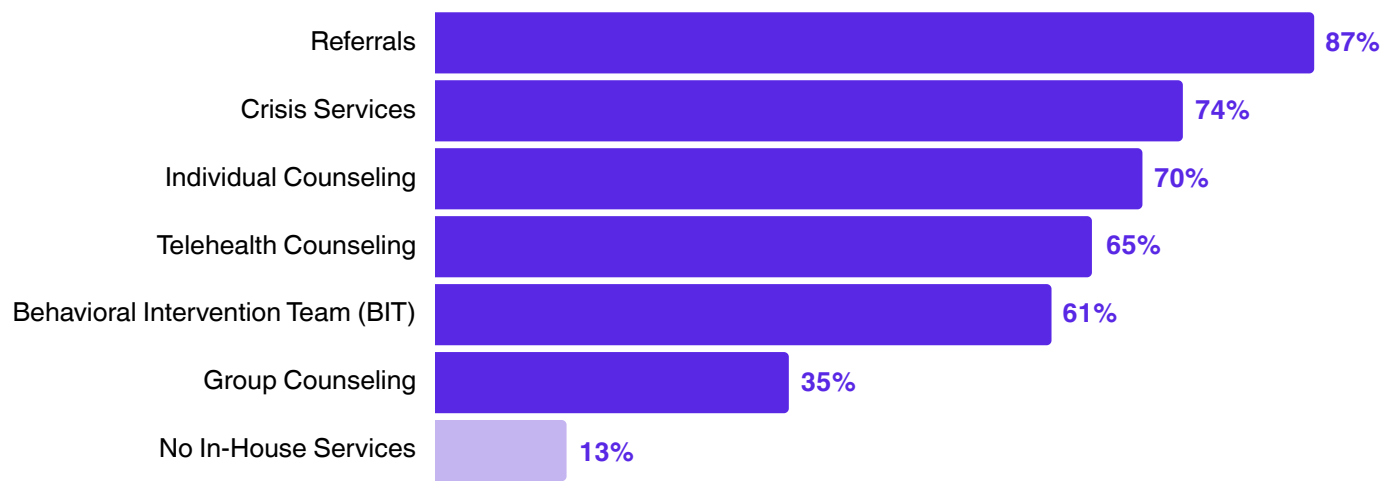
For additional data and relevant resources, visit our newly launched technical assistance platform at [MiTRENDS.org](https://mitrends.org).

MENTAL HEALTH SERVICE AVAILABILITY

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

The chart below shows the percentage of colleges that provide each type of mental health service.

Mental Health Services Provided In-House By Michigan CCs



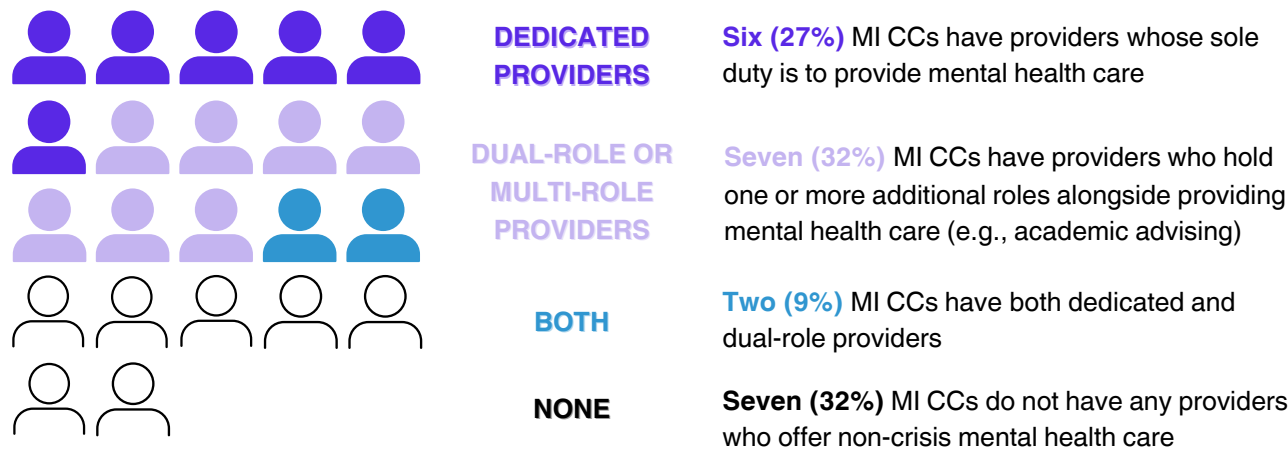
% of MI CCs providing each service (N=23)

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

MENTAL HEALTH PROVIDER STAFFING

Mental Health Provider Models of Care at Michigan CCs

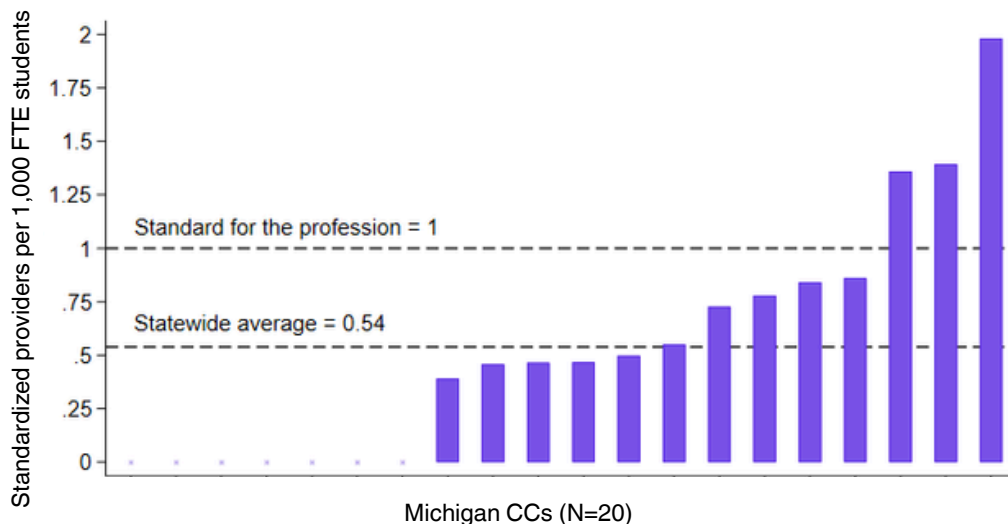
Among colleges that offer non-crisis mental health care (i.e., individual counseling), staffing models can look very different. The chart below highlights the range of care models used to support students.



MENTAL HEALTH PROVIDER CAPACITY

Capacity to support student mental health varies widely among Michigan CCs. As shown below, 85% of Michigan CCs fall below the recommended full-time counselor-to-student ratio of 1 mental health provider per 1,000 students.² 60% of Michigan community colleges also fall below the statewide average for this ratio.

Michigan CC Mental Health Providers Per 1,000 Students

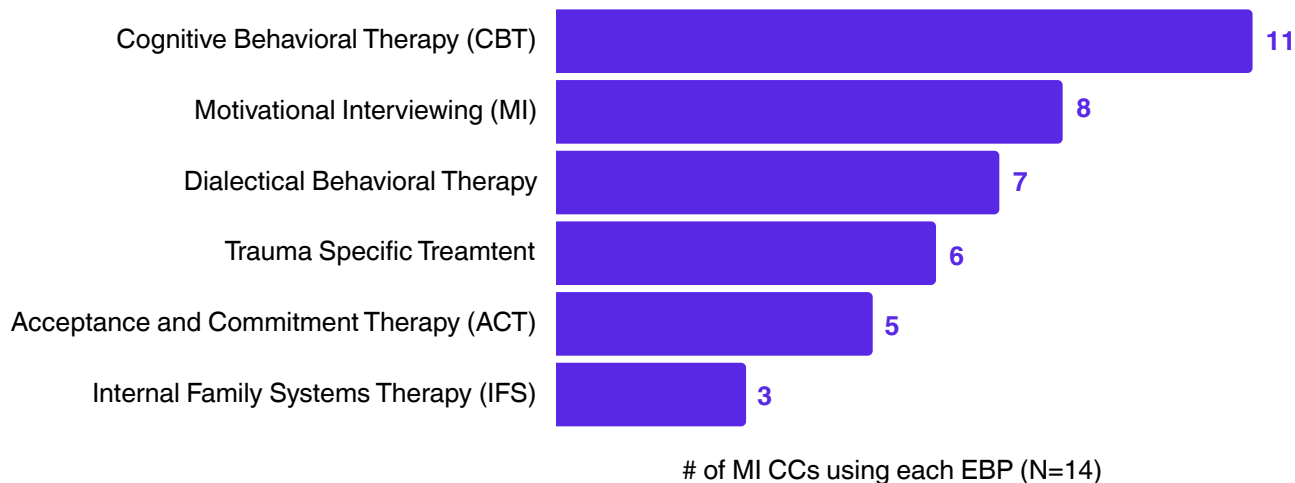


Note: This data represents colleges' total clinical capacity to provide individual counseling. One standardized provider represents a 24-hour block of clinical hours per week, assuming a provider working 40 hours per week would have 24 clinical hours per week. For more information on this measure, see the Methodology section (page 9).

EVIDENCE BASED PRACTICE USE

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

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



When asked which EBPs they would like to use but don't currently, the EBP that the most CCs reported wanting to use is **Internal Family Systems Therapy**.

COUNSELING SERVICE LIMITS

Student Eligibility for Counseling Services at Michigan CCs

Approximately 15% of Michigan community college students are dual enrolled while completing degree requirements at their high school,³ with many of these students being under 18 years old. Providing mental health support to underage students can be challenging for colleges due to legal and ethical considerations. Our data show that different colleges navigate this in different ways.



**STUDENTS UNDER 18
ELIGIBLE**

13 CCs (59%) have counseling services that are available to students under 18

**STUDENTS UNDER 18
INELIGIBLE**

2 CCs (9%) have counseling services that are NOT available to students under 18

**NO COUNSELING
SERVICES**

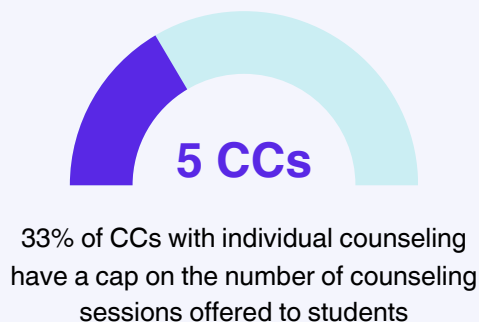
7 CCs (32%) do not have in-house counseling services

Dual- Enrollment

We identified inconsistencies in whether dual-enrolled students that are over 18 could access counseling services at Michigan CCs. Many colleges indicated referring students to their high school counseling first.

Counseling Session Limits at Michigan CCs

While most colleges do not limit student counseling sessions, $\frac{1}{3}$ of MI CCs that offer individual counseling sessions do cap the number of annual sessions students can receive.



**10
SESSIONS**

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

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

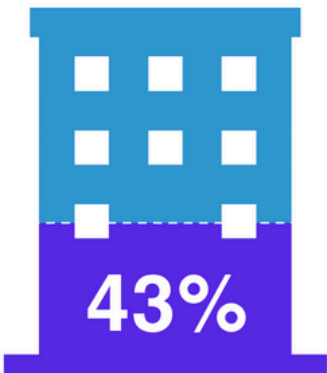
Colleges often set session limits to help providers reach more students. However, for students who need long-term support -- especially those facing complex or persistent mental health challenges -- these limits can create additional barriers to treatment.

EXTERNAL PARTNERSHIPS

Partnerships with Local Mental Health Providers

Many Michigan community colleges partner with local providers and organizations to expand students' access to comprehensive mental health services. These partnerships range from informal personal connections to formal agreements where a Memoranda of Understanding or other contract is in place.

Formal Partnerships



43% of MI CCs have at least one formal partnership (i.e., have a signed Memorandum of Understanding or other agreement) with a local mental health provider

Informal Partnerships



Some Michigan CCs also have informal relationships or referral networks with local providers and service agencies in their community. These informal partnerships vary greatly, from offering students information on a local provider to providing “warm handoffs”.

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

Digital Mental Health Intervention Use at Michigan CCs

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

Among Michigan community colleges:

9 CCs

(41%) offer a DMHI to their students

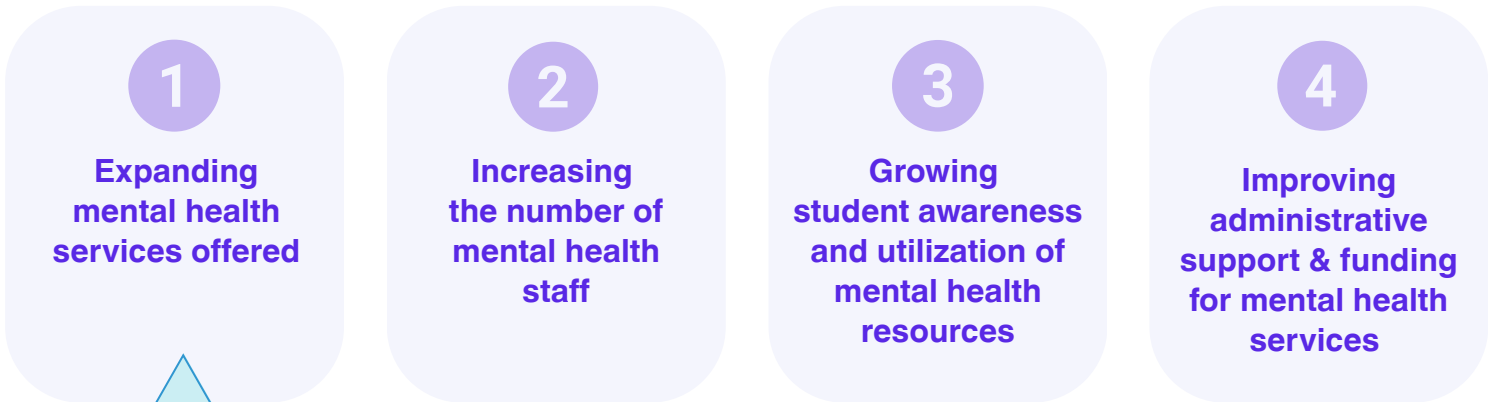


- 4 CCs offer **Uwill**
- 2 CCs offer **BetterMynd**
- 1 CC offers **Welltrack**
- 1 CC offers **TalkCampus**
- 1 CC offers **SwiftMD**

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

PRIORITIES FOR CHANGE

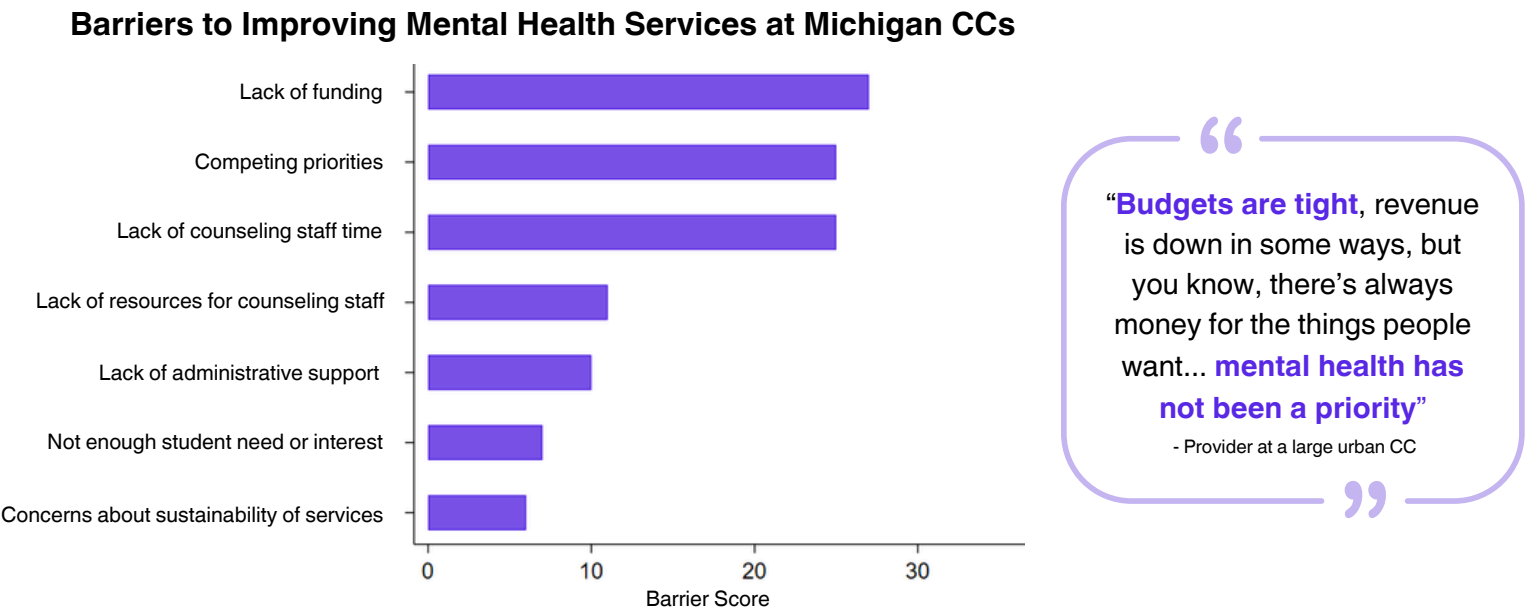
Many colleges report a desire to expand the mental health services offered to students on their campus. When asked what their biggest priorities for improving their campus mental health supports were, the following themes were continually described in their responses.



Specific ways of expanding mental health services mentioned include offering mental health workshops and training sessions, peer / group counseling, digital resources, and walk-in support.

INSTITUTIONAL-LEVEL BARRIERS

Although many colleges report a desire to expand their mental health services offered to students, they often face significant barriers to enacting change. The most commonly reported barriers are shown below.



Note: Each bar represents the total score for each barrier. This score was computed based on CCs’ responses, where the barrier selected as the 1st barrier receives 3 points, the 2nd barrier 2 points, and the 3rd barrier 1 point.

METHODOLOGY

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

Given that responses to survey questions were voluntary, some colleges left occasional data fields blank, while 2 respondents submitted partial survey responses. When cleaning the survey data, colleges that were missing data for a metric were omitted the corresponding percentages shown throughout this report.

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

REFERENCES

- (1) Lipson SK, Phillips MV, Winquist N, Eisenberg D, & Lattie EG. Mental health conditions among community college students: A national study of prevalence and use of treatment services. *Psychiatr Serv.* 2024;72(10):1126–1133.
- (2) International Accreditation of Counseling Services. Staff to student ratios. *International Accreditation of Counseling Services*. Accessed May 16, 2025. <https://iacsinc.org/staff-to-student-ratios/>.
- (3) Public Policy Associates. Increasing dual enrollment access and success. *Michigan Community College Association*. Accessed May 15, 2025. https://www.mcca.org/uploads/ckeditor/files/MCCA_Dual-Enrollment-Recommendations_Full-Report_Updated-9-04-24.pdf.

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