

Modelling Student Preferences for the Design of Campus Counselling Services

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Synopsis

Increasing rates of mental ill-health among students in higher education has led to rising demand for campus counselling services and longer waiting times, while considerable unmet need also exists. To design more effective services, it is important to understand what aspects of service provision are most valued by students. To help gain insight into this, we present results from a choice experiment using a sample of 5,000 higher education students in Ireland. We find that waiting time is the most important attribute for students, a finding which has implications for the funding of services. We also find considerable preference heterogeneity for attributes across students and we consider how this can be incorporated in the design of effective services.

Introduction and Background

High and increasing prevalence rates of mental health problems among young people mean that youth mental health is a key priority for policymakers worldwide. Mental ill health is of particular concern in the higher education sector, with numerous studies reporting high prevalence rates of mental health issues among college students. This is problematic for higher education institutions (HEIs), since poor mental health has been found to negatively impact both academic performance and student

retention. Thus, HEIs have an important role to play in the provision and delivery of appropriately designed mental health services on college campuses. The overall objective of our paper is to aid HEIs to design and deliver effective campus counselling services by using data from a large survey conducted in Ireland to elicit student preferences for such services.

Issues and Questions Considered

Many HEIs have experienced significant increases in the demand for counselling services by students with major consequences for service provision and financing, as well as waiting times for students at risk. Despite the high prevalence rates of mental ill-health amongst students, a significant number of those with a mental disorder do not receive treatment. The relatively low uptake of counselling services might be due to a lack of understanding about mental health problems, a preference for self-reliance, perceived stigma, or a reluctance to engage with mental health services. In order to design more effective campus counselling services that may facilitate greater student engagement, it is helpful to understand the aspects of counselling service provision that are most valued by students, as well as to identify any significant differences in preferences for services across student groups.

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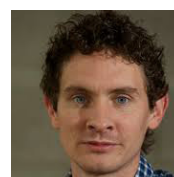
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To help bridge this gap, this paper makes a number of important contributions. First, in using a DCE methodology to examine student preferences for counselling services in HEIs based on a dataset of over 5,000 higher education students, we are able to explore the variation in preferences for counselling systems across groups of students. Second we are able to estimate, in euro terms, how much students are willing to pay for possible improvement in counselling services. Finally, we address the issue of how any changes in the provision of campus counselling services might be financed, which is a particularly important issue in resource-constrained education sectors.

Methodology

To help conduct our analysis we employ a discrete choice experiment (DCE) approach. A DCE is a method used to assess individual preferences for goods or services. It is based on the principle that, firstly, any good or service can be described by its characteristics (or attributes) and, secondly, the extent to which an individual values a good or service depends on the nature and levels of these characteristics. The technique involves presenting individuals with choices of scenarios described in terms of characteristics and associated levels, and for each choice respondents are asked to choose their preferred scenario.

In order to ensure that the attributes and levels used in this choice experiment were salient to and understood by students, we undertook an extensive design. A literature review identified previous studies that examined the valuation of mental health services. Following this, three semi-structured interviews were held with people involved in the provision of mental health services in HEIs in Ireland to gain insight into the current provision, as well as the challenges facing service providers. Three focus group discussions were also held with higher education students across HEIs in Ireland.

Following the initial selection of attributes and levels, we conducted seven pre-pilot interviews using think-aloud exercises during which respondents described their thoughts about the attributes and levels, as well as the choices they were making, which allowed us

to identify potential issues with the attributes and levels before the piloting stage. Finally, a pilot study was conducted on 41 students in one university to check the suitability of the attributes and levels and to ensure that the survey could be completed in the allotted time. Based on feedback from the focus groups, along with the findings from the pre-pilot and pilot studies, five attributes were chosen for inclusion. Namely, we included attributes about how initial contact is made, the length of the waiting time for an appointment, and whether the services are available outside of normal opening hours. We also included an attribute regarding the provision of information about services. Finally, we included a cost attribute and described this as an additional student levy that would be ring-fenced for counselling services. In total over 5000 students from 13 HEIs took part in the final survey.

Outcomes and Findings

Overall, we found that having shorter waiting times is the most valued counselling service attribute. The results also show that students with no current or previous need for counselling are willing to pay for the provision of counselling services in HEIs. This could reflect their wish to have the option of an appropriately designed counselling system available should they ever need it. It could also reflect their wish to have such services available for fellow students who use or need such services (caring externalities). Although shorter waiting times are highly valued by all students, postgraduate students, those from higher social classes, and those with experience with mental health services, are especially willing to pay more for shorter waiting times. Information provision is also valued differently across different student groups. For instance, undergraduate students (and first year students in particular), students from lower social classes, and students who have no experience of mental health services, value information more. It is worth emphasising that the interest of this study was in students' preferences for the design of campus counselling services, looking specifically at the facilitators to accessing counselling services. Future research could consider preferences for specific treatments, once individuals are in the care of services.

The underlying paper was published in *Studies in Higher Education* and a full copy can be obtained at <https://doi.org/10.1080/03075079.2020.1744124>

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