

College Student Perceptions of Integrated Behavioral Health (IBH) Care on Campus

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INTRODUCTION

- The Integrated Behavioral Health (IBH) approach of health care service delivery is becoming popular as a way to bring behavioral health services and primary care services into one setting.
- In IBH, a behavioral health provider is incorporated into the primary care team to support the primary care provider (PCP) and team and to provide behavioral health services onsite.
- Given the large mental health burden of college students and their lack of access to treatment, implementing IBH models on college campuses would be a worthwhile goal.

METHOD

Participants

- 74 Wichita State University ages 18 and older completed an online survey

Materials

- **Student Perceptions of IBH**
 - Seven items were created to assess student perceptions of IBH:
 - Awareness of the merger
 - Comfort level in receiving mental health treatment in a medical setting
 - Likelihood of using the Student Wellness Center for health care and mental health care
 - How beneficial the merger was perceived
 - Potential barriers and benefits to accessing the Student Wellness Center
- **Intentions to Seek Help**
 - General help-seeking questionnaire (Wilson et al., 2005) considers the likelihood of a person seeking help from another person or professional for a personal problem.
 - Individuals rate the degree of which person they may consider seeking help from for a personal problem.
 - 11-item questionnaire has a 7-point scale that ranked from 1 (*Extremely unlikely*) to 7 (*Extremely likely*).
 - Fill in the blank option added if participant had another person or professional not listed in the questionnaire.



DISCUSSION

Major Findings

- Students' perceptions towards integrated behavioral health care were more accepting on a college campus.
- Students saw many benefits in this setting of care for both mental and physical issues.
- Barriers were reported as well and will be able to give more insight towards the use of the student wellness center.
- The intentions to seek help in an IBH setting did not differ in the intentions to seek help in a traditional mental health care setting.

Future Research

- There is still more to look into with integrated behavioral health (IBH) care in college campuses.
- Given the overall acceptability of the model and at least modest intentions to seek help in an IBH setting, future research may focus on actual service utilization of integration on college campus.
- It may be helpful to examine what factors (e.g., stigma) impact acceptability and utilization. Results from studies such as this may help with implementation in other college campuses.

STATEMENT OF PURPOSE

- Recently, Student Health Services (SHS) and Counseling and Prevention Services (CAPS) merged into the Student Wellness Center on the campus of Wichita State. The merger now provides the opportunity for more collaborative and integrated services on campus.
- Given this recent change to a more integrated model of care at WSU, the purpose of this project was to answer the following research questions:
 - 1) What are college students' perceptions about IBH on campus?
 - 2) Are college students just as likely to seek mental health help in IBH settings in comparison to traditional mental health care?

RESULTS

- Aware of the merger:
 - 54.1%
- Comfort level in receiving mental health treatment
 - 40.5% very comfortable
 - 24.3% extremely comfortable
 - 23% moderately comfortable
 - 6.8% slightly comfortable
 - 2.7% not at all comfortable
- View the merger as beneficial
 - 35.1% very beneficial
 - 33.8% extremely beneficial
 - 17.6% moderately beneficial
 - 10.8% slightly beneficial
- Likelihood of using the student wellness center for health care:
 - 28.4% neutral
 - 18.9% extremely likely, likely, and unlikely
 - 13.5% extremely unlikely
- Likelihood of using of the student wellness center for mental health care:
 - 31.1% neutral
 - 18.9% likely and unlikely
 - 17.6% extremely likely
 - 12.2% extremely unlikely
- No significant difference between intentions to seek help from a mental health professional in IBH ($M = 4.41$, $SD = 1.89$) and intentions to seek help from traditional mental health care professionals ($M = 4.69$, $SD = 1.83$), $t(67) = -1.9$, $p = .061$.
- One-sample t -test indicated that intentions to seek help from a mental health professional in IBH was no different than a neutral score of 4 (between a score of 3 "unlikely" and 5 "likely"), $t(67) = 1.79$, $p = .078$.
- Barriers and benefits are reported below:

Barriers		
	n	%
Lack of privacy	16	21.6
Not enough money	19	25.7
Lack of transportation	2	2.7
Stigma	11	14.9
Services not helpful	4	5.4
Doubts of quality of services	16	21.6
No anticipation for barriers	22	29.7
Lack of time	23	31.1

Benefits		
	n	%
Easier access to MH professional	44	59.5
Collaboration between PCP and MH provider	37	50.0
Save time seeking mental and physical health care	42	56.8
Higher quality of services	10	13.5
Reduced stigma	23	31.1
Whole-person/holistic care	24	32.4
Save money on health care	8	10.8
No anticipation for benefits	4	5.4

REFERENCES

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