



## **Part I: Follow-up Assessment Report Template**

**Date of Follow-up Report Submission: August 3<sup>rd</sup>, 2020**

**Name of Department / Unit: University Counseling Services**

**Name of Contact Person: Jeffrey Lanfear**

**Name of Person(s) Completing Follow-up Report:**

### **I. Follow-Up on Last Year's Assessment Report Recommendations**

Results of last year's survey and recommendations, especially the need to provide more support and supervision for student leaders, were discussed extensively in the student care team during the summer and early fall 2019. The directors of UCS and HPW were instrumental in these discussions.

During the UCS summer retreat and staff meetings, a summary was provided to the UCS staff, resulting in increased awareness of the needs and concerns of student leaders (CQMs, STARS Peer Mentors, RAs, Academic Success Coaches, Orientation leaders, Health Education & Action Team, etc.). As such, UCS trainings were revised with greater emphasis on student leader self-care, boundaries and the importance of seeking our support and supervision, including counseling.

In addition, more emphasis was placed on normalizing stress and help-seeking, since a high number of survey participants did not report significant distress in attending to mental health, substance abuse, sexual and relationship violence and financial distress concerns and crises among the students in their charge.

The group of directors leading last year's assessment project were influential in connecting with the professional development committee and creating a focus on mental health and crisis for the 2019 Professional Development Symposium. The keynote by Dr. Katie Treadwell addressed crisis and resilience in student affairs work and several sessions focused on the student care team, mental health first aid, supporting veterans in crisis, supporting students with substance abuse, Title IX issues, etc. Significant progress was thus made in informing divisional staff about the specific concerns and crises encountered by our student leaders (and all staff) on a regular basis.

UCS was an active participant in the Assessment Symposium held in fall 2019 to discuss findings and implications for both the department and divisional collaborations.

UCS and other directors did not write a formal training curriculum for student leaders. Although a lot of consultations were had among divisional staff and leaders resulting in updated training materials, the pandemic of winter and spring 2020 did not allow us to complete the work of a formal curriculum.



**Part II: Annual Assessment Report Template: Learning**  
Academic Year: 2019-2020

**Date of Report Submission: November 2<sup>nd</sup>, 2020**

**Name of Department / Unit: University Counseling Services**

**Name of Contact Person: Rachana Doshi**

**Name of Person(s) completing report or contributing to the project: Rachana Doshi, Psy.D.**

**I. Abstract**

This learning assessment project examined students' ability to identify coping skills gained from engaging in group therapy at University Counseling Services. Students who participated in group therapy were administered surveys to determine if they could identify at least one coping skill learned after their participation in group therapy during the Winter Quarter of 2020. By analyzing the data, 96% of students were able to meet expectations for identifying at least one coping strategy. Major themes that emerged included students increasing their self-awareness, students learning to build connections in relationships, and students increased ability to understand their emotions. The findings in this project suggest the importance of expanding the group therapy program and that UCS will have a goal of adding an additional interpersonal process group for the 2020-2021 academic year.

**II. Assessment Question**

To what extent does group therapy contribute to students' ability to describe healthy coping strategies?

**III. Introduction & Context**  
**Project Overview**

The aim of the assessment project was to identify if students who participated in group counseling at University Counseling Services (UCS) were able to describe healthy coping strategies.

**Learning Outcomes Assessed**

The Program Area Learning Outcome for UCS indicates that students who participate in activities and services that increase intrapersonal and interpersonal learning will be able to describe healthy coping strategies. Specifically, this assessment project is looking to assess whether students who are engaged in group counseling sessions are able to describe healthy coping strategies

## **Context for This Year's Report**

The goal of this project is to understand student learning, specifically learning of coping skills, after students participate in group counseling at UCS. We wanted to assess for this because we currently do not have an assessment in place to understand what specifically students are learning from group therapy services. We have assumptions of what they may be learning according to literature related to group therapy but have not gathered that information directly from students up until this point. Group therapy is also essential to UCS services in that it allows for multiple students to have access to services and clinicians during one appointment time. This helps with supporting the volume of students that are looking for services and helps to ensure students have mental health support through the university. It also contributes to students experiencing a campus space that values and appreciates inclusivity and diversity and helps foster a sense of belonging and connection to the DePaul community.

In terms of how this assessment project relates to the larger university strategic plan, group therapy directly contributes to the second strategic priority: “Ensure a welcoming, engaging, diverse, and inclusive campus environment.” It also contributes to the third strategic priority: “Excel in preparing all students for global citizenship and success” through helping students increase their ability at effective communication. They also increase their ability to reflect on complex social and cultural issues and have exposure to diversity of opinions and ways of thinking.

The foundation for the goals of group therapy at UCS are derived from the writings and theory of Dr. Irvin Yalom. He has identified a multitude of therapeutic factors that are gained from group therapy. These factors include imparting information, development of socializing techniques, imitative behavior, catharsis, cohesiveness, interpersonal learning-input and interpersonal learning-output (Yalom & Leszcz, 2005). Imparting information involves group facilitators sharing information about mental health and guidance around interpersonal dynamics occurring within the group. In addition, information is shared and learned through group members providing advice and suggestions. According to Yalom & Leszcz (2005), group members learn to develop advanced social skills that help them with knowing how to respond to others, engage in effective conflict resolution, and increase their ability to have empathy for others. Group members also begin to engage in imitative behavior of group facilitators or senior group members, where they begin to learn through the observation of other group members' self-exploration. This allows for group members to then begin to experiment with new ways of communicating and connecting with others (Yalom & Leszcz, 2005). Group involves interpersonal learning where group members learn to understand their interpersonal impact through receiving feedback from other members. The member and facilitators come together to create a space that allows for members to interact with each other in a more adaptive way (Yalom & Leszcz, 2005). We at UCS believe that these therapeutic factors can impact student engagement and student success. Group can help students feel a sense of belonging and connectedness through the experience of these therapeutic factors.

## **IV. Data Collection & Methodology**

### **Population and Sample**

In 2019-2020, UCS provided four counseling groups during Fall and Winter Quarters. We ceased groups for Spring Quarter due to the COVID-19 pandemic. For this project, we specifically focused on surveying students who participated in group counseling during Winter Quarter of 2020. The students ranged in age, race, sexual orientation, gender, and year in school. The four groups were comprised of two All Gender interpersonal process groups located at the Lincoln Park Campus, a Women's interpersonal process group located at the Lincoln Park Campus, and one All Gender interpersonal process group located at the Loop Campus. The population was all students who participated in group therapy during the 2019-2020 year. I decided on sampling group members specifically from the Winter Quarter 2020 group, which in total comprised between 31-34 group members throughout the duration of the quarter. On average, each group had between 7-9 members. The specific sample of students we invited to participate in this assessment project were students that were present for the final group of the quarter. A total of twenty-five students were given the survey due to them being in attendance during the final group of Winter Quarter. The information gathered from these students ensure a representable sample to make generalized claims about all students who may attend group counseling.

### **Data Collection**

For data collection, we used surveys to measure student learning (Appendix A). These surveys were designed specifically for the assessment project and were administered during the last group counseling session during Winter Quarter of 2020 for four different groups by the respective group facilitators. The surveys were given in-person after the session ended. The survey was created by the Group Coordinator/Staff Psychologist at UCS (Dr. Rachana Doshi) and the information collected within the survey was demographic information (age, gender, sexual orientation, race, year in School) and a question asking students to describe at least one coping strategy that they had learned in group. We did not collect student ID information to preserve confidentiality and to prevent jeopardizing the clinical relationship with the students. We decided to assess at the end of winter quarter to allow time for group members to become acquainted with the process of group therapy. In addition, it takes time to refer students to begin group, as a result we did not assess during Fall 2019 due to groups historically not beginning until the third or fourth week of classes, leaving members to participate for less than six sessions. I also did not administer a survey during Spring Quarter 2020 due to the deadlines indicated for this assessment project, which would not have left sufficient time to complete the project.

### **Data Analysis**

In order to analyze and interpret the results, I used quantitative and qualitative data analysis. A one-question survey was administered asking participants to describe at least one coping strategy that they learned in group. I created a rubric to assess the extent to which students demonstrated an ability to identify coping strategies. This rubric had one domain related to students' ability to identify at least one coping strategy. Three scoring levels were created to reflect student learning: fails to meet expectations, meets expectations, and exceeds expectations. Fails to meet expectations indicates a student's inability to identify a coping skill, meets expectations indicates that the student identified one coping skill, and exceeds expectations indicates that the student

was able to identify at least two coping skills. In addition, qualitative data analysis was done to identify common themes in group members' responses.

### **Participant Consent**

Participants were informed about the assessment project the week prior to administering the surveys. The respective group facilitators informed participants that participation was optional. The surveys were anonymous and did not collect any identifying information other than demographic information. The surveys were given to the Group Coordinator, which she stored in a locked cabinet in her DePaul office.

## **V. Data & Findings**

### **Response Rate and Demographics**

The number of students that participated in the survey were 25 group members across four therapy groups. The four groups had expected a total of 33 students to be in attendance but only 25 students attended the final group, yielding a response rate of 76%. Demographic data was collected within the survey, but was not specifically examined in the assessment report.

### **Key Findings**

The participants were asked about demographic information in their surveys (Appendix C). In terms of gender, 68% identified as women, 28% male, and 4% prefer not to answer. The age range was between 18-34 years with a mean age of 21.4 years and median age of 20. Graduate students comprised 12% and undergraduate students comprised 88% of members. In terms of race, 48% identified as White, 12% as Latinx, 8% as African American, 8% as Asian, 8% as Indian, 4% as Middle-Eastern, and 12% as Biracial. Finally, in terms of sexual orientation, 52% identified as Heterosexual, 28% as Bisexual, 8% as Gay, and 4% each as Asexual, Pansexual, and prefer not to answer. The key findings for the assessment project reflect that 60% of group participants exceed expectations by identifying more than one coping strategy, 36% met expectations by identifying one coping strategy and 4% failed to meet expectations by not identifying a coping strategy (Appendix D). Additional findings connected to collected demographic information follow. There was a moderate, inverse relationship between students' age and level of demonstrated learning. The younger a student was, the more likely they were to demonstrate a higher level of learning. Female students are more likely to exceed expectations than male students. Students who identify as LGBTQA or pansexual were more likely to exceed expectations while students who identify as heterosexual were more likely to meet expectations. Students of color were slightly more likely to meet or exceed expectations compared to White students (Appendix E).

Group members learned both from an intrapersonal and interpersonal perspective. Major themes within the intrapersonal lens included: identifying emotions, acknowledging emotion, learning to express emotions, increasing self-awareness in relation to one's own emotions, learning self-compassion, acknowledging one's strengths/ accomplishments, learning to develop self-acceptance, validating one's own emotional experiences, prioritizing self-care, developing coping skills for anxiety management, and increasing distress tolerance. One participant's

response highlights increased self-compassion and self-care, he stated, “thanking yourself, looking back on things you've done and giving yourself credit for them. The importance of taking time to reward yourself and care by doing things you enjoy.” Another student discussed the power of connecting to emotions and shared, “vocalizing my emotions-whether that's writing them down, telling them to others, or just saying them out loud to myself; vocalizing my emotions helps me realize what they are and that they are valid.”

Several themes also emerged within an interpersonal learning context. These include learning to be assertive, asserting one’s needs in relationships, increasing comfort with vulnerability in front of others, learning to ask for and receive support from others, discussing feelings in relationships, challenging assumptions about how one is perceived by others, and learning to provide support to others through active listening and empathy (Appendix B). A group member shared her attempt to open up and challenge her assumptions and stated, “telling people about my problems without worrying they hate me. It's going to help me feel more valid in my emotions.” Another participant shared that being in the group taught her how to “be open, talk about it and be real. I have seen how people get advice, get support by talking about what is troubling them and by reaching out to people to talk about it.”

<b>Program Level Learning Outcome</b>	<b>Number of Students Assessed</b>	<b>Number of Students with Acceptable or Better Performance</b>
Students who participate in activities and services that increase interpersonal and intrapersonal learning will be able to describe healthy coping strategies. The service we assessed was specifically interpersonal process group counseling sessions.	25 students within four process groups	24 students (Acceptable or Better Performance was calculated based on if students who participated in group were able to identify at least one coping skill learned through group therapy)

**VI. Discussion & Interpretation of Findings**

**Key Findings (Quantitative Data):**

- Twenty-four out of twenty-five group members or 96% of the sample were able to identify at least one coping skill after group ended. These results confirm that group members are learning coping strategies even if the service provided is not didactic in nature but is more experiential.
- 60% of group members were able to identify at least two coping strategies. This data reveals that students picked up various strategies throughout the duration of group.

- In looking at the statistical data in terms of demographic information, students within marginalized communities (gender, race, sexual orientation), appeared to meet or exceed expectations in comparison to their majority counterparts. Understanding these differences would be a good area of further research.

**Key Findings (Qualitative Data):**

- A theme that emerged qualitatively in the data suggests group members increased their ability to identify and validate emotions, increase self-compassion, and identify tools to help with emotional regulation. The therapeutic factors suggested by Yalom & Leszcz (2005) seem to be demonstrated include imparting of information, imitative behavior, and catharsis.
- The data also reflected group members' increased learning of how to build connections and develop relationships with others. This was not explicitly discussed in a didactic manner during the group sessions, but was rather accomplished through experiential learning. Based on the group members' responses, several had indicated learning to "speak up," listen to others, and to rely on others for support.

The assessment project data reflected what group facilitators anticipated group members were gaining from group therapy, particularly the therapeutic factors listed by Yalom & Leszcz (2005). A few challenges that were encountered included not all group members being present at the final group leading to less members surveyed, In addition, the data did not fully capture what learning occurred in group therapy. I think this was due to group members being asked an open-ended question. One consideration was to have listed several coping skills that were hypothesized to be learned in group therapy and have members identify which ones they resonated with. The results in this survey help support the importance of group therapy and push to expand our group program. Further, this data reveals how helpful group therapy can be, given the current pandemic and the quarantine. With increased isolation and disconnection for students, group therapy can be source of social and emotional support and give students a sense of community and connection to DePaul.

## **VII. Recommendations and Plans for Action**

### **Recommendations**

- Due to the pandemic and having to transfer services to a virtual space, UCS decided to launch two online interpersonal process group for Fall Quarter 2020 instead of the four groups we had going last academic year. It is recommended that UCS continue to expand our online group therapy program.

### **Action Plan**

- Launch a third online interpersonal process group either Winter or Spring Quarter of 2020.
- A barrier to this plan would involve having a sufficient number of members to begin an additional group. We typically start a group with a minimum of six members, as it is typical to have some dropout of members in the first few weeks

of a group. This at times contributes to the delaying of group from starting for a few weeks into the quarter. Also, the quarter system increases the difficulty in retaining members due to students' schedules shifting each quarter. Historically, it has been helpful to have a few senior group members (students that have been in group before) present when starting a new group as these members tend to be consistent in attendance. This results in having to recruit less new members and allows group to start earlier into the quarter.

- Due to licensing laws, UCS is currently limited to providing direct therapy services to students that are residing in Illinois and as a result out of state students would not be able to access group therapy services. This can also limit the amount of students that are referred to group therapy, leading to delaying or preventing a group from forming.

### **Sharing the results**

The results of the assessment project will be shared with UCS staff (particularly those that do not facilitate group) to inform them of the learning that is happening with students who participate in group. The hope is that this can encourage staff members to speak to the benefits of group to students who are inquiring about UCS services, to their individual therapy clients and to other campus partners and student groups/organizations. An important aspect of UCS's mission is to support students from marginalized backgrounds and using these results to communicate positive learning outcomes from group members that may share similar identities can help reduce mental health stigma and increase utilization of UCS services, particularly group therapy.

**References**

Yalom, I., & Leszcz, M. (2005). *The theory and practice of group psychotherapy* (5<sup>th</sup> ed.). New York: Basic Books



**Appendix**  
Academic Year: 2019-2020

Date of Report Submission: November 2nd, 2020  
Name of Department / Unit: University Counseling Services  
Name of Contact Person: Rachana Doshi  
Name of Person(s) completing report or contributing to the project: Rachana Doshi, Psy.D.

**Appendix A (Group Therapy Survey)**

**Group Therapy Survey – DePaul University Counseling Services:**

**Group Time & Day/Location:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Facilitator(s):** \_\_\_\_\_

**Group Participant Information**

Please fill-in or circle all answers which apply to you:

**Age:** \_\_\_\_\_

**Gender:** Female Male Non-binary Transgender Other(specify): \_\_\_\_\_  
Prefer Not To Answer

**Sexual Orientation:** Heterosexual Gay Lesbian Bisexual Other(specify): \_\_\_\_\_  
Prefer Not To Answer

**Race:** Black/African-American/African Asian/Asian-American/Pacific Islander/Asian Indian  
Hispanic/Latino/a/Latinx Native American White/European-Am. Middle-Eastern Multi-  
Racial Other(specify): \_\_\_\_\_ Prefer Not To Answer

**Year in School:** First-Year Student Sophomore Junior Senior Graduate Level

**Survey Question**

In your own words, describe at least one coping strategy you learned in group. If you identify more than one coping strategy, please describe each strategy that you have learned.

**Appendix B (Data Results)**

Participant	Group	Fails to Meet Expectation	Meets Expectation	Exceeds Expectation	Coping Strategy Named	Age	Gender	Sexual Orientation	Race	Year in School
1	Friday Morning Group				Thanking an anxious/negative thought to acknowledge the underlying insecurity/where it comes from and divorce the thought from the idea it is trying to convey.	20	Female	Heterosexual	Asian	Senior
2	Friday Morning Group				Being more willing to speak out about how I'm feeling because my emotions are valid. Also understanding that I am improving if it's not immediate or tangible	22	Female	Bisexual	African American	Senior
3	Friday Morning Group				Vocalizing my emotions-whether that's writing them down, telling them to others, or just saying them out loud to myself; vocalizing my emotions helps me realize what they are and that they are valid.	19	Female	Asexual	White	Sophomore
4	Friday Morning Group				Telling people about my problems without worrying they hate me. It's going to help me feel more valid in my emotions.	20	Female	Heterosexual	Indian	Junior
5	Friday Afternoon Group		1		I learned to listen and not to respond out of care for what other people have to say.	19	Male	Heterosexual	Indian	Sophomore
6	Friday Afternoon Group				I learned to be better at listening and acknowledging my anger instead of letting it control me all the time.	19	Female	Heterosexual	White	Sophomore
7	Friday Afternoon Group				How to talk about how I feel and how stressed I am without having to worry about a solution.	19	Female	Bisexual	White	Freshman
8	Friday Afternoon Group				I feel that I learned how to communicate my feelings more clearly and recognized that if I am anxious about a situation talking about I trust will quell that anxiety. In general, group has also made me way more mindful regarding my emotions and how I feel.	19	Male	Heterosexual	White	Sophomore
9	Friday Afternoon Group		1		I learned to use healthier coping methods when I am panicked. I learned how to ground myself by analyzing situations.	21	Female	Bisexual	Latina	Junior
10	Friday Afternoon Group	1			Cannot remember learning any new coping strategies in this group.	27	Prefer Not To Answer	Prefer Not To Answer	White	Junior
11	Friday Afternoon Group		1		When I want to say something (or feel anxious generally), I remember to breathe, relax my shoulders/feet/hands and I am able to calm down.	22	Male	Heterosexual	White	Senior
12	Loop Group				Recognizing my emotions and validating them as necessary but not the end all be all. Expressing myself in a more honest but still compassionate way. I like the idea that my words don't have to be perfect in group. It allows me to better do this outside of group.	20	Female	Bisexual	White	Sophomore
13	Loop Group		1		Appreciating yourself when you take a risk to share more than usual.	21	Male	Heterosexual	White	Junior
14	Loop Group				Thanking yourself, looking back on things you've done and giving yourself credit for them. The importance of taking time to reward yourself and care by doing things you enjoy.	18	Male	Gay	African American	Freshman
15	Loop Group		1		One strategy I found helpful is to thank yourself for doing something difficult. It helps me reinforce positive behaviors when I am not doing so well.	22	Male	Heterosexual	Latino	Senior
16	Loop Group		1		One coping strategy that I have learned in group is trying to distract myself from whatever I am anxious about at the moment. I feel that when I do this, it helps until the anxiety dies down.	20	Male	Gay	White	Sophomore
17	Loop Group				To say what I want to say. Don't assume people know what you're thinking.	20	Female	Pansexual	Latina	Sophomore
18	Loop Group				To say how I feel to someone. I feel emotions, yet I don't say much. Speaking with those close with me was helpful. I also struggle speaking up, so trying to sit close with other people is helpful to make friends, etc.	18	Female	Heterosexual	Latina/White	Freshman
19	Women's Group		1		Check in with friends when feeling overwhelmed. People (at least some) will be responsive even though it might feel like they wouldn't.	34	Female	Heterosexual	Middle-Eastern	Graduate
20	Women's Group				The value of taking time for yourself as well as prioritizing my needs before prioritizing the needs of others. Need to make sure I'm okay first.	18	Female	Bisexual	Indian/White	Freshman
21	Women's Group		1		I have learned to be able to speak what's on my mind, that no matter what, my opinions and thoughts matter to others.	19	Female	Heterosexual	White	Freshman
22	Women's Group				Learning how to put problems in perspective and picking my battles. Wasting energy on something that will not benefit me is something to recognize in myself.	19	Female	Bisexual	Asian/White	Sophomore
23	Women's Group				Be open, talk about it and be real. I have seen how people get advice, get support by talking what is troubling them and by reaching out to people to talk about it.	25	Female	Heterosexual	White	Graduate
24	Women's Group				Talking things out. Listening to your feelings regardless of their connotation. And always more room to listen to others in order to grow.	20	Female	Bisexual	White	Sophomore
25	Women's Group		1		I learned that meditation is a strategy for mental health problems.	30	Female	Heterosexual	Asian	Graduate

**Appendix C (Demographic Table)**

<b>Gender</b>	<b>Count</b>	<b>Percentage</b>
Women	17	68%
Male	7	28%
Prefer Not To Answer	1	4%
<b>Sexual Orientation</b>		
Asexual	1	4%
Bisexual	7	28%
Gay	2	8%
Heterosexual	13	52%
Pansexual	1	4%
Prefer Not To Answer	1	4%
<b>Race</b>		
African American	2	8%
Asian	2	8%
Indian	2	8%
Asian/White	1	4%
Indian/White	1	4%
Latina/White	1	4%
Latino/a	3	12%
Middle-Eastern	1	4%
White	12	48%
<b>Year in School</b>		
Freshman	5	20%
Sophomore	9	36%
Junior	4	16%
Senior	4	16%
Graduate	3	12%
<b>Age</b>		
Age 18-34		
Mean	21.24	
Median	20	
Mode	19	

**Appendix D (Quantitative Data Results)**

Quantitative Data Results	Fails to Meet Expectation	Meets Expectation	Exceeds Expectation
Number of Students	1	9	15
Percentage	4%	36%	60%

**Appendix E (Demographic Data Results)**

UCS Demographic Analyses

**Relationship between learning and age**

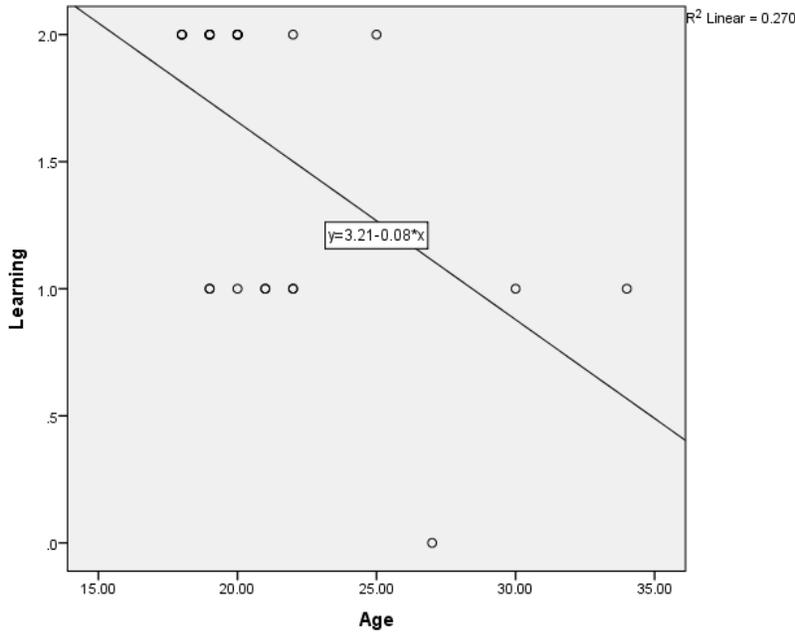
**Correlations**

**Correlations**

		Learning	Age
Learning	Pearson Correlation	1	-.520**
	Sig. (2-tailed)		.008
	N	25	25
Age	Pearson Correlation	-.520**	1
	Sig. (2-tailed)	.008	
	N	25	25

\*\* . Correlation is significant at the 0.01 level (2-tailed).

**Graph**



**Relationship between learning and gender**

**Gender \* Learning Crosstabulation**

			Learning		Total
			ME	EE	
Gender	Male	Count	4	4	8
		% within Learning	50.0%	26.7%	34.8%
	Female	Count	4	11	15
		% within Learning	50.0%	73.3%	65.2%
Total		Count	8	15	23
		% within Learning	100.0%	100.0%	100.0%

**Relationship between learning and sexuality**

**Sexuality \* Learning Crosstabulation**

			Learning		Total
			ME	EE	
Sexuality	Hetero	Count	7	6	13
		% within Learning	77.8%	40.0%	54.2%
	LGBTQ	Count	2	9	11

	% within Learning	22.2%	60.0%	45.8%
Total	Count	9	15	24
	% within Learning	100.0%	100.0%	100.0%

**Relationship between learning and race**

**Race \* Learning Crosstabulation**

			Learning			Total
			BE	ME	EE	
Race	White	Count	1	4	7	12
		% within Learning	100.0%	44.4%	46.7%	48.0%
	PoC	Count	0	5	8	13
		% within Learning	0.0%	55.6%	53.3%	52.0%
Total		Count	1	9	15	25
		% within Learning	100.0%	100.0%	100.0%	100.0%