SUMMARY

This policy outlines conditions under which counseling contacts may be mandated.

POLICY

I. The procedure for mandated treatment referrals is as follows:

   A. The office or agency mandating the contact provides the referral along with information regarding the specific behavior or situation of concern.

   B. The student makes his or her own appointment in order to comply with the mandate.

   C. After mutually assessing the situation and discussing the services, the student and the counselor consider whether or not counseling at Counseling Services could be desirable and useful. Community resources can also be discussed.

   D. The student can then choose to engage in counseling or not. If the student declines services, the student will still be accountable to the referring office or agency for noncompliance with their requirements and for the potential consequences of continuing the behavior that led to the referral.

   E. Compliance monitoring, attendance documentation, and any other requirements are the responsibilities of the mandating agency and the student, not the staff of Counseling Services. The reporting of compliance events to a third party requires a release of information.

   F. Research and clinical experience in working with alcohol and other drug problems, as well as other types of problems, indicate that referrals for involuntary or mandatory treatment do not usually result in effective treatment outcomes and are likely to be a barrier to effective treatment. This is particularly the case with alcohol and other drug
problems in which the person referred does not believe they have a problem that requires treatment.

It can be an inappropriate use of resources to accept referrals for mandated treatment when a student does not recognize a need for treatment or when a student is beyond the scope of services the counselor can provide. Furthermore, mandatory or forcible treatment puts the disciplinary agency in the role of diagnosing mental disorders and prescribing treatment, engenders treatment as a disciplinary action and form of punishment, and conflicts with creating a therapeutic relationship and a therapeutic purpose for counseling. While mandated assessment services are provided, only ongoing counseling and therapy services that are participatory and voluntary are offered. Philosophically and programmatically, the services are structured accordingly, and any compliance with mandated services is incidental.

G. Referrals for educational classes for alcohol and other drug usage, even if mandatory in origin, will be accepted only on the basis of assisting students in identifying for themselves whether they have a problem and to provide information for them to make informed choices about actions they want to take. We provide an assessment/educational service that students may elect to have fulfilled at Counseling Services. Should a student be prepared to acknowledge that they have an alcohol, other drug, or other problem, and elect to have professional assistance for their difficulty, we will provide therapeutic services within our scope of practice. This includes students who have been charged with or convicted of an offense and also see themselves as having a problem.

H. Counseling can be effective and beneficial when there is a mutual agreement by the counselor and the student that it is therapeutic and appropriate. When a student comes to Counseling Services for treatment mandated by an entity (on or off campus), the therapist who conducts the initial interview will be responsible for deciding if the student will be accepted for treatment. Services are provided upon the condition that a working relationship can be developed with the student who acknowledges there is a therapy problem to work upon and receive treatment. Therapy services are voluntary, and involuntary treatment will not be conducted.

I. In this framework, counseling or assessment is not regarded as a consequence or sanction, or as a solution to the problem. The solution is the student’s behavior change, and counseling is a service made available to help the student accomplish the behavior change. The counselor is always working primarily in the interest of the student client rather than the institution, although the institution stands to benefit as well as the student.

J. There are situations where counseling staff can be helpful in ways other than counseling. A consultation with the faculty or staff member alone, or together with the student, may help in understanding or resolving the problem before it leads to formal action. Voluntary counseling may be one outcome of the consultation, with a higher probability of success than mandated counseling.