

University Students: Preferences for Counseling Methods

Jared Fisse¹ | Helen Meldrum^{2*}

¹Child Mind Institute, New York City

²Bentley University, Waltham, MA

Correspondence Email
hmeldrum@bentley.edu*

Keywords

University counseling,
psychoanalytic, person-
centered, cognitive-behavioral
therapy

Abstract

The mental health of university students has become an important concern escalated by pandemic-related stresses and insights into effective therapy for this population is needed. Participants (n 389) completed a survey indicating preferences regarding seeing a therapist employing methods reflecting one of three established schools of thought: psychoanalytic, person-centered, or cognitive-behavioral therapy (CBT). Analysis of results indicated that the CBT approach was the most popular method. However, when participants reacted to hypothetical dilemmas, there was evidence of some departure from the method students selected as their original preference. The CBT approach was more persistently chosen by participants who indicated an initial preference for that method. Demographic differences are reported. Commentary is offered on why college-aged participants might vary in their preferences for treatment styles and why so many maintain a propensity for CBT.

INTRODUCTION

The COVID pandemic and its effects on the mental health of the world's population have been profound and contributed to the stresses experienced by college-aged students. Even before the onset of the novel coronavirus, the emotional health of university students had become an important public health concern (Brown, 2016). In a large international survey, 35% of students met the diagnostic criteria for at least one common mental health condition (Auerbach, et al., 2016). In more recent years, college students' mental health problems have shown increased severity, which has become a factor in student attrition (Sui & Leng, 2023). There has been an increase in students discontinuing their studies due to poor psychological functioning (Hubble & Bolton, 2020) and research that indicates that 45% of college students who drop out due to mental health concerns do not make use of the mental health services that their school makes available (D'Amico, et al., 2016). This lack of utilization has been attributed mostly to lingering stigma surrounding mental health help-seeking when the student believes that society will perceive them negatively. There is also social network stigma, which occurs when an individual thinks that views of help-seeking by those they interact with closely are unfavorable (Bird, et al., 2020). Research has also shown that, even students who do hold a positive view of counselling may prefer to approach friends, family or academic staff for less formal advice. Help-seeking behaviors are complex and multifaceted (Broglia, et al., 2021).

Consequently, there is now more pressure on universities to improve support services. The levels of pandemic disruption, along with the demands of new virtual learning systems, have placed additional strains on already stressed university students. Research in the COVID era has found overall increases in anxiety, depression and loneliness (Haikalis, et al., 2022). Several authors have documented the negative impact of the pandemic on college students' mental health (e.g., Wood, et al., 2022). As society returns to a "new-normal," it is expected that college students will continue to struggle to adjust to the demands of on-campus life. Thus, more responsibility will be placed on campus-based counseling center staff to meet the need (Hamza, et al., 2021). COVID has intensified college students' daily challenges, and there are additional considerations, such as whether psychological counseling will be delivered face-to-face or virtually, individually or in groups, etc. At the same time, some of the perennial issues persist into this new era. University students can always benefit from psychological counseling that can teach them methods

for emotional regulation and stress management (Wang, 2023). The issue of “goodness of fit” between client and counselor endures. Research indicates that the quality of the rapport is one of the primary predictors of client progress (Ardito & Rabellino, 2011) and that many types of counseling have the potential to be effective for a wide range of psychological challenges. But in this new era, it is important that campus affiliated clinicians remain mindful of the extent of the disruptions that have prompted fragility in some students. The need for mental health promotion emerges as a key factor from the Covid era (Padron, et al., 2021).

One way to illuminate the methods of psychotherapy or counseling that may be offered to university students is through the paradigms that have defined the field. The first three are usually cited as psychoanalytic, behavioral (later, cognitive behavioral) and humanistic-existential (Fleuridas & Krafcik, 2019). Most psychotherapists and counselors are educated more predominantly in one of these three theoretical orientations, but often evolve over time toward integrative eclecticism (Behan, 2022). Still, perhaps due to their training, counselors and psychologists may prefer particular methods to help their clients. We could think of these as their “leading” styles. Clients also often differ in their preferences for distinct approaches. Therefore, an important factor in achieving success in therapy is the “mesh” between counselor and counselee. Because there are a number of clinical counseling methods based on different theories regarding human functioning, attempts to develop an overarching dominant integrative framework for a “unified treatment” have not succeeded (Emmelkamp, et al., 2014). This has sometimes created confusion for the public, as it certainly would for any undergraduate student who may not have even taken a single course in psychology.

This study explores whether college students might prefer counselor responses reflective of a particular school of thought. In reality, determining whether one counseling approach might be more helpful than another is difficult. There are simply too many variables to consider in creating experimental controls to indicate that one approach might produce superior results. Not surprisingly, very few researchers have tried to determine preferences and it appears that nobody has taken on an inquiry like this one in about 50 years (see Fancher & Gutkin, 1971; Holen & Kinsey, 1975). And yet, an often-cited outcome is that after the counseling process, the average distressed person will be better off than 80% of the discomforted people who do not attend counseling (Wampold & Imel, 2015).

METHODS

This inquiry features a college-student aged population utilizing our on-campus census of undergraduates. Our standing as a business university also uniquely positions us to assess beliefs in students who are not required to take an introductory psychology class (although many elect to take upper-level psychology electives, coursework in counseling theories has not been offered at our university in the immediate past four years). Because most of our undergraduate students will never take a class in counseling methods, our survey document first provided a recap of the main types of psychotherapy with a focus on psychoanalytic, CBT, and Person-centered humanistic methods. What follows here is a slightly more detailed version of the three summaries presented at the top of our questionnaire.

Psychoanalytic theory is based on the concept that human behavior is influenced by irrational forces and unconscious motivations, often dating back to childhood experiences (Nagel, 2020). Freud, the founder of psychoanalytic theory, believed that human behavior is impacted by sexual urges and aggression (Ratner, 2018). The goal of therapy rooted in psychoanalytic theory is to make the unconscious conscious. Some techniques include dream analysis and analyzing free flowing and unedited thoughts (Barratt, 2021). The effectiveness of long-term psychoanalytic therapy has been established as having moderate to large effects on symptom reduction and positive personality change (DeMaat, et al., 2009).

Person-centered therapy (Humanistic), and its founder Carl Rogers, believed that three central attributes of the therapist create a growth environment for clients: congruence (genuineness or realness), unconditional positive regard (acceptance and caring), and accurate empathic understanding (an ability to deeply grasp the subjective perspective of another person) (Kirschenbaum & Jourdan, 2005). This approach is rooted in a belief in the client’s independence and capacity for self-direction. Some techniques include active listening and reflecting feedback on feelings (Arnold, 2014). Person-centered treatment has been found to be effective at minimizing the symptoms of a wide array of disorders, including anxiety and depression (Gibbard & Hanley, 2008).

The founders of Cognitive Behavior Therapy (CBT) believed that human emotions stem from our beliefs, interpretations, evaluations and reactions to life’s events (David & Szentagotai, 2006; Ellis, et al., 2001). The focus

of therapeutic sessions is more on thinking and action and less on the client's expression of their feelings. Some techniques include identifying negative thinking patterns and revising them to learn new behaviors (Kertz, et al., 2015). Research indicates that for a variety of clinical populations, CBT can produce large effect improvements in both adolescents and adults (Herbert, et al., 2013).

As described, the survey first briefly defined these three schools of therapeutic thought and then asked respondents to rank-order their preferred method of therapy in the event they sought out counseling services on campus. Situational prompts were developed by portraying the experiences of college students in the following arenas: academic struggles, romantic relationships, friendships/roommates and family dynamics. Nine hypothetical, but realistic scenarios were created that were also reflective of our business school environment (e.g., struggling to pass a required all-university business core class). Respondents were then asked to rank their favored therapist response to the dilemmas reflective of the three types of therapeutic methodologies ("Would you prefer a counselor who says: 'A' 'B' or 'C'? With accompanying written out responses reflecting each of the three schools of therapeutic thought). The questionnaire encouraged the respondents to think about what type of therapeutic milieu might be most helpful to them.

Respondents were first asked to rank their preferred theoretical orientation in general. Then they were asked to place themselves into the hypothetical situations. In developing each scenario, the first author leveraged his own experience as a student to create situations that were both universal to college students and serious enough that motivation to seek counseling might be prompted. The questionnaire sought perspectives on the type of counselor responses students would prefer in the event they were experiencing a similar scenario. The first author created the following dilemmas that might be experienced by undergraduate students at a business-focused university. The second author scripted three different plausible responses that a counselor might say to a struggling undergraduate. The three hypothetical comments reflected the principles of CBT, Person-centered or Psychoanalytic psychotherapy. Participants then selected which of the three they would like to hear from a counselor if they were grappling with the following nine situations:

- Scenario 1 ('you are struggling to pass a required general business prerequisite course')
- Scenario 2 ('you recently got out of a long-term relationship')
- Scenario 3 ('you find yourself falling out of love with your chosen sport you played as a child')
- Scenario 4 ('your loved one is in the hospital')
- Scenario 5 ('you recently have been getting into too many arguments with your parents')
- Scenario 6 ('you find yourself especially nervous about a job interview')
- Scenario 7 ('a good friend did something to upset you')
- Scenario 8, ('you have noticed that your drinking habit has become problematic')
- Scenario 9 ('you have become increasingly upset with your annoying roommate')

At the conclusion of the survey, participants were asked their gender, year in school and academic major. Very few demographic factors were collected since we planned to explore the attitudes displayed in the responses rather than pursuing a detailed analysis of conventional variables. The authors were granted Bentley University's Institutional Review Board's approval to audit the opinions of the undergraduate population (approximately 2900 students). The questionnaire was presented through campus email with a covering note asking students to participate in research that would offer insight into what methods of counseling students find to be the most useful. To incentivize participation, students were made aware that their participation would qualify them in a drawing to win a \$50 VISA gift card. Upon completing the questionnaire, participants clicked on a link if they wished to be in the raffle for the gift card and informed that contact information was collected separately to keep respondents' answers completely anonymous.

RESULTS AND DISCUSSIONS

Over 13% of the targeted population participated; 389 undergraduate students out of a possible 2900 in the Spring of 2022. Almost 60% (59.9%) of the respondents identified as male, 39.3% identified as female and 0.08% identified as nonbinary. There was representation from each of the four undergraduate years with 22.2% of respondents in their first year, 21.9% in their second year, 27.7% in their third year, 27.2% in their fourth year and 1.0% were past their fourth year. Most respondents provided their academic major (322), of which 19.3% major in

accounting, 17.4% major in marketing, 36.6% major in finance, 10.6% major in management, 12.4% major in IT and 3.7% major in liberal studies.

After reading a short description of each school of thought in counseling methods, 52% of respondents initially preferred Cognitive-Behavioral therapy, 37% of respondents initially preferred Person-centered therapy and 11% of respondents initially preferred Psychoanalytic therapy (See Figure 1).

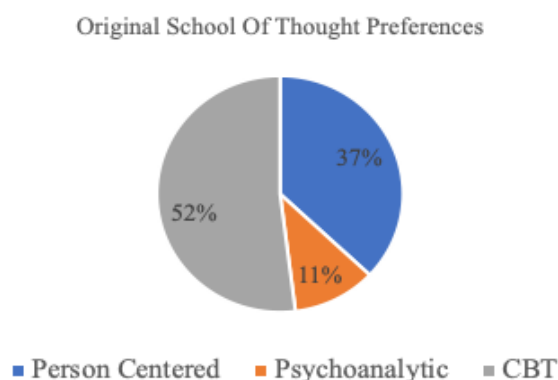


Figure 1. Description of Each School of Thought in Counseling Methods

After collecting this general data about preferences, the authors investigated whether respondents would be consistent with their choices when asked to consider various hypothetical scenarios as listed in the methodology section. Next, we calculated the total sum of all the selections by all participants across the nine scenarios. Chart 2 displays respondents' preferences for the various hypothetical scenarios, independent of their original school of thought preference. These data appear to show a shift towards embracing psychoanalytic responses more often than the initial declarations. Person-centered responses were less favored than anticipated. But these fluctuations were not significant.

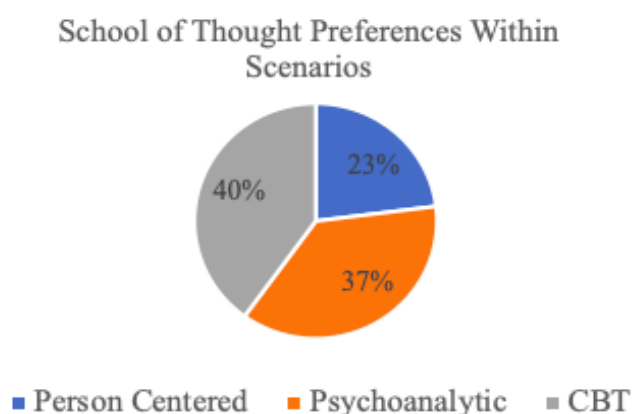


Figure 2. School of Thought Preferences Within Scenarios

The data portrayed in Charts 1 and 2 show some shifts. Psychoanalytic was initially the least preferred school of thinking originally, but within the posed scenarios, it gains favor among the respondents and overtakes Person-centered thinking as the second-most popular school of therapeutic thought. CBT still emerges as the most preferred choice for therapeutic methods among the college aged respondents.

We used cross tabulations to examine relationships between variables within the survey. Among the respondents who originally preferred CBT, was a significant increase in their desire for a CBT based intervention within Scenario 8 ('you have noticed that your drinking habit has become problematic') $\chi^2(4, N = 127) = 9.13, p = .05$.

Respondents who originally preferred Person-centered therapy shifted toward wanting a psychoanalytic interpretation when facing the situation in Scenario 3 ('you find yourself falling out of love with your chosen sport you played as a child') $\chi^2(4, N = 7) = 10.54, p = .03$. And for scenario 6 ('you are nervous about an upcoming job

interview), they wanted a CBT intervention $\chi^2(4, N = 57) = 9.31, p = 0.05$. Similarly, for scenario 8, regarding the drinking habit that has become problematic, there was a significant shift towards a CBT response $\chi^2(4, N = 83) = 9.52, p = 0.05$. Thus, some students who originally exhibited a preference for Person-centered thought change their preference when imagining themselves seeking therapeutic resources under specific circumstances.

Participants who initially preferred Psychoanalytic Therapy responded to Scenario 5 ('you have been getting into too many arguments with your parents') by significantly changing their perspective to prefer a CBT methodology $\chi^2(2, N = 47) = 7.12, p = 0.03$. And concerns about problematic drinking shifted them towards wanting a CBT therapist $\chi^2(2, N = 75) = 7.12, p = 0.03$. Looking across the presentation of the scenarios, there were some other notable patterns that stood out, but did not reach significance. For example, for scenario 2 ('you recently got out of a long-term relationship'), almost 70% of all of our respondents preferred a psychoanalytic response, with the other two modalities splitting the remaining choices. Approximately half of the participants wanted some CBT type of coaching to deal with an annoying roommate and with a friend that had betrayed them.

Analysis of the demographic variables indicated no difference between males and females towards any of the three methods. Younger students (years 1 and 2) showed more spread across the schools of thought, whereas older students (years 3 and 4) indicated clearly that CBT was their most preferred method ($p = 0.01$). The younger students indicated a greater affinity towards Person-centered thinking whereas the older students (Year 3s and 4s) responded in a less favorable way to the method ($p = 0.001$). Further analysis indicated some noticeable, but non-significant associations between respondents' preference for a particular therapeutic technique based on academic major.

We sought to determine if there was a clear preference for a therapeutic method amongst undergraduate students. From our examination of the literature, we chose three schools of thought that are used in counseling and therapy practices. Would our respondents show a strong preference for a particular approach? It is important to note that our study design did not offer participants the option to elect an eclectic method. Whereas most therapists report that multiple theories influence their practice and that they have an inclination towards integrating approaches together (Barth & Moody, 2019).

Why might most of our respondents be choosing CBT as their most favored school of therapeutic thought? Over the past five decades, most published articles on therapies have concerned CBT (Soares, et al., 2020). No doubt this trend is connected to the fact that CBT has grown in popularity among psychologists and counselors and enjoys a reputation for rapid results, often as a short-term therapy. The research on CBT and its effectiveness has grown at an impressive rate and it has been shown through clinical trials to be a highly effective treatment for most of the common psychological disorders and conditions (Hofmann & Hayes, 2018). The model can equip clients with coping skills and techniques that can be used to manage stressful issues particularly relevant to university students, for example, procrastination with schoolwork (Rozenal, et al., 2018). CBT has also grown in popularity with the general public as well because of books, media coverage, websites, and the growth of mental health mobile apps that offer CBT techniques (Denecke, et al., 2022). Thus, CBT has become more commonplace in people's understanding of how to treat mental health problems. It is therefore not surprising that the student population indicated their enthusiasm for the method.

It makes sense that college-aged students might prefer having a therapist who guides them toward thinking in a certain manner. Considering that many CBT clinicians give clients practice exercises to work on outside of their therapy sessions, the process may be experienced as empowering in overcoming whatever challenges the undergraduates are struggling with. Our participants, like other students enrolled in higher education, appear to appreciate the guidance of CBT techniques as they attempt to navigate society as young adults (Oliveira, et al., 2021).

The Person-centered approach may have been fated to be the second most favored because of the students' perceptions that the method is less structured than CBT. Clients who are experiencing moderate to severe distress may depend on a sense of direction provided by a clinician in order to make the necessary changes that will be beneficial to their emotional well-being. However, the literature contradicts this idea. Like CBT, Person-centered methods are also endorsed as evidence-based for a wide range of presenting problems (Elliott, et al., 2021). However, Person-centered therapy does require more tolerance of ambiguity (Hansen, et al., 2014). Many undergraduates may not fully appreciate that this school of thought involves some unstructured conversations to guide them toward their own self-discovery. Sitting with not knowing, while difficult, helps students learn how to regulate these feelings themselves. Refusal to impose a specific direction reflects the principles underlying Person-centered therapy, given that the belief is based on trust in the client's capacity for self-direction (Hipólito & Nunes,

2019). Humanists have an established history of uplifting clients by helping them to mobilize their own natural healing resources and problem-solving capacities for positive growth and social change (Grier-Reed & Ajayi, 2019).

It may be helpful to provide some context regarding the method our undergraduate students initially found least appealing. Psychoanalysis differs from CBT and Humanistic Person-centered therapies in having grown as a practice more in private settings, outside of the environment of universities. In the 1950s, several medical school departments of psychiatry established psychoanalytic training centers, but the impact in higher education and research was never as significant as with the other schools of thought. University-based models for training psychoanalysts and disseminating scholarship never established a critical mass. Without access to the academy's opportunities for cross-disciplinary work with the social and behavioral sciences, psychoanalysis has been left as the only discipline that has its entire educational enterprise taught part-time and that likely only still exists because of devotees doing unpaid teaching and supervision.

Since psychoanalysis has not achieved a strong presence within the academic world, some scholars foresee that this theory of mental functioning and remediation will continue to diminish in influence (Wallerstein, 2009). In fact, researchers have stated that most US psychology departments continue to underrepresent psychoanalytic ideas in their course offerings (Redmond & Shulman, 2008). If the undergraduates of the current era have read about Freud's contributions, they may think his concepts apply more to personality theory than to any actual modern therapeutic method. Additionally, there is a scarcity of studies taking a psychoanalytic perspective on college students' psychological adjustment (Tomsa, et al., 2014). And as the number of students requesting help from campus counseling centers has grown, institutional commitment for financial resources has failed to keep pace. This is another aspect that has shifted counseling offerings away from psychoanalytic or psychodynamic methods (which emphasize longer term development of insight) to shorter-term treatment models that stress symptom alleviation and minimize causation (Ramirez, 2022). In spite of the forces building against psychoanalysis as a discipline, we did see a shift in our respondents with more indicating some additional (but not significant) interest in childhood-based explanations for their behavior within the hypothetical scenarios.

Limitations

Our survey has several limitations. There was no pilot study phase, so we could not ascertain if respondents fully understood the wording of each question. This is especially relevant at a business university that only requires one course in the social sciences for most majors. Most of our participants do not have a strong background in psychology. If we had conducted this inquiry with interviews, we could have learned more about how the respondents experienced our inquiries. Adding interviews may have provided more insightful responses to generate a richer understanding of attitudes, perceptions, motivations, etc. – especially since therapy and counseling can be sensitive topics. We also failed to ask students to imagine a particular context for counseling. It may have been timely to ask if it would make a difference if their therapy was virtual or in person.

The generalizability of our findings may be limited by the fact that we are located at a university specializing in business. If we sampled a large state university or liberal arts college, there might be more valid representation to a broader group of higher education students. Within the world of aspiring and current business leaders, there is still a stigma attached to the need for mental health support (Pierce, & Rider, 2022). On an anecdotal level, it appears that progress is being made, but our population may still reflect a certain skepticism on the topic of psychological help. We also limited our collection of demographic variables so as to encourage respondents to spend their response time on the orientation and scenario questions.

CONCLUSIONS

This study analyzed the preferences of a university-aged population towards three schools of therapeutic thought (Cognitive Behavioral Therapy, Psychoanalytic and Person-centered). We surveyed undergraduates at Bentley University for more than reasons of convenience sampling. As students at a private, business-oriented institution, our participants are very likely sensitive to the stigma that employees can experience in seeking mental health help in the workplace. There is a well-documented potential for unfair treatment by superiors and coworkers (Bonaccio, et al., 2019). Additionally, since approximately 96% of this sample majored in business-related subjects, our respondents are unlikely to have previous knowledge of the major schools of therapy. This ensures that their

opinions are not going to be shaped by pre-existing knowledge. Given a brief description of each school of thought, participants demonstrated an initial preference for CBT with little differentiation across demographic groups.

It is striking that the researchers had to look back fifty years to find evidence of how clients feel about the counseling behaviors manifested in the various theoretical approaches (Fancher & Gutkin, 1971). Perhaps it is a commentary on the fact that a growing number of therapists define themselves as eclectic or integrative and prefer not to identify as working from a single school of thought (Zarbo, et al., 2016). Also, this past half-century has brought much attention to the factors defined as common to all schools of thought, such as establishing trust and a therapeutic alliance (Cuijpers, et al., 2019). The common factors literature has shown that all forms of effective psychotherapy share similar elements (Meek, 2023). Still, to gain further insight, this project renews the call for further investigation into the effect of specific counseling skills derived from a theoretical stance.

Some recommendations can be made. It may be worthwhile for university counseling services to consider these findings for the purposes of staffing and training. Hiring enough clinicians with an adequate background in CBT seems prudent. It also may be beneficial for universities to offer some classes in mental health literacy for students who otherwise might miss acquiring basic information that will help them decide what type of therapy would work best for them. Of course, in the current era of moving past COVID, it may be that any additional outreach projects will not be implemented in the near future. This research speaks to the fact that our population of college-aged students seem to know that at times they may want a clinician who will empathize with them (Person-centered), or explain influences on their psyche (Psychoanalytic), but what these students think that they need is a clinician who will help guide them in the direction of making tangible improvements on themselves (CBT).

REFERENCES

- Ardito, R. B., & Rabellino, D. (2011). Therapeutic alliance and outcome of psychotherapy: Historical excursus, measurements, and prospects for research. *Frontiers in Psychology*, 2, 270. <https://doi.org/10.3389/fpsyg.2011.00270>
- Arnold, K. (2014). Behind the mirror: Reflective listening and its tain in the work of Carl Rogers. *The Humanistic Psychologist*, 42(4), 354–369. <https://doi.org/10.1080/08873267.2014.913247>
- Auerbach, R. P., Alonso, J., Axinn, W. G., Cuijpers, P., Ebert, D. D., Green, J. G., ... & Bruffaerts, R. (2016). Mental disorders among college students in the World Health Organization world mental health surveys. *Psychological Medicine*, 46(14), 2955–2970. <https://doi.org/10.1017/S0033291716001665>
- Barratt, B. B. (2021). On difference and the "beyond psychotherapy" of psychoanalytic method: The pivotal issue of free-associative discourse as de-repressive praxis. *American Journal of Psychoanalysis*, 81(1), 27–50. <https://doi.org/10.1057/s11231-021-09283-1>
- Barth, A. L., & Moody, S. J. (2019). Theory use in counseling practice: Current trends. *International Journal for the Advancement of Counselling*, 41(3), 313–328. <https://doi.org/10.1007/s10447-018-9352-0>
- Behan, D. (2022). Do clients train therapists to become eclectic and use the common factors? A qualitative study listening to experienced psychotherapists. *BMC Psychology*, 10(1), 1–13. <https://doi.org/10.1186/s40359-022-00886-6>
- Bird, M. D., Chow, G. M., & Yang, Y. (2020). College students' attitudes, stigma, and intentions toward seeking online and face-to-face counseling. *Journal of Clinical Psychology*, 76(9), 1775–1790. <https://doi.org/10.1002/jclp.22956>
- Bonaccio, S., Lapierre, L. M., & O'Reilly, J. (2019). Creating work climates that facilitate and maximize the benefits of disclosing mental health problems in the workplace. *Organizational Dynamics*, 48(3), 113–122. <https://doi.org/10.1016/j.orgdyn.2019.03.006>
- Brogia, E., Millings, A., & Barkham, M. (2021). Student mental health profiles and barriers to help seeking: When and why students seek help for a mental health concern. *Counselling and Psychotherapy Research*, 21, 816–826. <https://doi.org/10.1002/capr.12462>
- Brown, P. (2016). *The invisible problem?: Improving students' mental health* (p. 66). Oxford: Higher Education Policy Institute.
- Cuijpers, P., Reijnders, M., & Huibers, M. J. (2019). The role of common factors in psychotherapy outcomes. *Annual Review of Clinical Psychology*, 15(1), 207–231. <https://doi.org/10.1146/annurev-clinpsy-050718-095424>

- D'Amico, N., Mechling, B., Kemppainen, J., Ahern, N. R., & Lee, J. (2016). American college students' views of depression and utilization of on-campus counseling services. *Journal of the American Psychiatric Nurses Association*, 22(4), 302–311. <https://doi.org/10.1177/1078390316648777>
- David, D., & Szentagotai, A. (2006). Cognitions in cognitive-behavioral psychotherapies: Toward an integrative model. *Clinical Psychology Review*, 26(3), 284–298. <https://doi.org/10.1016/j.cpr.2005.09.003>
- De Maat, S., De Jonghe, F., Schoevers, R., & Dekker, J. (2009). The effectiveness of long-term psychoanalytic therapy: A systematic review of empirical studies. *Harvard Review of Psychiatry*, 17(1), 1–23. <https://doi.org/10.1080/10673220902742476>
- Denecke, K., Schmid, N., & Nüssli, S. (2022). Implementation of cognitive behavioral therapy in e-mental health apps: Literature review. *Journal of Medical Internet Research*, 24(3), e27791. <https://doi.org/10.2196/27791>
- Elliott, R., Watson, J. C., Timulak, L., & Sharbanee, J. (2021). Research on humanistic-experiential psychotherapies: Updated review. In M. J. Lambert (Ed.), *Bergin and Garfield's Handbook of Psychotherapy and Behavior Change* (6th ed., pp. 421–465). John Wiley & Sons.
- Ellis, A., O'Donohue, W. T., Henderson, D. A., Hayes, S. C., Fisher, J. E., & Hayes, L. J. (2001). The rise of cognitive behavior therapy. In W. T. O'Donohue, J. E. Fisher, & S. C. Hayes (Eds.), *A History of Behavioral Therapies: Founders' Personal Histories* (pp. 183–194). Context Press.
- Emmelkamp, P. M., David, D., Beckers, T., Muris, P., Cuijpers, P., Lutz, W., ... & Vervliet, B. (2014). Advancing psychotherapy and evidence-based psychological interventions. *International Journal of Methods in Psychiatric Research*, 23(S1), 58–91. <https://doi.org/10.1002/mpr.1411>
- Fancher, R. E., & Gutkin, D. (1971). Attitudes toward science, insight therapy, and behavior therapy. *Journal of Clinical Psychology*, 27(1), 153–156. [https://doi.org/10.1002/1097-4679\(197101\)27:1<153::AID-JCLP2270270139>3.0.CO;2-2](https://doi.org/10.1002/1097-4679(197101)27:1<153::AID-JCLP2270270139>3.0.CO;2-2)
- Fleuridas, C., & Krafcik, D. (2019). Beyond four forces: The evolution of psychotherapy. *SAGE Open*, 9(1), 215824401882449. <https://doi.org/10.1177/2158244018824492>
- Gibbard, I., & Hanley, T. (2008). A five-year evaluation of the effectiveness of person-centred counselling in routine clinical practice in primary care. *Counselling and Psychotherapy Research*, 8(4), 215–222. <https://doi.org/10.1080/14733140802305440>
- Grier-Reed, T., & Ajayi, A. A. (2019). Incorporating humanistic values and techniques in a culturally responsive therapeutic intervention for African American college students. *The Journal of Humanistic Counseling*, 58(1), 17–33. <https://doi.org/10.1002/johc.12087>
- Haikalis, M., Doucette, H., Meisel, M. K., Birch, K., & Barnett, N. P. (2022). Changes in college student anxiety and depression from pre-to during-COVID-19: Perceived stress, academic challenges, loneliness, and positive perceptions. *Emerging Adulthood*, 10(2), 534–545. <https://doi.org/10.1177/21676968211058516>
- Hamza, C. A., Ewing, L., Heath, N. L., & Goldstein, A. L. (2021). When social isolation is nothing new: A longitudinal study on psychological distress during COVID-19 among university students with and without preexisting mental health concerns. *Canadian Psychology/Psychologie Canadienne*, 62(1), 2–11. <https://doi.org/10.1037/cap0000255>
- Hansen, J. T., Speciale, M., & Lemberger, M. E. (2014). Humanism: The foundation and future of professional counseling. *The Journal of Humanistic Counseling*, 53(3), 170–190. <https://doi.org/10.1002/j.2161-1939.2014.00055.x>
- Herbert, J. D., Gaudiano, B. A., & Forman, E. M. (2013). The importance of theory in cognitive behavior therapy: A perspective of contextual behavioral science. *Behavior Therapy*, 44(4), 580–591. <https://doi.org/10.1016/j.beth.2013.03.001>
- Hipólito, J., & Nunes, O. (2019). Self-organisation and complexity: Evolution and development of Rogerian thinking. In D. Loewenthal (Ed.), *The Future of Humanistic Psychology* (pp. 97–116). Routledge.
- Hofmann, S. G., & Hayes, S. C. (2018). The history and current status of CBT as an evidence-based therapy. In *Process-based CBT: The science and core clinical competencies of cognitive behavioral therapy* (pp. 7–21).
- Holen, M. C., & Kinsey, W. M. (1975). Preferences for three theoretically derived counseling approaches. *Journal of Counseling Psychology*, 22(1), 21. <https://doi.org/10.1037/h0076146>
- Hubble, S., & Bolton, P. (2020). *Coronavirus: Update implications for the further and higher education sectors*.

- Kertz, S. J., Koran, J., Stevens, K. T., & Björgvinsson, T. (2015). Repetitive negative thinking predicts depression and anxiety symptom improvement during brief cognitive behavioral therapy. *Behaviour Research and Therapy*, 68, 54–63. <https://doi.org/10.1016/j.brat.2015.03.006>
- Kirschenbaum, H., & Jourdan, A. (2005). The current status of Carl Rogers and the Person-centered approach. *Psychotherapy: Theory, Research, Practice, Training*, 42(1), 37. <https://doi.org/10.1037/0033-3204.42.1.37>
- Meek, W. D. (2023). The flexible care model: Transformative practices for university counseling centers. *Journal of College Student Psychotherapy*, 37(1), 1–10. <https://doi.org/10.1080/87568225.2021.1888365>
- Nagel, E. (2020). Methodological issues in psychoanalytic theory. In *Psychoanalysis Scientific Method and Philosophy* (pp. 38–56). Routledge. <https://doi.org/10.4324/9780429338403-3>
- Oliveira, C., Pereira, A., Vagos, P., Nóbrega, C., Gonçalves, J., & Afonso, B. (2021). Effectiveness of mobile app-based psychological interventions for college students: A systematic review of the literature. *Frontiers in Psychology*, 12, 647606. <https://doi.org/10.3389/fpsyg.2021.647606>
- Padrón, I., Fraga, I., Vieitez, L., Montes, C., & Romero, E. (2021). A study on the psychological wound of COVID-19 in university students. *Frontiers in Psychology*, 12, 589927. <https://doi.org/10.3389/fpsyg.2021.589927>
- Pierce, L., & Rider, C. I. (2022). Supporting mental health at work (Comment on "The epidemic of mental disorders in business"). *Administrative Science Quarterly*, 67(1), 56–69. <https://doi.org/10.1177/00018392211072479>
- Rameriz, D. (2022, April 21). Psychoanalytic psychology and the academy: Identifying and addressing the growing crisis. *Psyche on Campus*. University of Pennsylvania.
- Ratner, A. (2018). The psychoanalyst's resistance to the task of proof. *Psychoanalytic Review*, 105(2), 157–186. <https://doi.org/10.1521/prev.2018.105.2.157>
- Redmond, J., & Shulman, M. (2008). Access to psychoanalytic ideas in American undergraduate institutions. *Journal of the American Psychoanalytic Association*, 56(2), 391–408. <https://doi.org/10.1177/0003065108318639>
- Rozental, A., Forsström, D., Lindner, P., Nilsson, S., Mårtensson, L., Rizzo, A., ... & Carlbring, P. (2018). Treating procrastination using cognitive behavior therapy: A pragmatic randomized controlled trial comparing treatment delivered via the internet or in groups. *Behavior Therapy*, 49(2), 180–197. <https://doi.org/10.1016/j.beth.2017.08.002>
- Soares, E. E., Thrall, J. N., Stephens, T. N., Rodriguez Biglieri, R., Consoli, A. J., & Bunge, E. L. (2020). Publication trends in psychotherapy: Bibliometric analysis of the past 5 decades. *American Journal of Psychotherapy*, 73(3), 85–94. <https://doi.org/10.1176/appi.psychotherapy.20190045>
- Sui, M., & Leng, M. (2023). The role of college counselors in mental health education of college students in the new era. *Journal of Education and Educational Research*, 2(2), 104–108. <https://doi.org/10.54097/jeer.v2i2.6665>
- Tomsa, R., Ortiz, V., Sedano, J., & Jenaro, C. (2014). Mental health of first year college students from the psychoanalytic approach of Cencillo. *Procedia-Social and Behavioral Sciences*, 127, 621–625. <https://doi.org/10.1016/j.sbspro.2014.03.323>
- Wallerstein, R. S. (2009). Psychoanalysis in the university: A full-time vision. *The International Journal of Psychoanalysis*, 90(5), 1107–1121. <https://doi.org/10.1111/j.1745-8315.2009.00195.x>
- Wampold, B. E., & Imel, Z. E. (2015). *The great psychotherapy debate: The evidence for what makes psychotherapy work*. Routledge. <https://doi.org/10.4324/9780203582015>
- Wang, Q. (2023). Building a psychological counseling and mental health education system for college students. *Journal of Education and Educational Research*, 4(2), 12–15. <https://doi.org/10.54097/jeer.v4i2.10634>
- Wood, C. I., Yu, Z., Sealy, D. A., Moss, I., Zigbuo-Wenzler, E., McFadden, C., ... & Brace, A. M. (2022). Mental health impacts of the COVID-19 pandemic on college students. *Journal of American College Health*, 1–6. <https://doi.org/10.1080/07448481.2022.2040515>
- Zarbo, C., Tasca, G. A., Cattafi, F., & Compare, A. (2016). Integrative psychotherapy works. *Frontiers in Psychology*, 6, 2021. <https://doi.org/10.3389/fpsyg.2015.02021>