![AUCCCO logo]

Association for University and College Counseling Center Outreach

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Annual Survey

Reporting period: 2020-2021

The AUCCCO Annual Survey: Overview

The Association for University and College Counseling Center Outreach (AUCCCO), is a national organization of counseling center professionals who are passionate about outreach. The association is akin to the counseling center associations for Directors, Training Directors and Clinical Directors. AUCCCO officially announced the establishment of the organization on June 5, 2009 at the University of Michigan during the closing ceremonies of our 2nd National Outreach Conference for Counseling Centers. The formal association is in its 12th year and is currently comprised 137 members. The mission of the AUCCCO is to assist professionals involved in the leadership of outreach, consultation, and campus community interventions. AUCCCO provides opportunities for networking, professional identity development, idea exchange and creating standards for quality outreach services. AUCCCO promotes a broad understanding of outreach, prevention and education services based on the assumption that outreach must extend the expertise of counseling centers to the larger campus community. AUCCCO recognizes that, as the campus climate has a profound influence on students' lives, outreach services must be informed by perspectives that address the intersection of multiple social identities, promote social justice, and celebrate diversity in all its forms.

This year, 2021, marks the fourth year AUCCCO has developed, administered and disseminated the Annual Survey to its membership as well as non-members who engage in outreach services within their institutions as a means to continue benchmarking outreach factors critical to the functioning of college and university counseling centers. It is the intention and hope of the AUCCCO Board of Directors and its subcommittees that this data will help inform and guide the work of Outreach professionals as they work within their centers and institutions to better meet the needs of their campus community.

This year, our intention was to help tell the story of our shared experiences as Outreach professionals during the period between March 2020 to March 2021. Specific focus was given to the impact of dual pandemics of COVID-19 and ongoing racism. As Outreach professionals, we have been called upon to adapt quickly to campus needs. We hope the results of this survey capture the experiences that feel solitary and then in-turn, amplify our collective voice. The annual survey was adapted and expanded with reference to previous surveys first conducted for 2016-2017.

AUCCCO Board of Directors

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Acknowledgements and Participating Institutions

Participating Institution

Respondents: 96
*all respondents answered each question unless otherwise noted

Q1: University Name

Appalachian State University	Auburn University
Augusta University	Azusa Pacific University
Baldwin Wallace University	Barnard College
Brigham Young University	Cal Poly Counseling Services
Caldwell University	California Lutheran University
California Polytechnic State University	Carnegie Mellon University
Central Washington University	College of Lake County
College of Staten Island/CUNY	College of the Ozarks
Columbus College of Art & Design	Connecticut College
Cornell Tech	Drexel University Counseling Center
Embry-Riddle Aeronautical University	Emerson College - Boston, MA
Emory University	Felician University
Florida Atlantic University	Florida International University
Florida State University	Georgia Southern University
Indiana University Purdue University Indianapolis	Indiana University
James Madison University	Iowa State University
Massachusetts Institute of Technology	Luther College
Misericordia University	Miami University
Montclair State University	Montana State University
Mount Holyoke College	Mount Carmel College of Nursing
National Louis University	Murray State University
Northeast Ohio Medical University	NC A&T State University

Olivet College	Ohio State University
Pacific University	Oxford College of Emory University
Pennsylvania State University - Harrisburg Campus	Pennsylvania State University
Robert Morris University	Portland State University
Saint Martin's University	Rochester Institute of Technology
Shenandoah University	Salem College
St. Ambrose University	Southern Utah University
Temple University	Suffolk University
The Catholic University of America	Texas Tech University
Thomas Jefferson University	The Ohio State University
University of California, Irvine	University at Buffalo Counseling Services
University of Delaware	University of Central Florida
University of Illinois Champaign Urbana	University of Houston-Clear Lake
University of Maryland	University of Iowa
University of Michigan	University of Miami
University of Nevada, Reno	University of Montevallo
University of North Carolina at Charlotte	University of New Hampshire
University of Pennsylvania	University of Oregon Counseling Services
University of South Florida	University of Puerto Rico, Rio Piedras Campus
University of West Georgia	University of Texas at Dallas
Virginia Polytechnic and State University	Vassar College Counseling Service
Washington University in St. Louis	Washburn University
Wichita State Universtiy	Wheaton College
Worcester Polytechnic Institute	William & Mary Counseling Center

Executive Summary

Data was collected during March and April, 2021 with the intention to present data at the 2021 AUCCCO Annual Conference. This year we received 94 responses. Efforts were made primarily via the AUCCCO Listserv with additional efforts to invite respondents via the AUCCCD Listserv (23.4% of respondents were Center Directors).

Demographics and Staffing

- 93.75% of respondents indicated that all members of their staff provide Outreach services. This is an increase from 82.31% the first time the question was asked for 2016-2017.

- Consistently over time, centers spend approximately 15% of time devoted to Outreach activities. The range however was up to 60% of time spent.

- Over the past few years, we are seeing an increase in Counseling Centers recognizing Outreach services as part of their job and not considered "extra" work. This has increased from 51.28% in 2017-2018 to 60% in 2020-2021.

Social Justice Outreach (Inclusive of Anti-Racism and Trauma-Informed efforts)

- Respondents indicated that the three groups they most commonly provide specific Outreach to are students who identify as LGBTQ+, African American/Black, and International Students.

- Specific questions below were included this year to document outreach efforts focused on Anti-Racism and to establish a baseline for future survey comparisons.

- 95% of respondents indicated that they provide Outreach focused on Anti-Racism.

- 97% of respondents indicated using some level of trauma-informed approach in Outreach.

- 100% of respondents have discussed the impact of bias or racial trauma in the workplace and 70% of centers have offered specific support to staff personally impacted.

- Regarding questions related to Social Justice supports and barriers, compared to a previous survey conducted in 2017, respondents indicated increased organizational support but also less adequate resources.

- There was a large increase in respondents indicating they engage in assessment of Social Justice Outreach, where 60% did so in 2020-2021 compared to 13.3% in 2017.

- While Minority-Serving Institutions have slightly higher levels of anti-racist and trauma-informed programming, these differences were not found to be statistically significant.

- Regarding Social Justice and Anti-Racism Outreach, themes from open-ended responses indicated that while there seems to be an increased amount of effort being made, resources continue to be limited and burden to facilitate is often placed on staff of color.

Impact of COVID-19

- 61% of centers indicated a change in staffing over the past year with staff resigning as the most frequent reason endorsed. 66% of respondents indicated staffing changes were not due to COVID-19.

- The types of Outreach that respondents indicated to have increased over the past year included Social Media, Workshops, Videography, Crisis response, and Consultation.

- COVID-19 and Racial Injustice were cited as the two primary impacts on Outreach efforts over the past year.

- 95.65% of respondents reported providing virtual service delivery of Outreach over the past year.

Data summary of
 AUCCCO Annual Survey 2020-2021

Q2: What is the total enrollment for your institution?
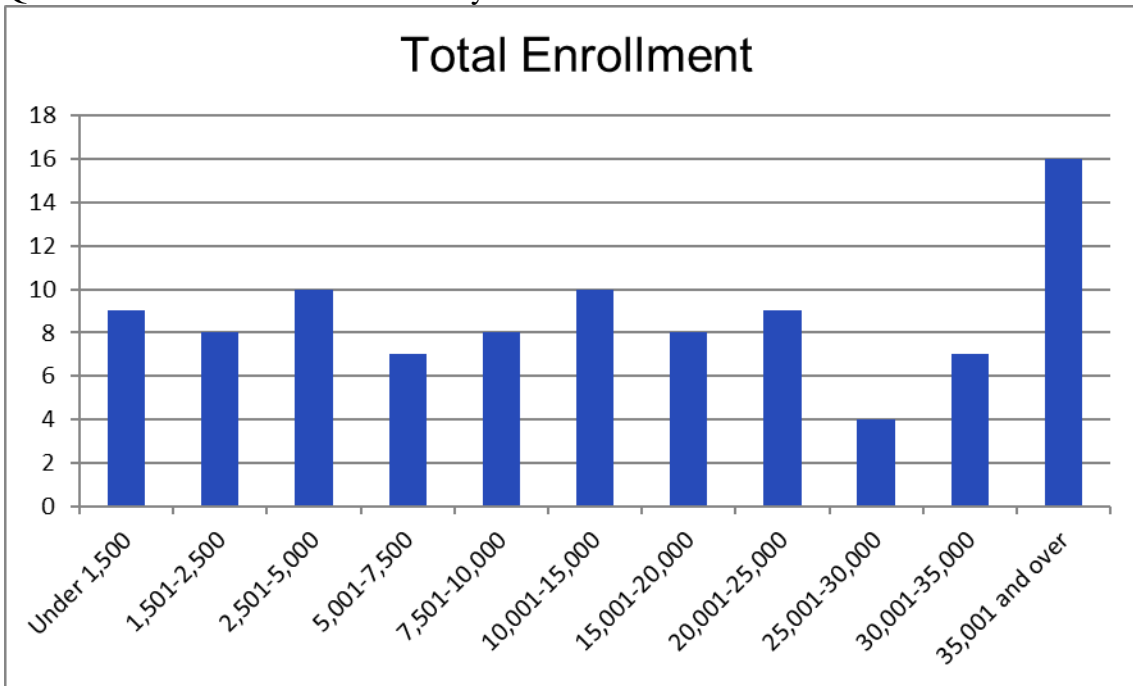
Q3: Is your institution Public or Private?

Public	58.33%	56
Private	41.67%	40
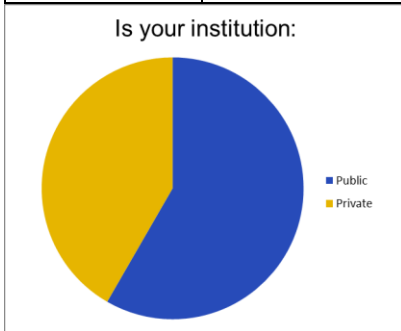
Q4: What type of institution is yours?

Answer Choices	Responses	
Four year university	84.38%	81
Four year college	8.33%	8
Two year community college	1.04%	1
Art School	1.04%	1
Professional School	1.04%	1
Other (please specify)	4.17%	4

Q5: What operations, if any, did your college / University transition to virtual delivery this past year?

Complete Transition to Virtual

	Yes		No		N/A	
Classroom Instruction	55.21%	53	35.42%	34	9.38%	9
Clinical Services	90.63%	87	9.38%	9	0.00%	0
Outreach Services	87.37%	83	9.47%	9	3.16%	3

Remained in Person

	Yes		No		N/A	
Classroom Instruction	11.58%	11	78.95%	75	9.47%	9
Clinical Services	10.64%	10	85.11%	80	4.26%	4
Outreach Services	6.45%	6	86.02%	80	7.53%	7

In person or hybrid

	Yes		No		N/A	
Classroom Instruction	88.42%	84	8.42%	8	3.16%	3
Clinical Services	36.17%	34	56.38%	53	7.45%	7
Outreach Services	37.23%	35	55.32%	52	7.45%	7

Q6: Is your institution a current member of AUCCCO?

Yes	72.92%	70
No	19.79%	19
Unknown	7.29%	7

AUCCCO Member Institution
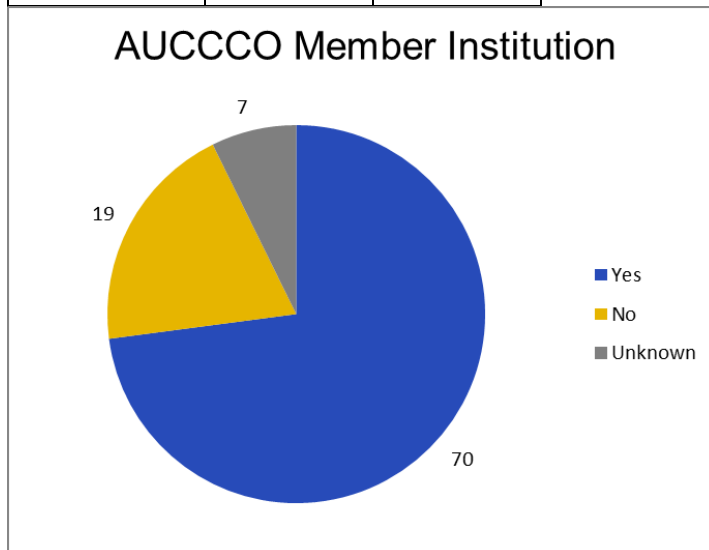
Q7: What is your current title/role?

Answer Choices	Responses	Column1
Outreach Coordinator	33.33%	32
Director (of CAPS/Wellness)	27.08%	26
Staff Clinician	23.96%	23
Assistant Director, Outreach	20.83%	20
Associate Director, Outreach	6.25%	6
Outreach Director	5.21%	5
Other (please specify)	5.21%	5

What is your current title/role?
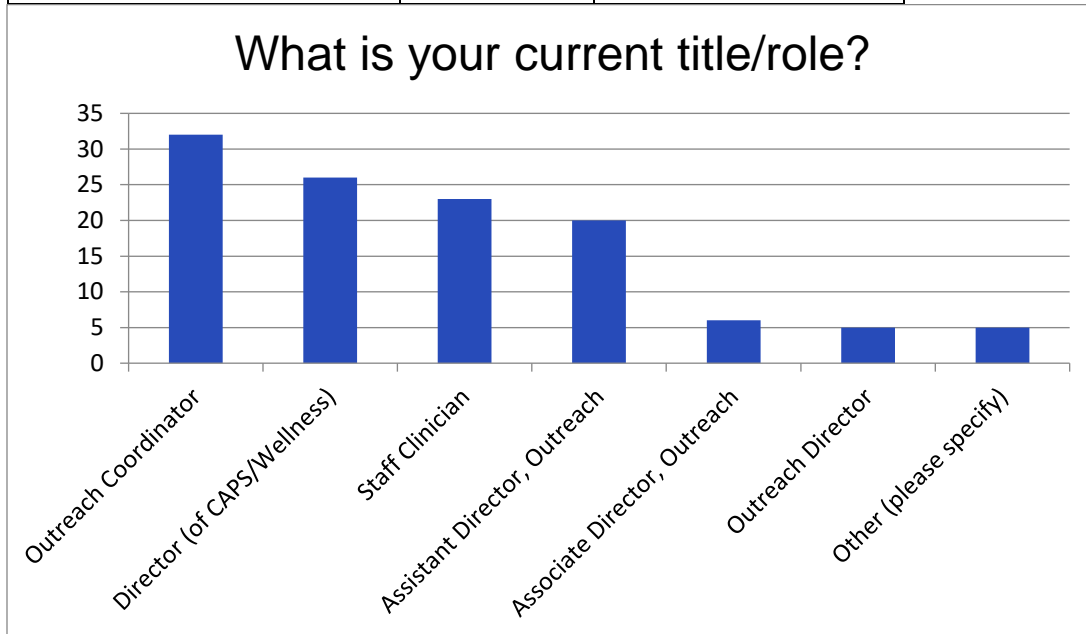
Others:

Associate Director of Clinical Services
Clinical Director
Community Resource Specialist
Coordinator of Prevention Programs
Wellness Manager

Q8: How many years have you been in this position?

0-2 years	30.21%	29
2-4 years	26.04%	25
4-6 years	17.71%	17
6-8 years	9.38%	9
8-10 years	7.29%	7
10-12 years	0.00%	0
12-15 years	1.04%	1
15-20 years	7.29%	7
20+ years	1.04%	1

Years in Position
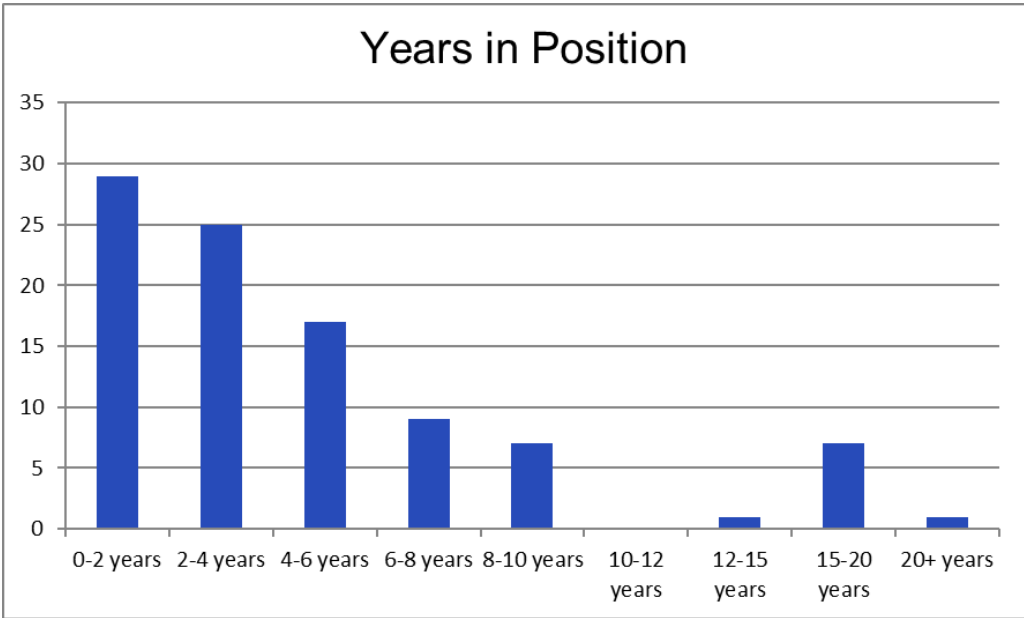
Q9: Does your center/agency include a leadership/manager level position to oversee Outreach?

Yes	51.04%	49
No	48.96%	47

Q10: Racial Identity

Caucasian/White	69.79%	67
LatinX/Hispanic	13.54%	13
African American/Black	11.46%	11
Asian American/Asian	9.38%	9
American Indian or Alaskan Native	4.17%	4
Multiracial	4.17%	4
Or Self-Identify:	4.17%	4

Q11: Gender Identity

Female	83.33%	80
Male	15.63%	15
Gender non-conforming	1.04%	1
Genderqueer	1.04%	1

Gender Identity

- Female
- Male
- Gender non-conforming
- Genderqueer
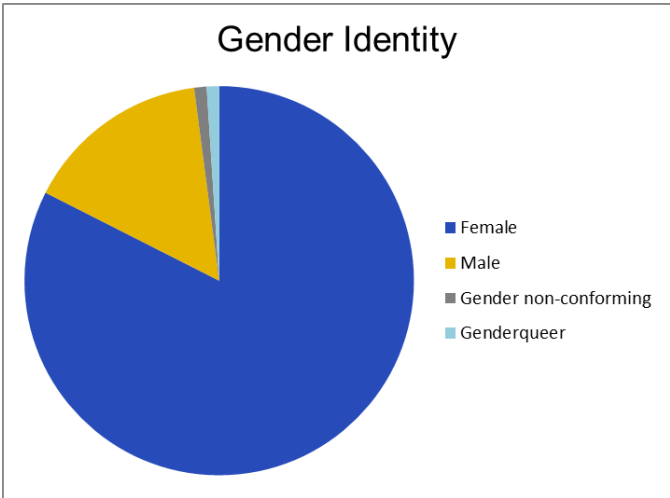
Q12: Sexual Identity

Heterosexual	76.04%	73
Bisexual	5.21%	5
Queer	4.17%	4
Lesbian	3.13%	3
Pansexual	3.13%	3
Gay	2.08%	2
Questioning	2.08%	2
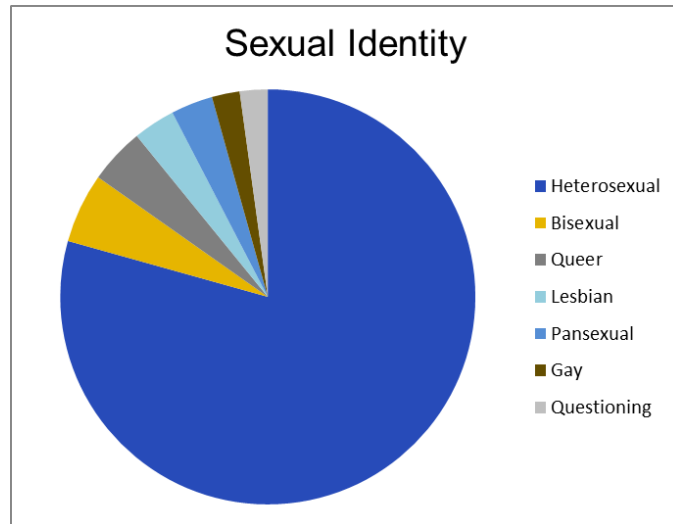
Q13: What is your discipline?

Psychologist	58.33%	56
Mental Health Counselor	25.00%	24
Social Work	14.58%	14
Public Health	1.04%	1
LPC and LMFT	1.04%	1
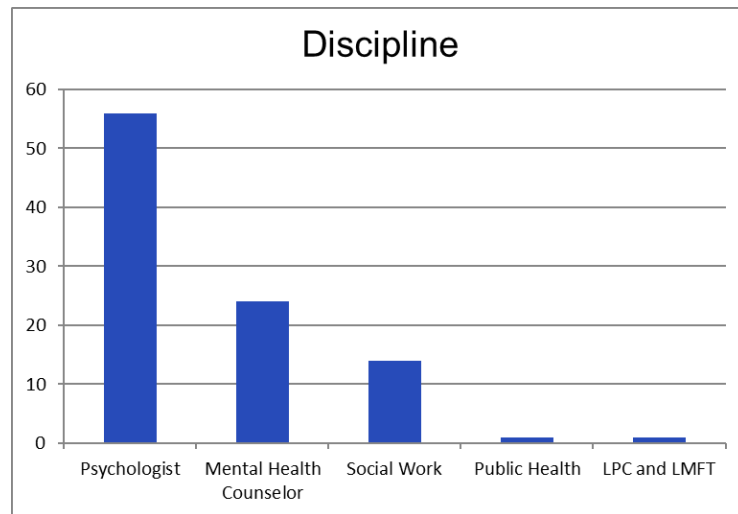
Q14: What is your degree?

PhD	38.54%
PsyD	26.04%
Master of Social Work	13.54%
Master of Arts	11.46%
Master of Education	4.17%
Master of Science	4.17%
Other	2.08%

Dual Master of Science in MFT and Mental Health Counseling
Ed.S.
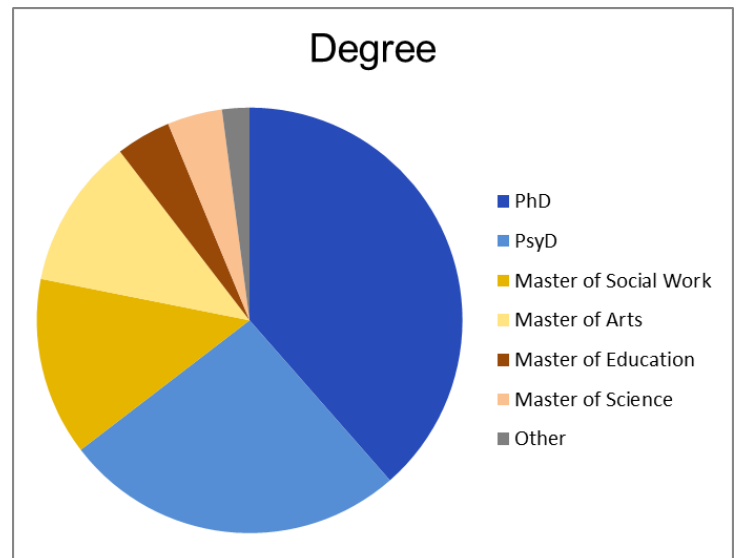
Q15: Do you hold a professional license?

Yes	92.71%	89
No	7.29%	7

Q16: If yes, you hold a professional license? *only answered by yes from Q15

Psychologist	58.24%	53
Counselor / Mental Health Counselor	25.27%	23
Social Worker	15.38%	14
LPC & LMFT	1.10%	1

Q17: Is your College/University considered a Minority Serving Institution as part of any of these programs?

Yes	16.67%	16
No	70.83%	68
Unsure	12.50%	12

Q18: If you are a Minority Serving Institution? *22 responses

Historically Black Colleges and Universities (HBCUs)	7.14%	2
Hispanic-Serving Institutions (HSIs)	57.14%	16
Tribal Colleges and Universities (TCUs)	3.57%	1
Asian American and Pacific Islander Serving Institutions (AAPISIs)	7.14%	2
Top 25 LBGTQ affirming campuses	42.86%	1

Q19: How many Full Time Employees do you have in your Center?

1-3	17.71%	17
3-5	11.46%	11
5-10	14.58%	14
10-15	14.58%	14
15-20	19.79%	19
20-30	8.33%	8
30+	13.54%	13

Full Time Employees in Center?
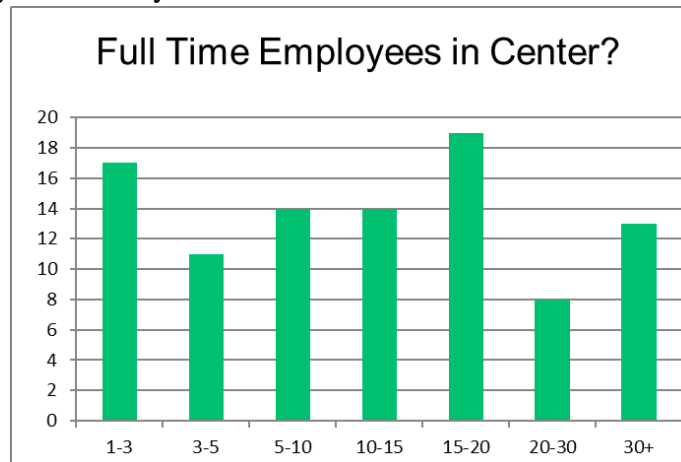
Q20: Who at your center provides Outreach? Check all that apply

Q21: Is outreach at your center considered a direct service or an "extra" separate from other services? By direct service, we are asking if this is part responsibilities/productivity or a to these responsibilities. of your work service provided in addition

Direct Service	60.00%	57
Something in-between	30.53%	29
Extra Service	9.47%	9

Direct or "Extra" Service

- Direct Service
- Something in-between
- Extra Service

Q22: Does your College use the Clinical Load Index from CCMH?

Yes	40.63%	39
No	23.96%	23
Unsure	35.42%	34

Q23: Are Outreach activities reported as productivity or counted by your institution's means of tracking direct service capacity?

Yes	47.92%	46
No	16.67%	16
Partly	17.71%	17
Not Sure	17.71%	17

Q24: As an entire Center (staff, interns, trainees, etc...), what estimated percentage of time does your center invest in outreach activities?

0%-15%	43.75%	42
15%-30%	43.75%	42
30%-45%	9.38%	9
45%-60%	3.13%	3

Q25: What percentage of staff at your center have a formal outreach requirement or allotted time to provide Outreach services?

0%-15%	35.42%	34
15%-30%	17.71%	17
30%-45%	2.08%	2
45%-60%	4.17%	4
60%-75%	5.21%	5
75%-90%	11.46%	11
<90%	23.96%	23

Q26: Prior to March 2020 did your agency have an annual budget allocated for outreach activities?

Yes	58.70%	54
No	33.70%	31
Unsure	7.61%	7

Q27: If yes, what is your budget? **51 responses from the former yeses**

< $5,000	33.70%	31
$5,000 - $10,000	11.96%	11
$10,001 - $15,000	3.26%	3
$15,001 - $20,000	4.35%	4
> $20,000	2.17%	2
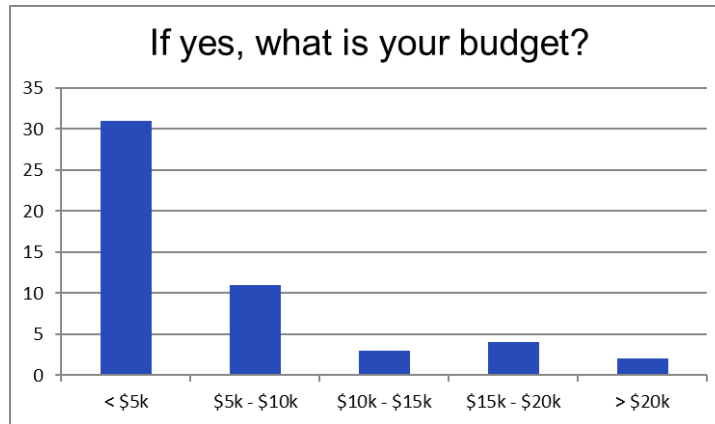
Q28: How were monies for Outreach modified between March 2020/March 2021?

Increased	3.26%	3
Decreased	32.61%	30
Unchanged	22.83%	21
No monies allocated	28.26%	26
Unsure	13.04%	12
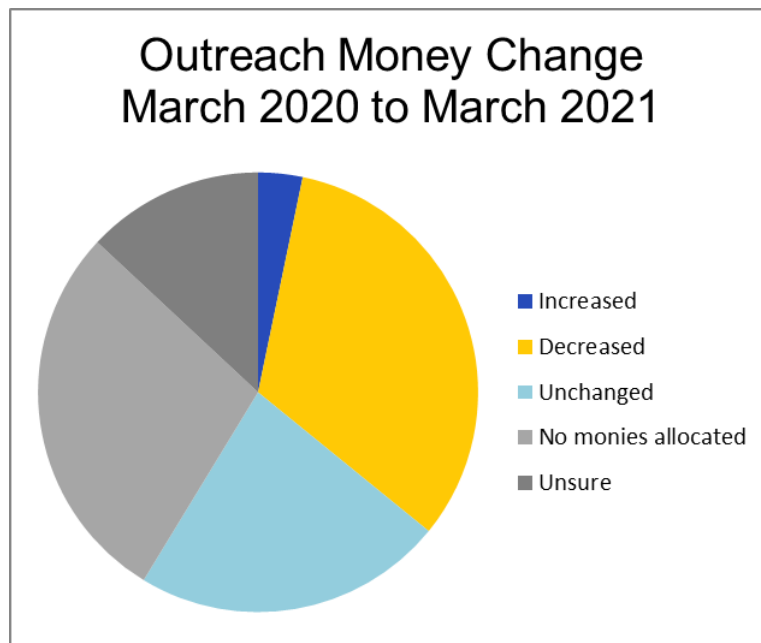
Q29: Did the number of staff at your center change over the past year? **5 skipped**

Yes	67.39%	62
No	31.52%	29

Q30: If yes, how so? Check all that apply **87 answers**

Increased	19.54%	17
Furloughed	16.09%	14
Early retirement	5.75%	5
Offered Severance	1.15%	1
Contract not renewed	8.05%	7
Laid off	3.45%	3

Resigned	39.08%	34
Open position not refilled	3.45%	3
Other (please specify)	3.45%	3

Death of staff member
roles redefined
Those on wage were not able to work during the summer.

Q31: If staffing was reduced in any way, was this associated with impacts of COVID-19?

Yes	34.78%	32
No	65.22%	60

Q32: Was the time allocated for Outreach modified?

Increased	29.35%	27
Decreased	16.30%	15
About the same	54.35%	50

Outreach time change

Increased
About the same
Decreased
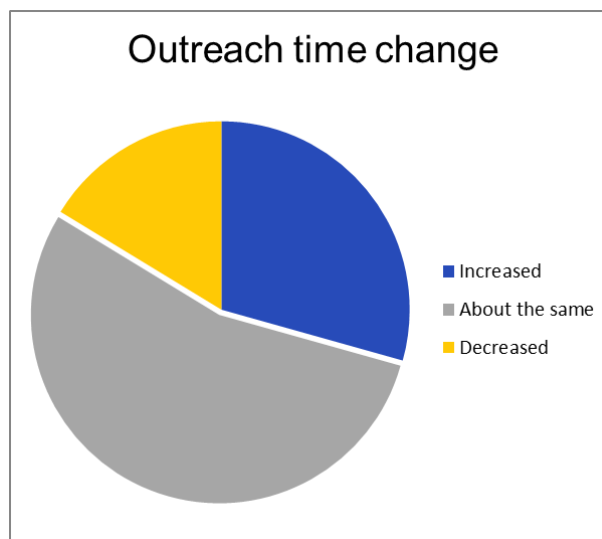
Q33: As a result of COVID-19, what types of adaptations/modifications/additions to outreach services were made? Think about opportunities or innovations that occurred. Check all that apply.

Virtual Outreach service delivery	88
Consultation	42
Live drop-in workshops/presentations	57
Virtual tableings	29
Social Media	76
Videos	68
Webinars	35
Group meet-up/hang-outs	21
Virtual or Cloud-based supports	29

Shifted several clinical groups to support groups that we could offer to out-of-state/country students
increased website information
Preparing giveaway packages to leave at COVID testing sites on campus
Collaboration with campus partners

Adaptations/modifications/additions to outreach services were made?

A bar chart titled "Adaptations/modifications/additions to outreach services were made?" with the following approximate values:

- Virtual Outreach service delivery: 88
- Consultation: 42
- Live drop-in workshops/presentations: 57
- Virtual tableings: 29
- Social Media: 76
- Videos: 68
- Webinars: 35
- Group meet-up/hang-outs: 21
- Virtual or Cloud-based supports: 29

Q34: Did you offer specific outreach to students regarding their experience in quarantine/isolation?

Yes	79.35%	73
No	16.30%	15
Did not have Quarantine or Isolation Housing	4.35%	4

Q35: Have you or other staff reported or discussed challenges related to technology as it relates to Outreach? Check all that apply:

Challenges related virtual outreach

A bar chart titled "Challenges related virtual outreach" with the following approximate values:

- Zoom or Screen fatigue: 89
- Security Challenges: 54
- Staff adapting to new uses of technology: 78
- Generating ideas regarding service provision via technology: 68
- Did not have challenges: 1
- Other (please specify): 6

16
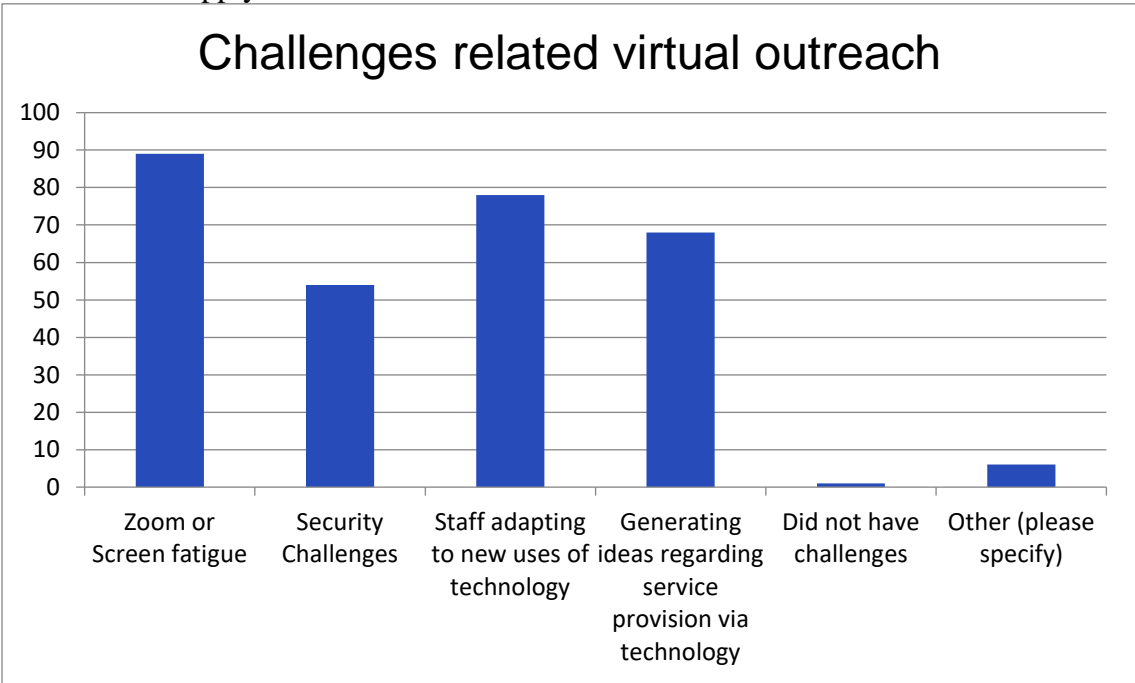
| How to manage campus partners recording our events. |
| safety issues that may occur and what to put into place |
| Technological/connection problems with virtual meeting platform functioning, internet connection/stability, unexpected computer restarts; audio/video malfunctions |
| Student engagement (no video etc) |
| Time it takes to develop videos and other content is longer than in person programming |
| Low student participation via virtual, Increased student registration with HIGH no show rates with virtual outreach, and difficulty marketing programming digitally |

Q36: Have staff at your agency requested accommodations or modifications associated with the use of technology to provide Outreach?

Yes	20.65%	19
No	55.43%	51
Not Sure	23.91%	22

Q37: Have students at your institution requested accommodations or modifications associated with the use of technology to provide Outreach?

Yes	19.57%	18
No	47.83%	44
Unsure	32.61%	30

Q38: Has your center/agency made adjustments or provided accommodations for staff related to technology use?

Reduction of direct service requirement	13
New equipment	49
Changes to traditional delivery	59
Change in job duties	5
Training	2

Adjustments/Accommodations tech use
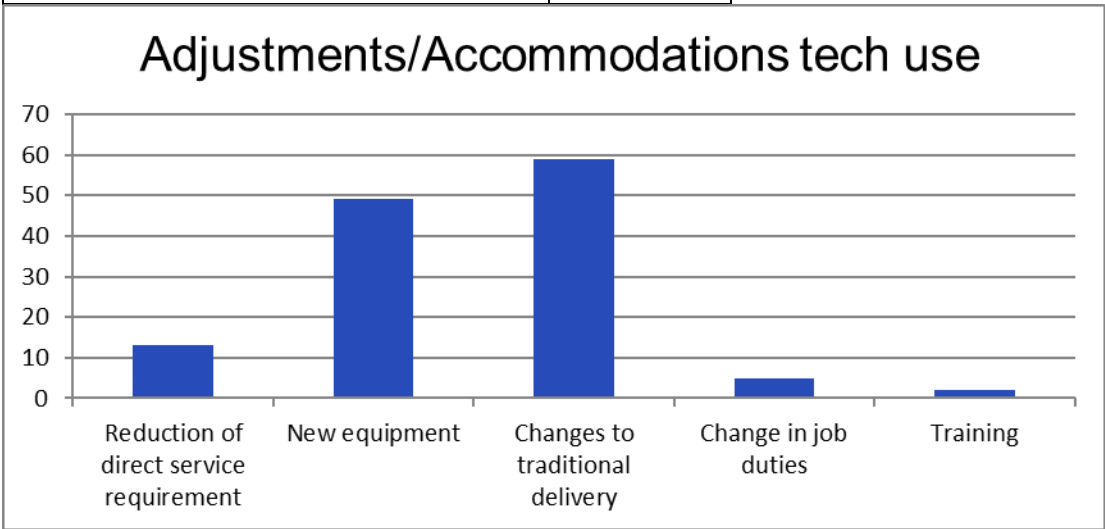
Q39: How has attendance compared for Outreach between Fall 2019 to Fall 2020?

Increased	16.30%	15
Decreased	66.30%	61
About the Same	17.39%	16

Outreach attendance change
Fall 2019 to Fall 2020

- Increased
- About the Same
- Decreased
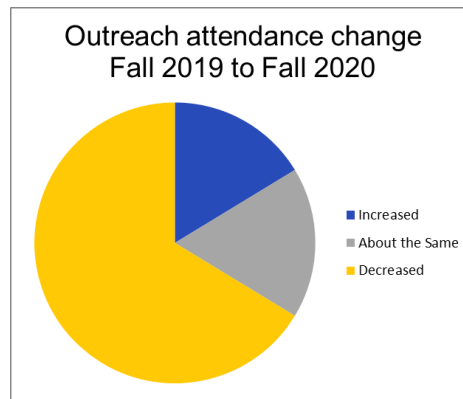
Q40: How has attendance compared for Outreach between Spring 2020 to Spring 2021?

Increased	29.35%	27
About the Same	18.48%	17
Decreased	52.17%	48

Outreach attendance change
Spring 2020 to Spring 2021

- Increased
- About the Same
- Decreased
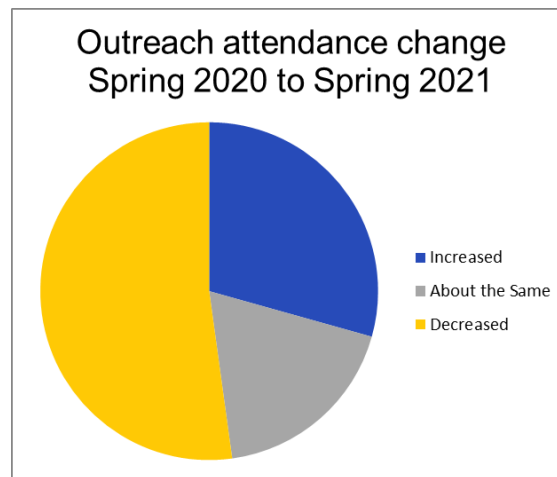
Q41: How effective do you believe virtual Outreach to be compared to in-person Outreach? Virtual Outreach is:

Far less effective	4.35%	4
Less effective	41.30%	38
About the same	44.57%	41
More effective	7.61%	7
Far more effective	1.09%	1
N/A - Did not provide virtual Outreach	1.09%	1

Q42: Please share brief observations regarding provision of virtual Outreach if this was provided.

| |
|---|
| Accessibility to programs improved when virtual. However, zoom fatigue greatly impacted a person committing to attending a full program. Students requested much more outreach but did not follow through with attendance. |
| Although virtual outreach may be more accessible (and possibly more accessed), it seems to provide less benefit to students than in-person outreach. |
| As effective according to surveys but wonder about the non measured impact of being in person and experiencing the experiences of others in person (no room for cameras off). Much more individual experience virutally and in person more of a community experience. |
| Attendance overall decreased |
| Difficult to keep students engaged in a large outreach. Most successful outreaches were debriefing or discussions after an incident, or Instagram Lives. |
| Difficulty engaging, especially when participants turn their camera off |

Engagement is lower as far as participation in conversation but more people have been able to attend.
Found it more difficult to sustain participants' attention, help them interact with each other and feel interpersonally connected, and even get them to attend at all. However, still seemed better than nothing and participants who did attend generally reported positive experiences and gains.
hard to get the same student engagement; over zoom students are much more likely to have their videos off and not participate. Instagram has been our biggest success, with putting up videos and infographics
Harder to get students engaged (lack of interaction)
I believe the greater awareness of student mental health distress amongst all faculty/staff due to the pandemic lead to increased willingness to collaborate with the Counseling Center, which somewhat boosted outreach numbers.
I checked "about the same" to #41 only because we found virtual outreach for some things (like Let's Talk), some outreach for specific populations that have been traditionally difficult to do in person (due to lack of space, etc.), and creation of videos as far more effective than in the past. However, a lot of our more standard workshops felt "flat" compared to when we do them live. We did not complete formal evals for most of our outreach this year.
I feel we were able to reach a big number of students changing to virtual. Both staff and students got used to the format. Late afternoon/weekend outreach is easier with virtual presentations!
I think virtual outreaches like Let's Talk or Workshops are more effective, while tabling is much less effective.
I would say that virtual outreach appealed to a different student demographic that in-person didn't appeal to so the overall impact might look seamless, even though there was a lost audience, there was also a gained audience.
In question 41- the answer is some things are more effective, some less.
In some ways, virtual outreach was the same or better (e.g. allowed more people to attend events, needing less lead-time to advertise events; still able to make events interactive with the use of technology). However, without in-person connection, there is something lost in regards to comfort with participation and ability to connect with the audience. Audience members may have also had issues being vulernable and open in virtual spaces. When audience members kept their cameras off, that was particularly challenging.
It has been very difficult to capture student attention and overcome Zoom fatigue. Overall engagement is lower and requests for outreach are lower.
It has increased accessibility in some ways, but decreased it in others.
It is difficult to get students to engage even if they are interested in the topic
It is more difficult to gauge audience engagement and have open discussion. In some cases, attendees are "off-camera" so presenters feel disconnected.
It seems like a lot of the presentations have been more memorable when self-paced and had positive experiences with students asking questions or engaging in groups.
It was less effective mostly because fewer people attended and we had fewer requests for it
Mixed bag. Better in some instances like workshops and Let's Talk. Worse in on campus events since we couldn't have them or anything close.
More convenient for attendees, but miss some connection from in-person
More interactions from students in the chat or spaces where they can text; more attendance to certain outreach events from a variety of campus community members
More participation, challenges moderating the chat and presenting at once, challenges creating a sense of community amongst participants

more students attend
Most group offerings continued to be utilized. We did not have requests for workshops even though we made our previous workshops work in a virtual format.
Our institution went fully remote with learning in Spring 2020 and fall 2021. All Student Affairs departments experienced a significantly lower (none or almost none at times) engagement with any virtual outreach during those semesters. We have had slightly better engagement during spring of 2021 due to some different programming devloped, collaborating more with Res Life, and more direct advertising to particular groups.
People didn't have their cameras on
Practically no one attended our virtual Put Stress to Rest Fair--something is definitely lost in translation when this popular in-person event is moved online
seemed helpful and engaging to students that attended, but often people did not come
Some areas are more effective, while others are not.
Students are experiencing Zoom fatigue and no longer wish to participate in Zoom sessions.
Students are fatigued by the required virtual events they need to attend and are disinterested in attending optional virtual events
Students are less interested in virtual outreach.
Students do not want to turn on their cameras.
students find it convenient
Students have been verbal about their mental health needs but engagement in outreach events/workshops has been zero to low.
Students not as engaged; low attendance
Students signed up at higher rates but showed up/attended at much lower rates. Virtual options gave students means to participate at a pace they were comfortable with (video muted). Promoting events for students to be aware of services or programs offered was MUCH harder with students not on campus physically and with university priorities being communication about COVID and not mental health initiatives.
Students were less engaged than when in person, were able to turn off their screens and audio even when requested to turn them on.
Students were suffering from Zoom fatigue. We have been fully virtual since March 2020
Students with screens off is challenging. Feels very disconnected and does not flow as well. Is better than nothing. Good to reach students who otherwise may not have come. Good to see each other's spaces and pets.
This is an effective way of engaging students and in some ways it is more accessible to students and center staff Notably students' overall "Zoom fatigue" is a confounding factor
Very low attendance for Zoom based events
Virtual outreach can be effective, but there are losses compared to in-person outreach. Specifically, it is more challenging for facilitators to experience the in-person energy that an audience brings. A plus of virtual is staff being more open to after hours outreach because of no commuting.
Virtual outreach increased offerings and awareness of the counseling center but cumulative attendance numbers were lower than in-person offerings.
Virtual outreach was appreciated early in the pandemic when there was basically no other choice. As in-person options have become available, and especially with fatigue of virtual events, attendance at virtual outreach events has significantly declined.

Virtual services are quite effective for BIPOC population and students who worry about mental health stigma connected with help seeking behaviors
We are largely a commuter campus, this has allowed students that are not on campus outside of class time the opportunity to join outreaches.
We feel we were able to reach more students via social media, but engagement in activities remains low.
We had more students attend virtual outreach. I think logistically it was easier for them to attend (i.e. transportation, schedules, etc)
We have different campuses and virtual outreach has allowed us to connect to all students at one time.
We tried to provide workshops via zoom. very few students, issues with cameras off
We've had more outreach requests on our website form. We've had a decrease in attendance to our weekly wellness workshops.
While I think that learning outcomes are met similarly between in person and virtual outreach, attendance and interactive engagement seem diminished in a virtual environment

Q43: Have you needed to adapt or make changes to the following?

Disclosure statements	56
Ground rules during outreaches	56
Outreach Manuals/policies/procedures	39

have tried to adapt feedback/evaluation forms to digital; responses are very sparse
Internal policies around recording of events
making sure to share information about new counseling procedures
Probably should be doing all of the above, but haven't had the capacity to keep up with policy development in outreach
website

Q44: Regarding each of these activities, has you center increased, decreased, maintained, stopped, or started the following:
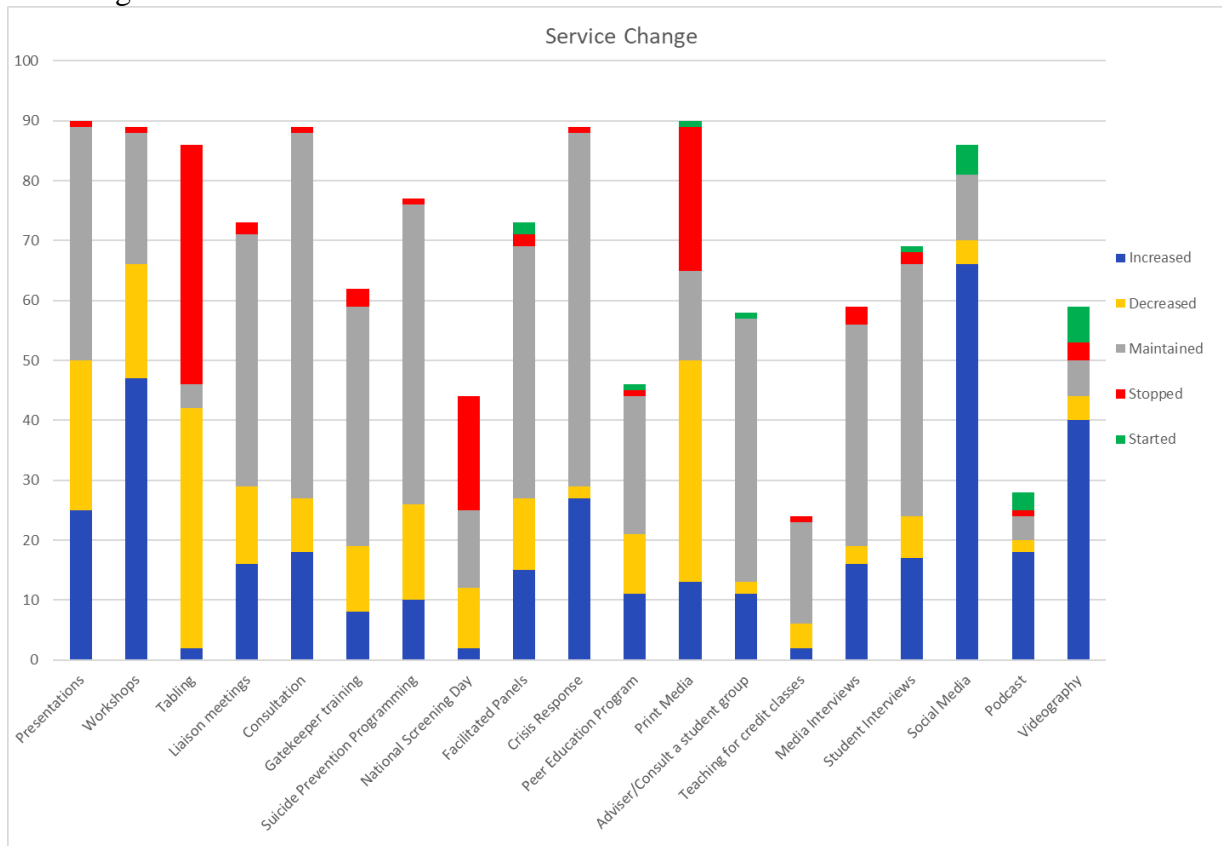
Q45: Have you observed a change in frequency for Outreach requests over the past year?

Increased	30.43%	28
Decreased	41.30%	38
About the same	28.26%	26

Q46: In the past year, did any of these factors impact, affect, or intersect with Outreach service delivery? (Check all that apply)

COVID-19	91
Finances	46
Politics	56
Upper administration	33
Campus climate	61
Racial injustice	71
Migration or immigration	23
Immigration Policies	31

hiring
loneliness and isolation
burnout and work dysfunction

Factors that impact, affect, or intersect with Outreach service delivery
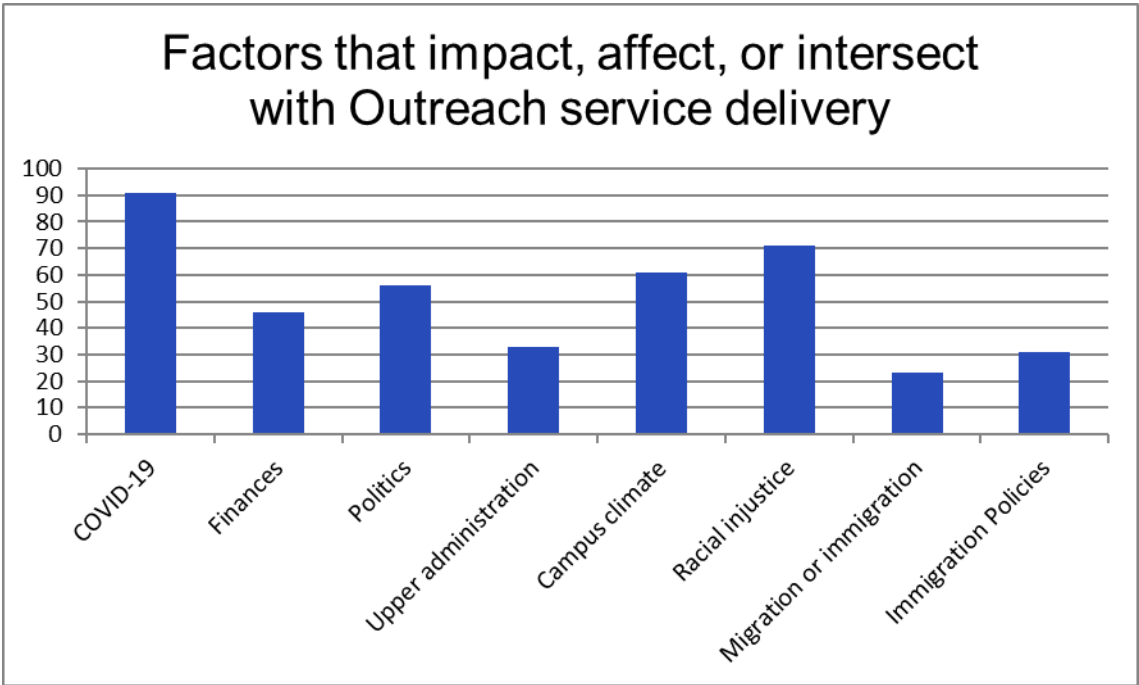
Q47: What means of marketing/promotion do you use for your outreach efforts? (check all that apply)

Website	81
Social media	87
Word of mouth	75
Physical fliers or posters	35
Videos	30
Networking	62
Email/Newsletter	10
Other (please specify)	6

"EmConnect" calendar
University Marketing Department
Campus partners working group meetings
University listserv
liasions
Cross promote with other departments

Q48: Do you receive support from a marketing or communications specialist at your institution?

Yes	61.96%	57
No	38.04%	35

Q49: Have you continued to conduct assessment of Outreach between March 2020 - March 2021

Yes	60.87%	56
No	39.13%	36

Q50: If yes, in the last year, how have you used your assessment data?

We have collected it but haven't used it	35.09%	20
To make decisions about future programming	59.65%	34
To help our Outreach providers improve	43.86%	25

Q51: Regarding Outreach provided, briefly describe any observations made between March 2020 - March 2021 regarding Outreach.

| positive feedback |
|---|
| The only in-person events have been postvention, in response to campus crises. Number of outreach requests have drastically decreased, even for virtual classroom presentations (like |

First Year Seminar). CAPS has also been clinically burdened, especially toward the end of fall 2020 and so far spring 2021, so much more effort has been put into social media and creating videos/infographics to try to reach students
The number of outreach consults increased. We also implemented info-sessions for staff/faculty, and students that have been well attended.
Staff and students have been burned out so there has been less creativity or openness to taking outreach requests (from staff). Peer educators have had their busiest outreach spring in five plus years. They want to be engaged in the community and feeling empowered to help others during this challenging time. Sense of belonging was a big motivation for our peer eds this past year.
Utilization of peer educators to greatly expand social media content (text, image, and video) has proved to be incredibly useful. It was very fortunate that our strategic plan happened to already include launching our peer educator program this academic year.
We did a lot of outreach related to coping with COVID-related stress and self-care and supporting marginalized communities around issues of racial injustice. We were fortunate to be able to translate some existing programs (e.g. gatekeeper training) to a virtual format and to be able to provide most of our new requests virtually.
programming encouraged by faculty and staff or requested by students was less attended than outreach programming initiated by the staff.
Students appear fatigued by screen time Attendance has decreased for outreach events from the beginning of March 2020 until March 2021
Increased requests for managing mental health impacts of COVID and managing burnout
Involvement on screen as significantly dwindled.
difficult to convert to virtual, steep learning curve while also ramping up to training and provision of responsive services (counseling), finding motivation and energy because effort does not equal reward
When requested by student organizations/clubs, participants engaged more virtually when compared to to staff/faculty requesting for their class.
We had far better engagement during Fall 2020 and it dwindled throughout the year. This may be due to changes in virtual/in person learning, or Zoom fatigue.
Attendance at online events is low, most likely because of zoom fatigue. For tabling that has occurred on campus, students who were present seemed grateful and upbeat.
We needed to partner with departments that had "captive audiences", like Res Life. All of our outreach efforts in fall 2020 failed. We were able to get some outreach/support groups up and running this spring, with a few regular students in attendance, and this was helped by really direct and targeted advertising. For sexual assault awareness month, we created an electronic resource, worked with marketing for a social media campaign, and left resource/giveaway bags at tables during mandatory COVID testing days.
Hybrid is the way of the future. It was exhausting but we'll keep some of the things we learned
tailor outreaches to students needs through liaisons
A hybrid module of outreach will meet needs of students who may not be meant with just in-person outreach.
It was a challenge since we were fully virtual for the entire year
The intersection of "mental health" in our various outreach efforts and Academic engagement of students is much much greater, leading to a shift in our collaboration emphases in the coming years.

Still appreciated by the students, faculty, and staff; increasing virtual outreach efforts will likely improve our in-person outreach as well!
Increased outreach activities
We recognize the need for suicide prevention and crisis intervention in outreach because our walk-in appointments have decreased substantially but there is no reason to believe suicidal ideation has decreased in the population. We have had to be more proactive in planning and advertising outreach because requests for outreach have decreased significantly.
Some offerings are under utilized.
We've been asked more frequently to just "be on" others virtual events and engagements for fears that someone will be triggered but with no way to intervene.
As time went on attendance of virtual outreach events decreased.
Feels like we are utilizing outreach more to increase connection/belonging.
There have been challenges and opportunities. Trade offs.
Using zoom video and social media has increased our reach information, but struggled with continued engagement.
Decreased requests for outreach.
Less attendance to weekly wellness workshops. Let's Teletalk is gradually increasing in attendance each term. More outreach requests.
This year forced us to get creative.
Outreach has remained the same but there are pressures to resume in person outreach efforts for student morale.
Decrease in in-person outreach.
Summer/Fall numbers were much higher in terms of # of offerings and # of attendees to events, compared to Spring
Without students on campus, outreach is entirely digital. Our website is managed centrally, so it cannot be easily changed. We rely on social media and word of mouth from invested colleagues on campus to promote our work.
Workshops were requested but students did not attend groups, well.
The needs have increased
Initially there was a significant increase in request for outreach but very little support in providing, promoting, and executing that outreach in an effective way. Many programs that were adapted for virtual delivery ended up being side-lined by university communication priorities related to COVID-19. Our campus has not prioritized digital delivery of mental health information or support to students despite their recognition of its need on campus. Incoming Freshman had little to no mental health related information compared to typical years. Very little outreach occurred in fall 2020 as we continued to figure out how to offer virtual outreach most effectively. Students participated in a virtual mental health screening day at unprecedented rates in Spring 2021.

Q52: What demographic data do you collect for your outreach services? **81 answered**

What demographic data?
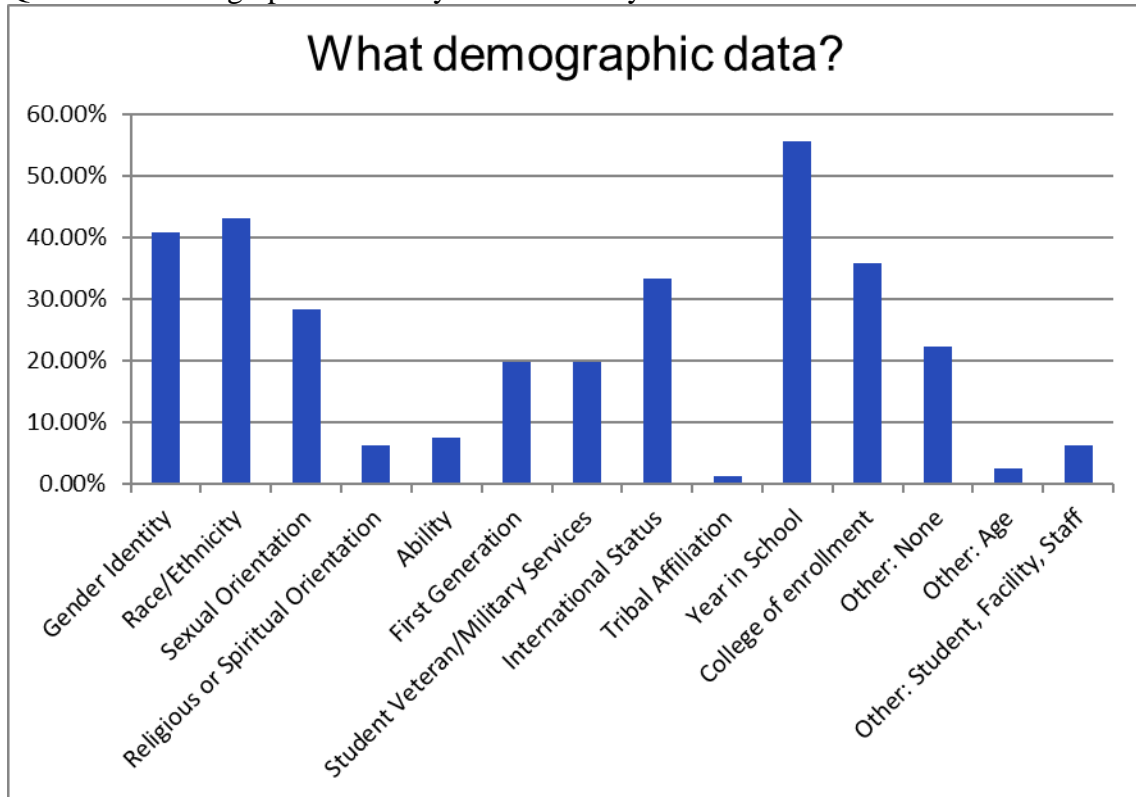
Q53: Which diverse groups of students do you offer very specific/focused outreach programming for and / or formally liaison with? **81 reported**

African American / Black	81.48%	66
American Indian or Alaska Native	25.93%	21
Asian American / Asian / Pacific Islander	49.38%	40
Latinx / Hispanic	59.26%	48
Middle Eastern / North African	16.05%	13
Native Hawaiian or Pacific Islander	24.69%	20
Multiracial	30.86%	25
Multicultural / Diversity Office	67.90%	55
LGBTQ+	85.19%	69
Trans and Gender Spectrum	61.73%	50
Persons with various physical mental abilities	28.40%	23
Spiritual / Religious	30.86%	25
First Generation	49.38%	40
Transfer / non-traditional students	28.40%	23
Women	50.62%	41
Men	32.10%	26
Student Veteran/Military Service/ROTC	38.27%	31
International Students	77.78%	63

Specific outreach for Diverse groups
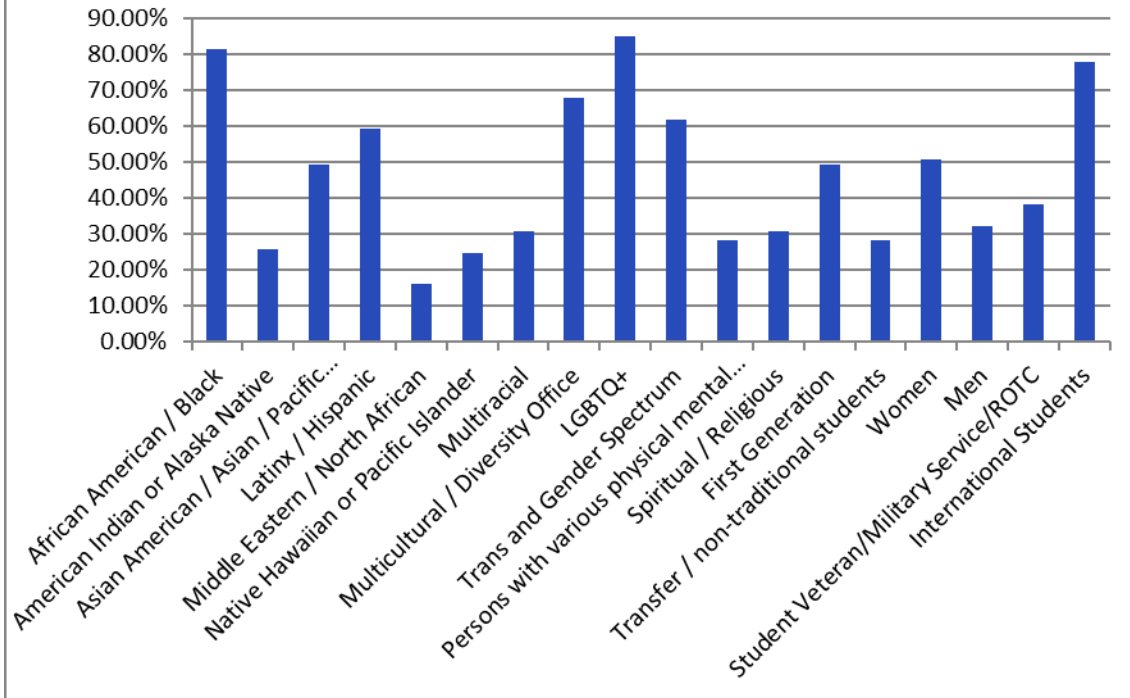
Q54: To what extent does your center offer Outreach focused on anti-racism efforts?

None	4.94%	4
A little	35.80%	29
A moderate amount	44.44%	36
Very much	14.81%	12

Extent of anti-racism efforts

Q55: Please indicate the extent to which you agree or disagree with the following statements:

Weighted Average of Agreement

A bar chart titled "Weighted Average of Agreement" with a y-axis ranging from 0 to 5 (in increments of 0.5). The bars represent:
- Coworkers support Social Justice Outreach: ~4.4
- The Center is committed to Social Justice Values: ~4.45
- The Center engages in Social Justice Activities: ~4.1
- The Organization values my contribution to Social Justice: ~4.05
- My Supervisor and I discuss Social Justice Outreach: ~4.1
- My Center provides adequate Social Justice Programming: ~3.35
- There is a lack of time for Social Justice Outreach: ~3.25
- There is a lack of resources in my organization for Social Justice Outreach: ~3.3

Q56: Please indicate the extent to which: (1 is Strongly Disagree and 5 is Strongly Agree)

Average agreement; You consider the following to be "social justice" activities

A bar chart titled "Average agreement; You consider the following to be 'social justice' activities" with a y-axis ranging from 4.35 to 4.80. The bars represent:
- Collaborating with faculty and staff working towards Social Justice: 4.59
- Advocating for a marginalized group: 4.78
- Applying values of empowerment: 4.51
- Increasing awareness of sociocultural issues: 4.69
- Collaboration with students from marginalized groups in program design: 4.71
- Consultation with diverse student groups.: 4.75

You participate in the following activities

Activity	Value
Collaborating with faculty and staff working towards Social Justice	4.05
Advocating for a marginalized group	3.99
Applying values of empowerment	4.29
Increasing awareness of sociocultural issues	4.28
Collaboration with students from marginalized groups in program design	3.59
Consultation with diverse student groups.	3.69
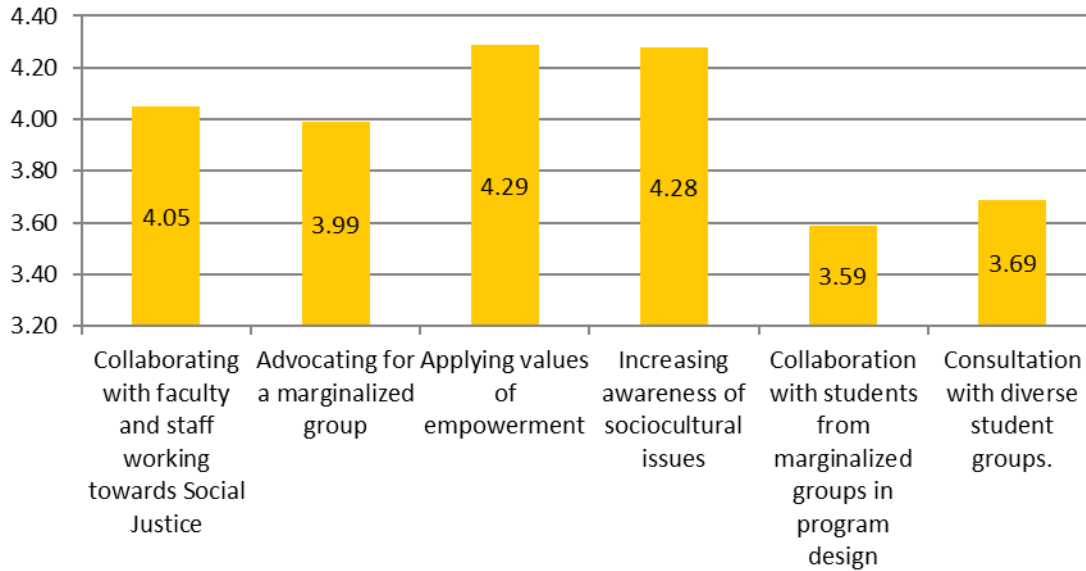
Your center engages in the following activities

Activity	Value
Collaborating with faculty and staff working towards Social Justice	3.99
Advocating for a marginalized group	3.96
Applying values of empowerment	4.00
Increasing awareness of sociocultural issues	4.13
Collaboration with students from marginalized groups in program design	3.68
Consultation with diverse student groups.	3.75
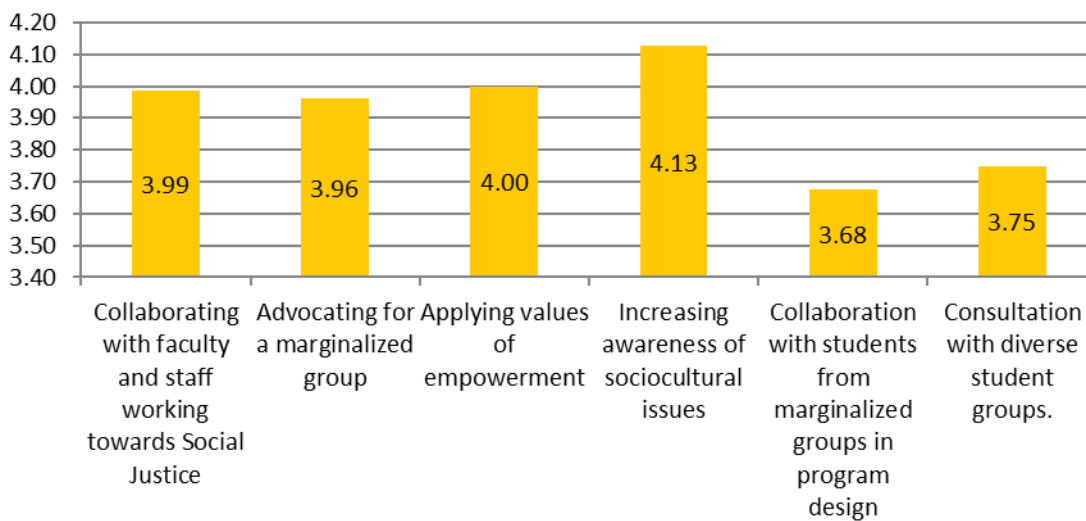
Q57: Does your center assess the impact of Social Justice activities and programming?

None	32.10%	26
A little	25.93%	21
A moderate amount	27.16%	22
Very much	7.41%	6
Not Sure	7.41%	6

29

Q58: In your opinion, does representation on your staff reflect the population of your campus?

Not at all	7.41%	6
A little	40.74%	33
A moderate amount	33.33%	27
Very much	17.28%	14
Not Sure	1.23%	1

Importance of representation in staff

- Very much
- A moderate amount
- A little
- Not at all
- Not Sure
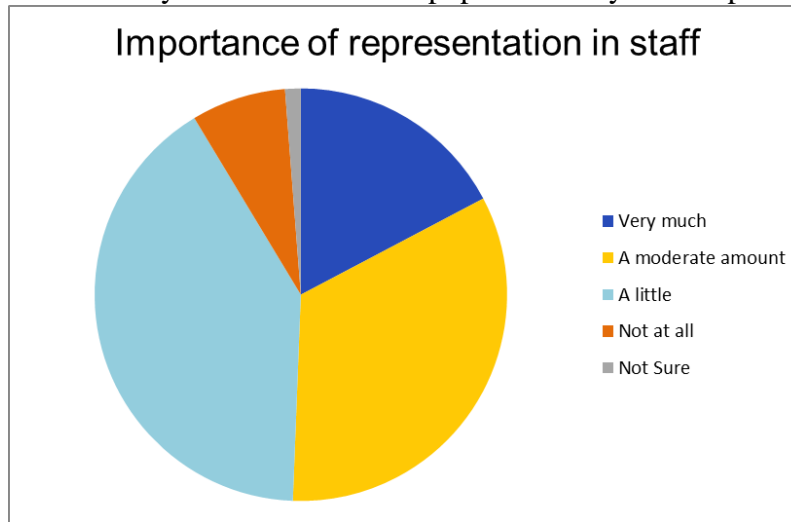
Q59: Have you or other staff at your center discussed the impact of bias or racial trauma in the workplace?

None	0.00%	0
A little	17.28%	14
A moderate amount	34.57%	28
Very much	48.15%	39
Not Sure	0.00%	0

Amount of discussion on the impact of bias or racial trauma in the workplace

- Very much
- A moderate amount
- A little
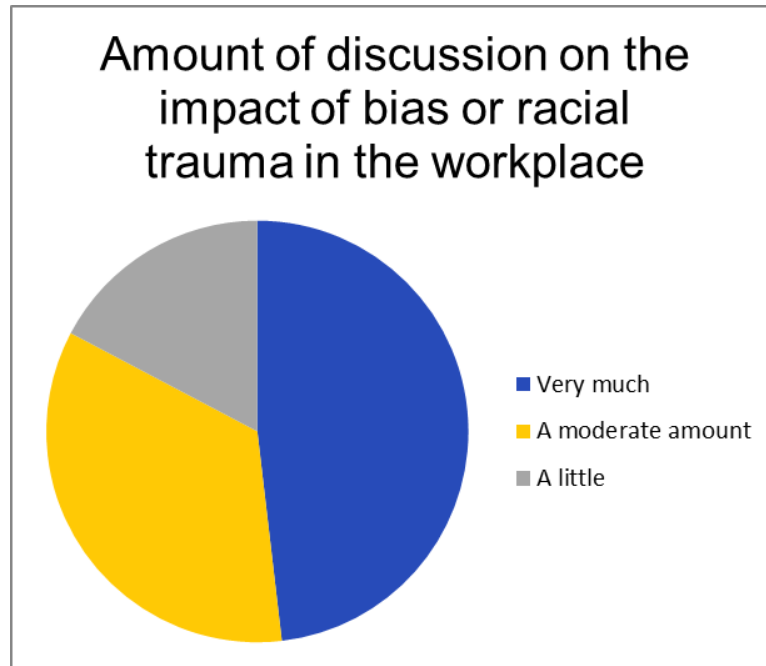
Q60: Has internal support been offered to staff as they are personally impacted by bias or racial trauma?

Yes	69.14%	56
No	30.86%	25

Q61: If yes, what type of supports have been offered to staff?

only by director of counseling center, not by overall department or university
As Director, I check in with staff with marginalized identities frequently, especially when events/experiences may be impacting them specifically. Created debriefing meetings this past year, meet about 1x/month. I developed a policy for these staff members to use professional development time if needed to engage in self-care
group spaces, individual spaces
The offer has been made individually to all staff, I have not accessed any supports so I do not know the details.

I'm not sure the exact type of support. We engaged in a staff survey and will be having an external consultant support staff around these issues.
Affinity spaces
designated meetings for discussion
Advocating for staff members who have been impacted Checking in with each other to assess bandwidth for participating Time off
checking in, adjustments to clinical load when needed
Work free time, mental health days, reduction in clinical load as needed
Ongoing formal meetings centered around bias and racial trauma 2x/ month and a group of staff (n:5) who facilitate how the space is used.
Training and webinars
affinity groups, bias/racial trauma training, working to implement Sanctuary model
care, support, picking up some of their responsibilities, less pressure to stay with contract, encourage to take "mental health" days.
space to talk, time off if needed
Employee Assistance programming
EAP, small group discussions.
extra time off, flexible schedules, additional consult time, staff of color meetings
Having time allocated for affinity-based support spaces Taking time off when there are public events of oppression
discussion spaces, individual meetings (and possibly individual accommodations though I wouldn't know if that occurred because that would be individually-based)
Climate survey
Diversity & Inclusion Office has done trainings with Student Affairs
emotional support from white colleagues, decreased workload, extra time off if needed
Flexibility with taking time off / missing meetings. Coverage of on call for needing to take time off.
na
counseling, coordination with Chief Diversity Officer, trainings
Safe spaces, intentional spaces
Special supervision has been provided; consultations and professional development are also implemented
Time off, consultation, change in duties
Anonymous surveys, weekly meetings, diversity seminars, open-door policies, bias reporting protocols
Discussion, consultation, EAP
Outside of reminders of EAP, I am not sure what else has been offered.
meeting/dialogue time. Resources.
Small group discussion; supervisor support; ongoing check-ins, support for their outreach advocacy, EAP.
Debriefing spaces, reduced work (other staff stepping in to help), taking time off if needed.
Conversations in supervision, weekly clinical consult, 1-2 trainings/all-staff conversations a term, intentional efforts to retain BIPOC staff

Consultation
Debrief sessions, white accountability group
Ability to attend clinician of color group during work hours
I have personally reached out to staff in my role as an administrator and as a POC. We are holding anti-racism small groups every other week and several Internal Diversity meetings throughout the year. I have also reached out individually to staff and trainees who have been directly impacted by racial trauma.
Days off, taking it easy that day, seeking emotional support from colleagues.
Talking with Supervisors and Directors
Discussion personal time off
None of my staff have requested such support. We've had many conversations about the collective impact of racial trauma. My providers are white, and have not expressed a need for personal support in this issue.
EAP, workshops, trainings, etc.
Supervision supports, ability to choose not to take on certain outreach or other activities when they are also personally impacted, separate staff of color gathering times for mutual support
Our Student Affair Assistant Dean has supported us
Monthly all race discussion and monthly affinity groups.
Time off, encouragement to participate in non-university related functions or organizations, staff conversations, sharing of research/articles, one-on-one check ins.

Q62: To what extent does your center include trauma informed approaches to outreach?

Very much	25.93%	21
A moderate amount	41.98%	34
A little	28.40%	23
None	2.47%	2
Not Sure	1.23%	1

Extent that trauma informed approaches is used in outreach
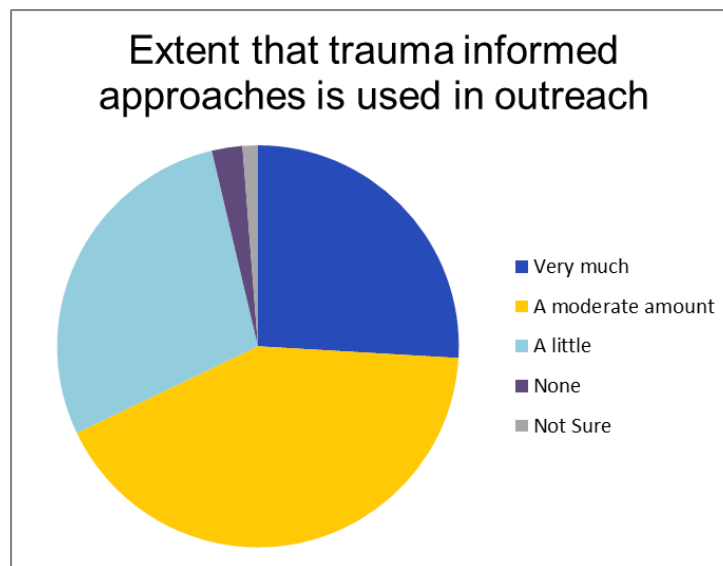
Q63: What resources or support from AUCCCO would be helpful to you in delivering inclusive or diversity focused outreach?

best practices for evaluation of outreach; ideas from other smaller universities with limited resources and support
Downloadable examples of programming
-Articles on outreach to diverse communities -Sample presentation for marginalized communities

| |
|---|
| -Training opportunities for staff delivering outreach on diversity and inclusion

 -Ways centers are collecting demographic data to inform programming |
| information from other centers - what they are doing, what has been successful |
| Handouts, ideas for presentations, ideas for healing spaces |
| Training how best practices, sample programs or interventions provided by peer institutions. |
| Pre-made presentations that can be somewhat edited to fit each university's populations/needs; a list of ideas on these types of outreach programs; consultation spaces around trouble-shooting, debriefing for these types of outreach events |
| Any outreach that integrates diversity factors is helpful so resources or support in that regard would be helpful. |
| Always open about ideas for effective outreach |
| -Ideas for effective, evidence-based programming directed toward majority-population audience members with varying degrees of interest/knowledge/perspectives about inclusivity, as well as individuals representing minority populations.

 -Information about training staff in providing inclusive outreach (particularly staff who are unaware of continued growth edges in this area) |
| Toolkit maybe? |
| trainings |
| relevant weblink resources, training |
| Continued growth in ideas of outreaches and ways to develop better programming. |
| Models of programs, workshops etc; data to show effectiveness |
| We are not AUCCCO members, but would want to explore joining if there was more focused support for providing EDI outreach. |
| Listserv |
| Training & resources |
| ? |
| Assessments

 Cross sharing programmings

 Central database of presentations etc. |
| Inclusive and/or diversity informed language, ideas and strategies. Examples of programs developed/delivered. |
| So far, everything from AUCCCO has been incredibly helpful. |
| Literature

 Topic ideas

 Share slides of programs

 Information on implemented programs - descriptions, marketing etc

 Assessment of programs - instrument ideas for example |
| More information on best practice and effective approaches to engagement. |
| Trainings, best practices, collaboration between universities |

more discussion and new ideas to implement it
Conference workshops and ongoing monthly discussion groups via Zoom perhaps.
programming models and templates. Presentations on the innovative and effective ways of implementing.
Good speakers or presenters on this subject to come speak at our Center for professional development.
training and information on how to provide trauma informed outreach.
Learning more about trauma informed approaches to outreach, how to make our more general outreach presentations focused on inclusion and diversity.
Trainings
More examples of workshops/presentations that have gone well, how was it tailored for specific audiences, links to research that can be incorporated, etc.
More examples of what has been successful in other places. Presentations that can be adapted.
Training/Collaboration
Outreach ideas focused on diversity
Any online training, mentoring, program sharing, etc. would be helpful.
Before receiving AUCCCD email about this, I never heard of AUCCCO
Examples of what works at other centers, outreach evaluation templates, sample outreach budgets
Strategies for building trust within marginalized populations of students groups as well as staff/faculty collaborators. Strategies for white outreachers to most effectively collaborate with non-white counseling staff in providing inclusive and diversity focused outreach. Building trust.
I have appreciated resources and learning on these topics from past AUCCCO conferences and regularly reference them in my work.

Q64: Does your center have a training program?

Yes	81.48%	66
No	18.52%	15

Q65: If Yes, have opportunities for outreach increased, decreased, stayed about the same for trainees facilitating Outreach?

Increased	22.39%	15
About the same	37.31%	25
Decreased	40.30%	27

Change in opportunities for outreach for trainees facilitating Outreach?

22.39% Increased
40.30% Decreased
37.31% About the same
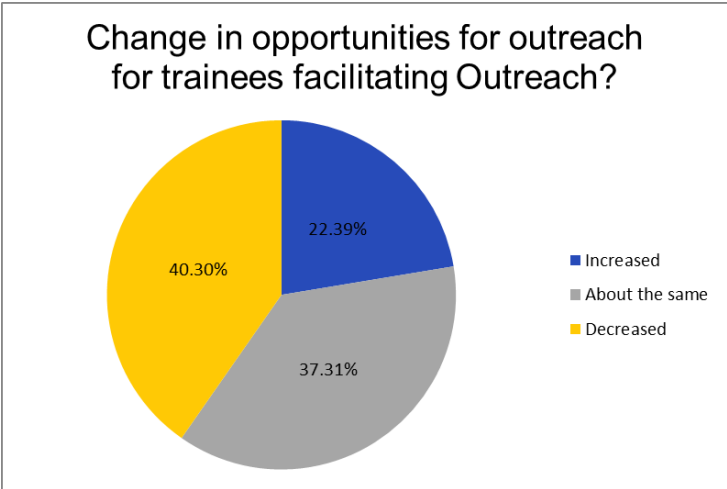
Q66: If yes to #65, please briefly share how trainees have impacted your Outreach programming this year.

have contributed to instagram posts (videos and infographics), and have co-facilitated some regular programming (i.e. Safe Zone)
interns have created their own outreach project in addition to taking on some outreach activities.
Trainees have been important as we transitioned to virtual outreach and services. They have assisted our staff with some learning curves. They have also been eager to engage in social media outreach as well as consultation. They have been more engaged in mentoring our peer eds.
Trainees have always participated in campus outreach but are now also involved in didactics for our Peer Educators
We have the same capacity now, but some of our training program has been cut for next year, which will impact the amount of trainees we have that provide outreach.
added additional workshops, helped with some of the social media posts
They fill general requests we get, complete an outreach mentorship in a focused area (e.g., Residence halls, AOD, suicide prevention)
They have been helpful in creating social media content, utilizing Reddit as a means of outreach, and taking on outreach virtual presentation requests
Trainees have engaged in outreach activities as they typically do with a minimum of 3 events per semester.
Trainees have assisted w/ facilitating workshops, served on panels, created social media content, co-liaison w/ pro staff
Our Training Director is not too invested in outreach, so this is a challenge in itself.
new ideas
Daily Let's Talk.
liaisons, consultation project - but they have limited time
trainees usually design and implement their own outreach in Spring semester and help out with other outreach
participated as usual
interns are impacted by staff burn out and from much work on dismantling white supremist work culture
Trainees supported the programming and largely took most outreach opportunities, with regular staff taking less opportunities
Excellent trainees, willing to participate and engage in various programming
Trainees have co-facilitated workshops and support groups, recorded brief mental health strategy videos and delivered presentations.
This current academic year, we did not have any trainees.
They participate in offering programs They develop programs
Contributed to social media campaigns and providing virtual programing
They have been doing outreach as much as usual and are more eager to do outreach than regular staff.
Trainees have the opportunity to present or provide programming on areas of interest and are offered opportunities to represent our office when outreach request come in.
Shadowing, facilitating, creating programming.

they participated in creating social media content and educational videos
Postdocs have not done much outreach. But they still do Let's TeleTalk.
Less opportunities during Covid but have maintained outreach training.
They have been helpful in supporting our outreach.
We have had less outreach request and in turn that has led to fewer outreach opportunities for them.
They continue to provide their yearlong consultation projects and complete 6 outreach facilitations. They have continued to assist us in strengthening our relationship with campus partners and with particular marginalized groups (e.g., AAPI, LatinX, LGBTQIA).
Offered more support for outreach initiatives.
Trainees created a coping skills group.
They have recorded presentations and provided more virtual workshops.
Trainees are available for outreach, but we do not have requests. We also have not gotten attendance for the events they've created.
Trainees have been able to offer outreach in their areas of expertise, including starting a Trans/Gender Nonconforming support group and creating presentations on intergenerational trauma.
Our interns tried to start a Pandemic Support Group this spring, but despite their efforts, only 1 student ever contacted us about joining the group
Involved in weekly drop-in virtual program series.
Provide new ideas and enthusiasm for outreach, serve as liaisons to Office of Residence Life, fewer opportunities for trainees to do outreach due to COVID.
Because trainees have struggled more to get their number of direct hours, they have been more willing to participate in outreach AND our training director has been more willing to support trainee participate in outreach than in previous years.

Q67: Briefly describe any observations regarding Social Justice Outreach at your institution.

The institution in general does not typically follow-through on all efforts. The university is in a transitional phase with upper/exec admin, so it is hard to say how social justice initiatives are going right now
CMU also has a Center for Diversity and Inclusion and we have increased our collaboration and partnership with them.
There have been many programs offered each week for staff and students. It appears that the community is beginning to feel desensitized or tired of the programming efforts (seen by lack of attendance and anecdotal feedback).
I believe that it has been interesting watching what types of social justice issues I am instructed to take a formal stance on, and which I am instructed not to take a stance on. Also, I find that the social justice oriented outreach is more often reactionary in nature and has mostly increased in the past year due to continued increases in visibility of social justice issues.
We do a lot of outreach to support marginalized communities. In the past year, most have been in response to violence against communities of color, immigration issues, or how people have been impacted by COVID & the sociopolitical climate.
There are only certain departments on campus that are passionate about doing this work and initiating change. The impact only goes so far because upper administration does not seem to value or initiate actions related to social justice (it's mainly only on paper or in statements they release to community).
We had a very positive forum around the time of the nationwide Black Lives Matter protests. It has been hard to keep up the momentum, however, because of limited time in our counseling

roles. In all, I think the university could be doing a better job in promoting social justice at the university.
There is more energy behind interest in social justice outreach events: more social justice focused requests and more social justice interest from staff members to provide outreach
This is often led by the multicultural student center in collaboration w/ campus partner
It's a struggle.
Lots of space for conversations
I think our institution does a great job with SJO.
Framed as something other departments can do and we can support, but not directly our job; and whatever we do/say has to be aligned with formal statements put out by university administration.
Incredibly high demand and the more that we do it the more demand arises (which results in us not having the FTE capacity to support all that needs to be done).
Our campus has made a conscious efforts to support social justice
we have lost several staff due to the slow pace of leadership awareness and action with institutional racism
Students largely appreciate it, administration less so - which may be due to community climate.
It has definitely increased in the last year, considering the racial injustice events along with the sense of isolation due to COVID-19
Social Justice Outreach is an area for growth.
The CS partners with the DEI office and the Office for Community & Belonging to offer innovative and relevant programming to marginalized, under-represented, and diverse populations of students on campus.
Putting out statements to support different groups Implementing supportive programs for different groups
We are responsive to needs and requests but not equipped to do novel programming for our own needs.
There are not enough and the work tends to fall on our clinicians of color.
We have very strong collaborations and are committed to social justice outreach. It is part of my title.
We could always do more or better.
We have stepped in to provide a lot of healing and support spaces.
There are some staff who are resistant to anti-racism or social justice work. This has been very challenging for staff members who value social justice and anti-racism work.
Sometimes there is a territorial power struggle with other campus departments about who should be providing social justice outreach.
We've gotten better, but we allocate time, resources, and funds to a specific group of folks on campus to do this work and efforts by anyone else are not expressly inhibited but are not given active support
We created the Social Justice Institute
Our institution tries, but our students do not seem to be very interested or involved, so it isn't an active or ongoing situation.
Poor attendance at events for our students of color (we are a PWI). Lots of interest in providing social justice-related events but poor attendance.
We have some very passionate BIPOC staff seeking out Social Justice Outreach opportunities. These individuals work closely with BIPOC faculty/staff and students. The strains to trust

have made it difficult for non-BIPOC staff to be involved in these efforts and then the lack of involvement of white staff further strains trust. Other marginalized population (LGBTQ+, international students, etc.) appear to be left out of more recent Social Justice Outreach as a result of the heavy focus on racial injustice and racial trauma.

As an institution, there is conflict between those doing Social Justice Outreach work and those who are in positions of power and responsible for communications and public relations.

Q68: How can AUCCCO better serve you?

Keep being incredible and creating the space to learn from one another. I value AUCCCO personally and professionally. Amazing humans doing amazing things every day!
I would love to see more direct sharing of materials to do outreaches with. Having examples helps us generate our own content far more quickly. I have very much appreciated the email list for this and other purposes.
-Trainings on diversity and trauma-informed outreach -Support/ideas around collecting data through Titanium or other methods of data collection
post the material shared on the listserv, organized by topic
Ideas, templates for letters/emails/programs to inspire change related to social justice/mental health in upper administration/faculty.
I appreciate the continued discussions on the listserv
I am new to the role and not yet a member (will join in June), so do not yet know! Looking forward to joining!
support, trainings
Continued growth in ideas of outreaches and ways to develop better programming.
continue the mentorship program
We need more information about joining and the benefits of joining AUCCCO.
not sure, I'm burnt out
Have a centrally updated database of outreach related resources (forms, ppt, assessments, content, etc.)
AUCCCO is an incredible resource and we are thrilled to be members.
AUCCCO can just keep doing what it's been doing because it's incredibly helpful, supportive, and informative.
Provide more information on guidelines, examples of programs implemented - making the website more resourceful so non members would want to join so they can have access to all the resources.
Addressing internal burnout due to so much social justice programming.
See 66
providing more readings regarding outreach
Next in person conference in an amazingly cool place. Can't wait!
Share resources.
Continue to be a space to share ideas and support each other.
An expanded resource bank with presentation examples would be helpful.
Before receiving AUCCCD email about this, I never heard of AUCCCO
This form was really hard to fill out, because we don't have an outreach coordinator or an active outreach program. We promoted one of our counselors to the newly created position of

Assistant Director, and one of her responsibilities is to coordinate outreach, but she only started February 1.
More support for building an effective outreach culture and building trust from both CaPS staff as well as campus community as a white outreach coordinator. Strategies for advocating for mental health outreach to stay within CaPS vs. outsources to Health Promotion. Strategies for more effectively assessing outreach efforts. I know I would benefit from more 1:1 mentorship from an experienced Outreach Director/Leader.