

# The One Thing Parents Should (But Often Don't) Consider Before Sending Their Kids To College

Back to school is a big business. Parents invest a considerable amount of money and time into preparing their children for college. They want them to have the supplies, clothes and dorm accessories that will help them start the school year off right.

As a parent of young teenagers, I too get caught up in the superficial aspects of education. But when it comes to preparing a child for college, those things are just the tip of the iceberg. The truth is that when we focus on whether someone has the college-ready "look," we put their future at potential risk.

It's incredibly important for a college-bound child to be able to identify their own goals and map out what success means for them – which makes them more likely to achieve it and feel deeper satisfaction while doing so. But it's equally important for them to have the tools to be able to communicate and identify when they are struggling on their path to success.

I know this because I have worked as a licensed professional counselor for 22 years, nine of which I've spent working at university counseling centers in New Jersey.

In the rush to prepare children physically for college, parents overlook the importance of mental health. Parents should become acquainted with the free services offered on campus and check out the mental health and local emergency providers in their child's new community.

I realize these critically important services do not have marketing campaigns or pushy PR people behind them the way stores pushing back-to-school sales do. And, unfortunately, mental health isn't something our culture really wants discuss. But we need to, in order to help our children transition as seamlessly as possible to their new lives.

Some kids are unprepared for the independence and isolation of their first year away. It can be a lonely and high pressure time where kids are overwhelmed with anxiety and insecurity. Students might not have developed time management and organizational skills, worsening already-heavy expectations of achievement.

When I was hired for my job as a university counselor, I expected mostly to see kids who are upset about midterm grades and having fights with roommates – the “worried well” with some anxiety and adjustment disorders. However, I also knew [suicide on college campuses](#) is on the rise and, though prevention and education on the topic had also increased, as a mental health worker, I did not feel enough was being done.

That's where parents come in.

When I was in college, I had never heard of a college counseling center – and I certainly didn't know that, on a lot

of campuses, these services are free. Likewise, many students still don't know about where to go or who to reach out to if they are struggling. Often, they struggle in silence until it becomes a public safety concern or another student tries to get them help.

One counseling center I've worked in allows both walk-in and scheduled appointments. Crisis appointments always take priority and counselors are on call to cover those emergencies – even on weekends.

I've met students who come in with preexisting depression and anxiety. Worries about grades, professors, commutes, family, relationships, medical conditions, sexuality, gender and eating disorders are also fairly common. They may have started to display some concerning behaviors or thought processes before starting school, symptoms that are exacerbated by stressful circumstances.

Occasionally, I've encountered more extreme cases of emergency hospitalizations for suicidal ideation, self harming or presenting a danger to others.

It's important for parents to ask questions and normalize conversations about mental health. I hear a lot of people say, "It won't happen to my child." But the combination of new friends, insecurity, alcohol or drugs, stress, anxiety, disrupted sleep cycles, hormones and low impulse control means everyone's child is potentially at risk. "If it happens to you, here's what to do" is a better conversation to have. It helps your young adult feel empowered, know that you understand, and will help them to help others if they need to.

In my most recent position, I compiled a report using the counseling center's data. I learned that the peak time for emergency sessions was during September, October and November, when students were walking in because their anxiety was so severe they felt they could not function. In my sample, more males than females were seeking help, and the second-most-common reason for seeking an emergency session was for suicidal ideation. Most students who came in were able to bounce back and continue on their path, but there were some who struggled more because of the onset of larger mental health conditions.

Combing through the data revealed that there were gaps in subsequent care for students. The sheer number of students seeking help overwhelmed the staff. Some students didn't receive any follow up after coming in with serious concerns.

That's why having a plan for continued treatment is critical. Many students are referred to mental health counselors in the community or simply decline ongoing treatment. At the time of my report, the counseling center I worked at was just not able to keep up with everyone who needed help, so students who didn't seek continuing treatment fell off our radar.

And here, parental guidance can be especially helpful. Instead of assuming that everything is better after one session at the counseling center, I urge parents to ask questions and to reach out to their children – especially during the first few months of transition. Your child may continue to struggle in silence, not seeing the need to continue treatment.

Be sure to ask them not only about their experience at that first appointment but what their plan is going forward. If

parents can normalize seeking help and counseling, children may feel less hesitant to do it. (Plus, having students connected to counselors can offer parents some comfort knowing their child has someone else to talk to, seek guidance from, step in if there are concerns, and promote healthy decision-making – all while maintaining a student’s privacy.)

Unfortunately, there is a limit to the number of appointments a student can have each year at most university counseling centers. It’s great to know ahead of time how many sessions are offered so a student can choose the best way to use them.

I know it’s not fun to think about. But I can tell you that there are many mental health providers who have more time to consider new patients right now, before the school year ramps up. And it’s a worthwhile investment in your child’s wellness and success to add to that to your back-to-school list.

*If you or someone you know needs help, call 1-800-273-8255 for the [National Suicide Prevention Lifeline](#) . You can also text HOME to 741-741 for free, 24-hour support from the [Crisis Text Line](#) . Outside of the U.S., please visit the [International Association for Suicide Prevention](#) for a database of resources.*

(Source: Huffpost)

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