

# Psychiatric counseling available at A&M

By **CONNIE BURKE**  
University officials are recognizing students' need for on-campus psychiatric care.

"Unfortunately, the old saying that Aggies don't have psychiatric problems is wrong," said Dr. Claude Goswick Jr., director of the University Health Center. "It is ridiculous to assume that out of 30,000 students, no one is going to need psychiatric counseling."

"The idea that A&M is a hick school without the stress other universities have is untrue. A&M students have stress just like other university students."

Goswick hired Dr. Robert Potts as a part-time psychiatrist in September 1976. When he was looking for someone to work at the health center, Potts was the only psychiatrist available in the College Station-Bryan area, Goswick said.

Potts is a former Texas A&M University student. Goswick said he thinks one reason Potts agreed to spend time away from his practice in Bryan and work for lower pay is due to his loyalty to fellow Aggies.

Potts is paid as a consultant by the University and spends six hours a week at the health center. His counseling sessions with students are limited to half an hour so that he can see as many students as possible. Before a student can make an appointment with Potts, a counselor at the Personal Counseling Service or a physician at the health center must refer the student to him.

These procedures allow Potts' time to be used efficiently, yet he still can't see all the students who require psychiatric treatment.

Dr. Wade Birch, director of the Personal Counseling Service said that a psychiatrist is needed at the

University to evaluate a student's problem and determine whether he should continue school; to prescribe medication for emotional problems; to handle emergency situations; and to counsel students on a short-term basis. He is not responsible for long-term counseling, Birch said.

If the student needs more help, then the psychiatrist should refer the student to someone else, he said. After the psychiatrist's evaluation, the student will return to the PCS to continue regular counseling.

Ten percent of the students who seek care from PCS need to see a psychiatrist. These students may be losing touch with reality, encountering severe depression or contemplating suicide. Two to three situations arise every week which require the attention of a psychiatrist. These students are scheduled to see Potts on a weekly basis, but every week additional students keep coming in, Birch said.

"Our major problem is that more psychiatric care for students is needed," Birch explained. "With only six hours of counseling time a week, it's hard for Potts to provide all these students with psychiatric care."

"Also, if we have a crisis during the night, a full-time psychiatrist would immediately be available to help the student. Right now the student has to wait until the next time Potts come to the health center, unless he is able to come that night. In the meantime, a psychologist would care for the student."

The major difference between a psychologist and a psychiatrist is that a psychiatrist is a physician. In an emergency, the psychologist would have to call a physician to diagnose the student and prescribe

a sedative or the proper medication needed. This could be avoided if the center had a full-time psychiatrist.

"There is a need for a full-time psychiatrist because of the large number of emotionally sick students," Goswick said. "Dr. Potts' appointments are full and there are more students who need care than he can handle. Right now the maximum time he can spend with a student is half an hour, and the minimum time most psychiatrists spend with their patients is half an hour."

The PCS opened in September 1974 and started with three psy-

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chologists. Now the center has six psychologists and three interns.

"At one time, we had 57 students on the waiting list. So this semester we started the In-Take Interview which has shortened students waiting time to see a counselor," Birch said. Under this system, when a student calls for an appointment he will be able to see a counselor within the next day for half an hour, he said.

When the center first opened it was swamped with students and still is, said Birch and Goswick. They agree that the 10 percent of counsel-

ing center patients who need psychiatric care are enough to warrant a full-time psychiatrist.

"The only way we could pay a full-time psychiatrist is if we use some of the money in our reserve account," Goswick said. "I have not considered anyone for the position. There are other things that the center needs, so it is a matter of priority. There are many more students who come into the center with neurological and orthopedic problems. We are still in the talking stage about whether to hire a full-time psychiatrist."

Goswick said he plans to ask for funding for the psychiatrist.

"The reason why there hasn't been a psychiatrist until last year is because we were in need of physicians," said Goswick. "Now that we have hired them, we can consider hiring a full-time psychiatrist."

"In the past, many psychiatric problems were not recognized. Many students were dropping out of school because they were having emotional difficulties, not because they were having problems academically."

Ron Blatchley, associate director of student affairs is responsible for informing a student when Goswick has recommended he withdraw from school because of emotion problems. Blatchley said that within four semesters, fewer than 10 students withdrew from school under Goswick's recommendation.

"This is not a representative number of students who withdraw because of emotional problems,"

Blatchley said. "It is hard to determine how many students drop from school because many students write 'personal reasons' on their withdrawal slips."

"This could mean that the student was having financial difficulties or that a family crisis had occurred. A variety of other things could have happened that caused the student to withdraw."

"Also, some students just take off without ever seeing a counselor."

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Bob Sheldon has joined Kirkpatrick Real Estate Company as a sales associate. He has been licensed to sell real estate since 1972. He was previously associated with Vogt Realty, Weimar, Texas and Joed Anderson Realtor, Rusk, Texas.

Bob has specialized in residential and investment properties. He has been interested in remodeling and renovation, heading Casa Verde, Inc., a remodeling firm in Houston in 1966-68. He has also worked extensively with farm and ranch properties. He was president of Dubina Farm Service, Inc., a custom farming operation in Weimar in 1968-74.

Sheldon recently retired from the Texas Department of Corrections. He was employed for 15 years by the State of Texas, also serving in the Texas Department of Mental Health and Mental Retardation. He is a member of numerous medical groups and has received several medical awards for outstanding achievement.

Sheldon is a native of Silsbee, Texas and graduated from Beaumont High School in 1941. He was employed by Security State Bank and Trust Company in Beaumont from 1941-1948. He received a bachelor of arts degree from the University of Texas in 1950. He graduated as a doctor of medicine from Southwestern Medical School of the University of Texas, Dallas, 1954. Internship and residency were served at Veterans Administration Hospital and Baylor University College of Medicine; Houston, Texas in 1954-55 and 1961-64.

Bob is a veteran of World War II, serving in the Army Air Force as a medical sergeant major. He has held commissions in the United States Public Health Service and the United States Naval Reserve. At present, he is a Lieutenant Colonel in the Texas Army National Guard.

Bob and his wife, LaVelle, a registered nurse, have four children, all A&M students, Susan, Martha, George, and Patti.

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