

Date of Hearing: June 27, 2023

ASSEMBLY COMMITTEE ON HIGHER EDUCATION
Mike Fong, Chair
SB 11 (Menjivar) – As Amended May 18, 2023

[Note: This bill is doubled referred to the Assembly Committee on Health and will be heard by that Committee as it relates to issues under its jurisdiction.]

SENATE VOTE: 40-0

SUBJECT: California State University: mental health counseling

SUMMARY: Requires California State University (CSU) campuses to have one full-time equivalent mental health counselor per 1,500 students. This bill further requires the Department of Health Care Access and information to administer a noncompetitive grant program to provide qualifying students with grants. Specifically, **this bill:**

- 1) Requires CSU trustees to have one full-time equivalent mental health counselor per 1,500 students enrolled at each CSU campus to the fullest extent consistent with state and federal law. Requires this counselor ratio to constitute the minimum number of mental health counselors to be hired on a campus based on the campus student population, as specified.
- 2) Requires, where possible, mental health counselors to be full-time staff and reflect the diversity of the student body.
- 3) Requires the trustees, on or before January 1, 2025, and every three years thereafter, to report to the Legislature on how funding was spent, the number of mental health counselors employed on each CSU campus, and student wait times for mental health counseling appointments.
- 4) Requires each CSU campus, on or before November 1, 2024, and every three years thereafter, to conduct a campus survey and focus groups, as specified, to understand student needs and challenges about their mental health and emotional well-being, sense of belonging on campus, and academic success.
- 5) Requires specified data collected to be included in the reports, consistent with confidentiality laws, to the Legislature, including attempted suicides through self-reporting, mental health counselor records, and known hospitalizations.
- 6) Requires the Department of Health Care Access and information to administer a noncompetitive grant program to provide qualifying students with grants and specifies that:
 - a) A qualifying student apply directly to the Department of Health Care Access and Information to receive a grant.
 - b) A qualifying student before receiving a grant, agree to complete in California the supervised clinical training hours required to obtain licensure.

- c) The CSU prioritize hiring, as mental health counselors, grant recipients who obtain licensure.
- 7) Establishes the Mental Health Professionals Funds as the depository of moneys appropriated or otherwise receive for the program and requires that the Department of Health Care Access and Information disburse moneys in the fund as prescribed in the bill.
- 8) Makes legislative findings and declarations about historically marginalized or underrepresented students, rates of suicide and students with mental illness who do not seek treatment, the CSU system's understaffing of mental health counselors, and the need for investing in a pipeline that improves graduation rates and helps solve the mental health counselor workforce shortage.

EXISTING LAW:

- 1) Establishes the CSU, under the administration of the Trustees of the California State University, as one of the public postsecondary educational institutions in the state. (Education Code Section 66602)
- 2) Establishes the Mental Health Services Act (MHSA), enacted by voters in 2004 as Proposition 63, to provide funds to counties to expand services, develop innovative programs, and integrated service plans for mentally ill children, adults, and seniors through a one percent income tax on personal income above \$1 million. (Welfare and Institutions Code Section 5890, et seq.)

FISCAL EFFECT: According to the Senate Committee on Appropriations:

- 1) The CSU indicates that this bill's requirement for CSU to have one full-time mental health counselor for every 1,500 students could result in General Fund costs of a minimum of \$8 million each year. This estimate assumes that 57 counselors would be needed to achieve the ratio on each campus at an average cost of \$139,000 per counselor.
- 2) This bill establishes the Mental Health Professionals Fund, contingent upon an appropriation, for purposes of providing grants to students to become mental health counselors in the state. This could result in General Fund cost pressure in the millions to low tens of millions of dollars, and additional ongoing General Fund costs in the hundreds of thousands of dollars for the Department of Health Care Access and Information to administer the grant program.

COMMENTS: *Purpose.* According to the author, "the student mental health crisis has only gotten more urgent in the last few years, as college aged youth are reporting higher rates of depression and anxiety. The [CSU] is also experiencing a severe shortage of qualified, full time mental health professionals available to students on campus – the current ratio of counselors to students is one to nearly 2,000. Students deserve culturally competent, timely access to care from providers on campus. SB 11 takes several steps toward addressing this crisis – it will instruct the CSU to decrease the ratio of counselors to students, increase data collection about student mental health on campuses, and incentivize CSU students to become mental health counselors in the state."

Counselor-to student ratio. The total systemwide student population at the CSU is approximately 479,000. The CSU reports that, over the past four years, they have reduced their average

systemwide ratio of counselors to students from 1 to 2,176 to its current number of 1 to 1,576. 12 of the 23 campuses currently fall below the recommended ratio of 1 to 1,500 with CSU Maritime having one counselor for every 324 students, Cal Poly Humboldt having one counselor for every 651 students, and CSU Northridge having one counselor for every 472 students.

This bill requires the CSU to have one mental health counselor for every 1,500 students.

Center for Collegiate Mental Health (CCMH). The 2020 CCMH Annual Report, released in January 2021, summarizes the state of college student mental health from U.S. and international college counseling centers during the 2019-20 academic year. In addition, the report describes a revised Clinical Load Index (CLI), which was first introduced in the 2019 Annual Report, to better measure and compare staff levels and related impacts across counseling centers nationally. The CLI was designed to provide a more accurate and consistently comparable metric that describes the landscape of staffing levels associated with particular clinical outcomes (i.e. treatment dosages and distress change). The key takeaway from the new CLI distribution is that clinician caseloads impact treatment access as when clinicians have a smaller caseload, students have better access to treatment.

Findings demonstrated that counseling centers with low CLI scores are more likely to be smaller institutions. Students at these institutions are more likely to receive appointments that are scheduled closer together and experience more symptom reduction during treatments. Centers on the high end of the CLI score are much more likely to focus on rapid access or crisis services and, in general, centers in this zone are managing very high demand that consistently exceeds supply and are more likely to provide a range of services, other than counseling, for students. These centers often implement a variety of practices, such as requiring clinicians to offer a specific number of rapid access service hours per week, charging missed appointment fees, and holding workshops as an alternative to individual counseling. These findings can fundamentally alter the way colleges and universities understand and plan for mental health services through the careful and transparent alignment of service goals, clinical practices, and funding. As a result, the CLI helps shift the question that institutions should be asking from, “How many staff should we have?” to “What services do we want to provide to our students?” The report describes 185,440 unique college students, nationally and internationally, seeking mental health treatment; 3,890 clinicians; and more than 1,395,685 appointments from the 2019-20 academic year.

Wait times. The CSU reports that, after hearing back from 16 of their campuses, all campuses reserve time each day for walk-in appointments with students who identify as being in crisis/needing to be seen by a counselor that day. Additionally, a student identifying in this way will be set up with ongoing appointments to ensure their needs are met going forward. For students not identifying as being in crisis but desiring to start ongoing one-on-one counseling, eight campuses state that they will be set up with their first session within one week; two campuses stated one to two weeks; five campuses stated within two weeks; and one campus stated that at the beginning of the semester they can schedule sessions within two to three days but at the busiest times (midterms and finals season), it may take up to three weeks to schedule a students’ first session if they are not identifying as being in crisis.

Committee Staff notes that, even with the ratio stipulated in SB 11 (Menjivar), it is unlikely that there will ever be a period where there is perpetually no wait time. CSU noted that counseling services demand tends to surge during testing weeks like midterms and final exams.

Budget action. The Budget Act of 2021 included ongoing appropriations to the CSU of \$15 million to increase student mental health resources. The funds were used to provide and develop a variety of services, such as psychiatric services, professional development, support of professional staffing, mental health programming, and center operating expenses. The funding was divided among 23 campuses.

Committee Staff notes that, while the 2023-24 Budget Act does include additional funding for the Graduation Initiative 2025 and a general 5% increase, there is not funding specifically set aside to address the approximately \$8 million cost created by this bill.

Arguments in support. The National Association of Social Workers – California Chapter writes that, “the CSU system suffers from understaffed mental health counselors. Some campuses have wait times of 4 to 8 weeks. This leads to outside contracting, with poor oversight leading to inadequate care. CSU students deserve competent, trauma-informed mental health counselors with a standard of care who truly know the students and the CSU environment. The need for mental health services has increased since the pandemic began. Suicide is the second leading cause of death among college students. Mental health counseling addresses this and more, such as improved academic performance and lower dropout rates.”

“Before receiving a grant, a qualifying student shall agree to complete in California the supervised clinical training hours required to obtain licensure under the Board of Psychology or the Board of Behavioral Sciences which licenses Licensed Clinical Social Workers as well as other mental health professionals. The [CSU] shall prioritize hiring, as mental health counselors, grant recipients who obtain licensure. These grants will help students, many low-income and from BIPOC communities, stay in school and obtain their degrees. Social work students who want to become Licensed Clinical Social Workers must obtain their master's in social work which requires internship hours from 900 to 1200 hours to complete their degree. These are usually unpaid. These students often support their families, go to school, hold an outside job, and provide free internship hours. This bill will help them stay in school and contribute to the behavioral health workforce.”

Arguments in opposition. The CSU Chancellor’s Office wrote that they oppose SB 11 (Menjivar) unless it is amended, noting that “the CSU has made significant investments in hiring additional counseling staff, offering educational programming to help end the stigma of seeking help, and establishing creative partnerships to ensure that students can get help when and where they need it. Over the past four years, despite budget constraints created by the COVID-19 pandemic, the CSU has increased the systemwide ratio of counselors to students from 1 to 2,176 in 2019 to 1 to 1,576 today. Every campus ensures that students in crisis can be seen on the same day by a counselor, assessed, and set up with ongoing appointments.”

“We ask that the ratio requirement of one counselor per 1,500 students be removed for three reasons: it undermines the authority of our CSU Board of Trustees to set policy for our campuses; it does not include an appropriation from the state to allow for this more than \$8 million ongoing investment in increased staffing; and it relies on an outdated service model that is no longer supported by the national counselors’ organization that previously recommended it. The Association for University and College Counseling Center Directors released a position paper earlier this month calling for a new clinical services model for college campuses: the ‘clinical load index,’ rather than a ratio, which would take into account the rate of utilization by

students and the severity of their needs to determine the most appropriate staffing level for each campus.”

Related and prior legislation. SB 551 (Portantino, 2023) would require each county use at least 20% of the MHSA’s prevention and early intervention funds to provide direct services on school campuses in collaboration with local educational agencies. SB 551 (Portantino) is pending in the Assembly Committee on Appropriation. .

SB 968 (Pan, 2018) similar to this bill in part, would have required the CSU Board of Trustees and request the Regents of the University of California to have one full-time equivalent mental health counselor per 1,500 students enrolled at each of their respective campuses. SB 968 was vetoed by Governor Brown, whose message read, in pertinent part:

“Investing greater resources in student mental health is an understandable goal. Such investments, however, should be actively considered and made within the budget process. Moreover, specific ratios should remain within the purview of the boards or with local campuses, rather than dictated by the state.”

REGISTERED SUPPORT / OPPOSITION:

Support

California Faculty Association
California State Council of Service Employees International Union (SEIU California)
California State University Employees Union (CSUEU)
California Youth Empowerment Network
DBSA California
Faculty Association of California Community Colleges
Mental Health America of California
National Association of Social Workers, California Chapter
Payments for Placements, San Diego State University

Opposition

California State University, Office of The Chancellor

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