

108TH CONGRESS
1ST SESSION

H. R. 3593

To amend the Higher Education Act of 1965 to provide funds for campus
mental and behavioral health service centers.

IN THE HOUSE OF REPRESENTATIVES

NOVEMBER 21, 2003

Mr. DAVIS of Illinois (for himself and Mr. OSBORNE) introduced the following
bill; which was referred to the Committee on Education and the Workforce

A BILL

To amend the Higher Education Act of 1965 to provide
funds for campus mental and behavioral health service
centers.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Campus Care and
5 Counseling Act”.

6 **SEC. 2. FINDINGS.**

7 The Congress finds the following:

8 (1) In a recent report, a startling 85 percent of
9 college counseling centers revealed an increase in the
10 number of students they see with psychological prob-

1 lems. Furthermore, the American College Health As-
2 sociation found that 61 percent of college students
3 reported feeling hopeless, 45 percent said they felt
4 so depressed they could barely function, and 9 per-
5 cent felt suicidal.

6 (2) There is clear evidence of an increased inci-
7 dence of depression among college students. Accord-
8 ing to a survey described in the Chronicle of Higher
9 Education (February 1, 2002), depression among
10 freshmen has nearly doubled (from 8.2 percent to
11 16.3 percent). Without treatment, researchers re-
12 cently noted that “depressed adolescents are at risk
13 for school failure, social isolation, promiscuity, self
14 medication with drugs and alcohol, and suicide—now
15 the third leading cause of death among 10–24 year
16 olds.”

17 (3) Researchers who conducted the study
18 “Changes in Counseling Center Client Problems
19 Across 13 Years” (1989–2001) at Kansas State
20 University stated that “students are experiencing
21 more stress, more anxiety, more depression than
22 they were a decade ago.” (The Chronicle of Higher
23 Education, February 14, 2003).

24 (4) According to a 1999 UCLA study, more
25 than 30 percent of college freshmen reported feeling

1 overwhelmed a great deal of the time during the be-
2 ginning of college and may benefit from psycho-
3 logical services.

4 (5) According to the 2001 National Household
5 Survey on Drug Abuse, the highest prevalence of
6 both binge and heavy drinking was found in young
7 adults ages 18 to 25 (especially on college cam-
8 puses). In addition, the results of a Harvard School
9 of Public Health College Alcohol Study Survey print-
10 ed in the Journal of American Health show that
11 44.4 percent of college students describe themselves
12 as binge drinkers.

13 (6) The National Institute of Alcohol Abuse
14 and Alcoholism in 2002 reported that 1400 college
15 students die each year from alcohol-related injuries.
16 In addition, it is stated that college students who
17 drink are more likely to assault, sexually abuse, and
18 vandalize others. Furthermore, it is reported that 25
19 percent of college students attribute academic prob-
20 lems to excessive drinking.

21 (7) According to the 2001 National Household
22 Survey on Drug Abuse, 20 percent of full-time un-
23 dergraduate college students use illicit drugs.

24 (8) The 2001 National Household Survey on
25 Drug Abuse also reported that 18.4 percent of

1 adults aged 18 to 24 are dependent on or abusing
2 illicit drugs or alcohol. In addition, the study found
3 that “serious mental illness is highly correlated with
4 substance dependence or abuse. Among adults with
5 serious mental illness in 2001, 20.3 percent were de-
6 pendent on or abused alcohol or illicit drugs, while
7 the rate among adults without serious mental illness
8 was only 6.3 percent.”

9 (9) In 2001, there were 249,000 victims of rape
10 in the United States, according to statistics from the
11 Rape, Abuse and Incest National Network. 36 per-
12 cent of victims of rape and sexual assault are be-
13 tween the ages of 18 and 30.

14 (10) The National Victim’s Center in 2001 re-
15 ported that 13.3 percent of college women say they
16 have been forced to have sex in a dating situation.

17 (11) According to the National Eating Dis-
18 orders Association, 5–10 million women and 1 mil-
19 lion men struggle with eating disorders including
20 anorexia, bulimia, binge eating disorder, or border-
21 line conditions after puberty.

1 **SEC. 3. MENTAL AND BEHAVIORAL HEALTH SERVICES ON**
2 **CAMPUS.**

3 Part B of title I of the Higher Education Act of 1965
4 is amended by inserting after section 120 (20 U.S.C.
5 1011i) the following new section:

6 **“SEC. 120A. MENTAL AND BEHAVIORAL HEALTH SERVICES**
7 **ON CAMPUS.**

8 “(a) PURPOSE.—It is the purpose of this section to
9 increase access to, and enhance the range of, mental and
10 behavioral health services for students at centers on cam-
11 pus that provide such services so as to ensure that college
12 students have the support necessary to successfully com-
13 plete their studies.

14 “(b) PROGRAM AUTHORIZED.—From the funds ap-
15 propriated under subsection (g), the Secretary shall award
16 competitive grants to centers on campus that provide men-
17 tal and behavioral health services to students to provide
18 such services and develop best practices for the delivery
19 of such services. Such grants shall, subject to the avail-
20 ability of such appropriations, be for a period of 3 years.

21 “(c) ELIGIBLE ENTITIES.—Any mental health serv-
22 ice center located on the campus of an institution of higher
23 education that provides mental and behavioral health serv-
24 ices to students is eligible to apply for a grant under this
25 section. Eligible entities may include entities such as col-
26 lege counseling centers; college and university psycho-

1 logical service centers; mental health units; and psychology
2 training clinics.

3 “(d) APPLICATIONS.—Each eligible entity seeking to
4 obtain a grant under this section shall submit an applica-
5 tion to the Secretary. Each such application shall in-
6 clude—

7 “(1) an outline of program objectives and an-
8 ticipated program outcomes;

9 “(2) outreach strategies (including ways in
10 which the applicant proposes to reach students, pro-
11 mote access to services, and address the range of
12 needs of university students);

13 “(3) a proposed plan for reaching those stu-
14 dents most in need of the center’s services;

15 “(4) a program evaluation plan to assess pro-
16 gram outcomes; and

17 “(5) such additional information as is required
18 by the Secretary.

19 “(e) USE OF FUNDS.—Funds provided by a grant
20 under this section may be used for one or more of the
21 following activities:

22 “(1) Intervention program for developmental,
23 transitional, and adjustment issues that affect stu-
24 dents as they matriculate and graduate from college.

1 “(2) Addressing issues related to binge and
2 heavy alcohol consumption and the associated behav-
3 ioral health risks.

4 “(3) Providing services for students with men-
5 tal and behavioral health problems that impede aca-
6 demic performance (such as test anxiety).

7 “(4) Self-management skills (for behavioral and
8 emotional self regulation).

9 “(5) Management of chronic mental illness.

10 “(6) Assessment and intervention for depressive
11 disorders, and suicidal and self-harm behaviors.

12 “(7) Assessment and treatment of anxiety dis-
13 orders.

14 “(8) Prevention programs for depression, anx-
15 iety, suicide, and domestic violence.

16 “(9) Assessment, treatment, and education for
17 eating disorders.

18 “(10) Treatment of sexual trauma.

19 “(11) Psychological education for parents of
20 college students.

21 “(12) Hire appropriately trained staff.

22 “(13) Strengthen and expand psychology doc-
23 toral internship and postdoctoral residency programs
24 and opportunities.

1 “(14) Supporting the use of evidence-based and
2 emerging best practices and evaluate outcomes in
3 centers on campus that provide mental and behav-
4 ioral health services so as to provide information and
5 training to other centers around the nation.

6 “(f) ADDITIONAL REQUIRED ELEMENTS.—Each eli-
7 gible entity that receives a grant under this section shall—

8 “(1) provide annual reports to the Secretary de-
9 scribing the use of funds, the program’s objectives,
10 and how the objectives were met (description of pro-
11 gram outcomes);

12 “(2) perform such additional evaluation as the
13 Secretary may require, which may include measures
14 such as increase in range of services provided; in-
15 crease in the quality of services provided; increase in
16 access to services; college continuation rates; de-
17 crease in college dropout rates; increase in college
18 graduation rates; and

19 “(3) shall coordinate its program under this
20 section with other related efforts on campus by enti-
21 ties concerned with the mental, health, and behav-
22 ioral health needs of students.

23 “(g) AUTHORIZATION OF APPROPRIATIONS.—There
24 are authorized to be appropriated for grants under this
25 section \$10,000,000 for fiscal year 2005 and such sums

1 as may be necessary for each of the 4 succeeding fiscal
2 years.”.

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