

108TH CONGRESS
2D SESSION

S. 2215

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

IN THE SENATE OF THE UNITED STATES

MARCH 12, 2004

Mr. REED (for himself, Mr. DEWINE, Mrs. CLINTON, and Mr. SMITH) intro-
duced the following bill; which was read twice and referred to the Com-
mittee on Health, Education, Labor, and Pensions

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 Congress finds the following:

8 (1) In a recent report, a startling 85 percent of
9 college counseling centers revealed an increase in the

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

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

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

1 (4) According to the 2001 National Household
2 Survey on Drug Abuse, 20 percent of full-time un-
3 dergraduate college students use illicit drugs.

4 (5) The 2001 National Household Survey on
5 Drug Abuse also reported that 18.4 percent of
6 adults aged 18 to 24 are dependent on or abusing
7 illicit drugs or alcohol. In addition, the study found
8 that “serious mental illness is highly correlated with
9 substance dependence or abuse. Among adults with
10 serious mental illness in 2001, 20.3 percent were de-
11 pendent on or abused alcohol or illicit drugs, while
12 the rate among adults without serious mental illness
13 was only 6.3 percent.”.

14 (6) A 2003 Gallagher’s Survey of Counseling
15 Center Directors found that 81 percent were con-
16 cerned about the increasing number of students with
17 more serious psychological problems, 67 percent re-
18 ported a need for more psychiatric services, and 63
19 percent reported problems with growing demand for
20 services without an appropriate increase in re-
21 sources.

22 (7) The International Association of Counseling
23 Services accreditation standards recommend 1 coun-
24 selor per 1,000 to 1,500 students. According to the
25 2003 Gallagher’s Survey of Counseling Center Di-

1 rectors, the ratio of counselors to students is as high
2 as 1 counselor per 2,400 students at institutions of
3 higher education with more than 15,000 students.

4 **SEC. 3. MENTAL AND BEHAVIORAL HEALTH SERVICES ON**
5 **CAMPUS.**

6 Part B of title I of the Higher Education Act of 1965
7 (20 U.S.C. 1011 et seq.) is amended by inserting after
8 section 120 the following:

9 **“SEC. 120A. MENTAL AND BEHAVIORAL HEALTH SERVICES**
10 **ON CAMPUS.**

11 “(a) PURPOSE.—It is the purpose of this section to
12 increase access to, and enhance the range of, mental and
13 behavioral health services for students so as to ensure that
14 college students have the support necessary to successfully
15 complete their studies.

16 “(b) PROGRAM AUTHORIZED.—From funds appro-
17 priated under subsection (j), the Secretary shall award
18 competitive grants to institutions of higher education to
19 create or expand mental and behavioral health services to
20 students at such institutions, to provide such services, and
21 to develop best practices for the delivery of such services.
22 Such grants shall, subject to the availability of such appro-
23 priations, be for a period of 3 years.

24 “(c) ELIGIBLE GRANT RECIPIENTS.—Any institution
25 of higher education that seeks to provide, or provides,

1 mental and behavioral health services to students is eligi-
2 ble to apply, on behalf of such institution's treatment pro-
3 vider, for a grant under this section. Treatment providers
4 may include entities such as—

5 “(1) college counseling centers;

6 “(2) college and university psychological service
7 centers;

8 “(3) mental health centers;

9 “(4) psychology training clinics;

10 “(5) institution of higher education supported,
11 evidence-based, mental health and substance abuse
12 screening programs; and

13 “(6) any other entity that provides mental and
14 behavioral health services to students at an institu-
15 tion of higher education.

16 “(d) APPLICATIONS.—Each institution of higher edu-
17 cation seeking to obtain a grant under this section shall
18 submit an application to the Secretary. Each such applica-
19 tion shall include—

20 “(1) a description of identified mental and be-
21 havioral health needs of students at the institution
22 of higher education;

23 “(2) a description of currently available Fed-
24 eral, State, local, private, and institutional resources

1 to address the needs described in paragraph (1) at
2 the institution of higher education;

3 “(3) an outline of program objectives and an-
4 ticipated program outcomes, including an expla-
5 nation of how the treatment provider at the institu-
6 tion of higher education will coordinate activities
7 under this section with existing programs and serv-
8 ices;

9 “(4) the anticipated impact of funds provided
10 under this section in improving the mental and be-
11 havioral health of students attending the institution
12 of higher education;

13 “(5) outreach strategies, including ways in
14 which the treatment provider at the institution of
15 higher education proposes to reach students, pro-
16 mote access to services, and address the range of
17 needs of students;

18 “(6) a proposed plan for reaching those stu-
19 dents most in need of services;

20 “(7) a plan to evaluate program outcomes and
21 assess the services provided with funds under this
22 section; and

23 “(8) such additional information as is required
24 by the Secretary.

25 “(e) PEER REVIEW OF APPLICATIONS.—

1 “(1) PANEL.—The Secretary shall provide the
 2 applications submitted under this section to a peer
 3 review panel for evaluation. With respect to each ap-
 4 plication, the peer review panel shall recommend the
 5 application for funding or for disapproval.

6 “(2) COMPOSITION OF PANEL.—

7 “(A) IN GENERAL.—The peer review panel
 8 shall be composed of—

9 “(i) experts who are competent, by
 10 virtue of their training, expertise, or expe-
 11 rience, to evaluate applications for grants
 12 under this section; and

13 “(ii) mental and behavioral health
 14 professionals and higher education profes-
 15 sionals.

16 “(B) NON-FEDERAL GOVERNMENT EM-
 17 PLOYEES.—A majority of the members of the
 18 peer review panel shall be individuals who are
 19 not employees of the Federal Government.

20 “(3) EVALUATION AND PRIORITY.—The peer
 21 review panel shall—

22 “(A) evaluate the applicant’s proposal to
 23 improve current and future mental and behav-
 24 ioral health at the institution of higher edu-
 25 cation; and

1 “(B) give priority in recommending appli-
2 cations for funding to proposals that—

3 “(i) provide direct service to students,
4 as described in subsection (f)(1);

5 “(ii) improve the mental and behav-
6 ioral health of students at institutions of
7 higher education with a counselor to stu-
8 dent ratio greater than 1 to 1,500; or

9 “(iii) will best serve students based on
10 the projected impact of the proposal on
11 mental and behavioral health at the insti-
12 tution of higher education as well as the
13 level of coordination of other resources to
14 aid in the improvement of mental and be-
15 havioral health.

16 “(f) USE OF FUNDS.—Funds provided by a grant
17 under this section may be used for 1 or more of the fol-
18 lowing activities:

19 “(1) Prevention, screening, early intervention,
20 assessment, treatment, management, and education
21 of mental and behavioral health problems of stu-
22 dents enrolled at the institution of higher education.

23 “(2) Education of families to increase aware-
24 ness of potential mental and behavioral health issues

1 of students enrolled at the institution of higher edu-
2 cation.

3 “(3) Hiring appropriately trained staff, includ-
4 ing administrative staff.

5 “(4) Strengthening and expanding mental and
6 behavioral health training opportunities in internship
7 and residency programs, such as psychology doctoral
8 and post-doctoral training.

9 “(5) Supporting the use of evidence-based and
10 emerging best practices.

11 “(6) Evaluating and disseminating outcomes of
12 mental and behavioral health services so as to pro-
13 vide information and training to other mental and
14 behavioral health entities around the Nation that
15 serve students enrolled in institutions of higher edu-
16 cation.

17 “(g) ADDITIONAL REQUIRED ELEMENTS.—Each in-
18 stitution of higher education that receives a grant under
19 this section shall—

20 “(1) provide annual reports to the Secretary de-
21 scribing the use of funds, the program’s objectives,
22 and how the objectives were met, including a de-
23 scription of program outcomes;

1 “(2) perform such additional evaluation as the
 2 Secretary may require, which may include measures
 3 such as—

4 “(A) increase in range of services provided;

5 “(B) increase in the quality of services
 6 provided;

7 “(C) increase in access to services;

8 “(D) college continuation rates;

9 “(E) decrease in college dropout rates; and

10 “(F) increase in college graduation rates;

11 and

12 “(3) coordinate such institution’s program
 13 under this section with other related efforts on cam-
 14 pus by entities concerned with the mental, health,
 15 and behavioral health needs of students.

16 “(h) SUPPLEMENT NOT SUPPLANT.—Grant funds
 17 provided under this section shall be used to supplement,
 18 and not supplant, Federal and non-Federal funds available
 19 for carrying out the activities described in this section.

20 “(i) LIMITATIONS.—

21 “(1) PERCENTAGE LIMITATIONS.—Not more
 22 than—

23 “(A) 5 percent of grant funds received
 24 under this section shall be used for administra-
 25 tive costs; and

1 “(B) 20 percent of grant funds received
2 under this section shall be used for training
3 costs.

4 “(2) PROHIBITION ON USE FOR CONSTRUCTION
5 OR RENOVATION.—Grant funds received under this
6 section shall not be used for construction or renova-
7 tion of facilities or buildings.

8 “(j) AUTHORIZATION OF APPROPRIATIONS.—There
9 are authorized to be appropriated for grants under this
10 section \$10,000,000 for fiscal year 2005 and such sums
11 as may be necessary for each of the 4 succeeding fiscal
12 years.”.

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