



SB 5194

Community and Technical College Mental Health Counseling and Services Pilot

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Introduction

Approved by the Legislature in 2021, [SB 5194](#) created the Mental Health Counseling and Services Pilot Program to increase student access to mental health counseling and services. With funding provided in the 2021-23 biennial operating budget, the State Board for Community and Technical Colleges (SBCTC) funded pilot projects at four colleges: Grays Harbor College (Aberdeen), Lake Washington Institute of Technology (Kirkland), North Seattle College, and Wenatchee Valley College.

This report, a requirement under SB 5194, includes the following information from SBCTC and the pilot colleges:

- Information on which colleges were selected for the pilot program, how much grant funding was received per college, and what strategies each implemented to increase student access to mental health counseling and services.
- Demographic data of students accessing mental health counseling and services, including those students who are considered underrepresented or traditionally have limited access to mental health counseling and services.
- Whether the mental health counseling and services provided are meeting the demand of students in terms of type and availability, and whether the various types of mental health counseling and services are being provided by community providers versus on-campus services.
- Information and data on the effectiveness, including cost-effectiveness, of each strategy used to increase student access to mental health counseling and services, including substance use disorder counseling and services. Examples include the number of additional students served, reduced wait times for counseling appointments, or other data that reflects expanded access.
- Lessons learned and recommendations for improving student access to mental health counseling and services at community and technical colleges and to community providers, including whether there were any strategies implemented that proved more effective than others in increasing access.
- College definitions for key terms that must be posted on the college websites under SB 5194, including definitions for diversity, equity, inclusion, culturally competent, culturally appropriate, historically marginalized communities, communities of color, low-income communities, and community organizations.

Background on Postsecondary Student Mental Health

College students' mental health has been a national point of interest for the past two decades. The Healthy Minds Network (HMN), a research organization focused on adolescent and young adult mental health, has administered the Healthy Minds Study (HMS) to colleges around the county since 2008. Study results point to an alarming trend in the health and well-being of college students. Over 60% of post-secondary students in 2020-21 indicated challenges with one or more mental health problems, with multiracial and American Indian/Alaskan Native students experiencing the greatest prevalence.¹

¹ Sarah Ketchen Lipson, Sasha Zhou, Sara Abelson, Justin Heinze, Matthew Jirsa, Jasmine Morigney, Akilah Patterson, Meghna Singh, Daniel Eisenberg, Trends in college student mental health and help-seeking by race/ethnicity: Findings from the national healthy minds study, 2013–2021, *Journal of Affective Disorders*, Volume 306, 2022, pages 138-147

Academic performance, persistence, and college completion can be impacted by a variety of mental health concerns. Since the beginning of the COVID-19 pandemic, nearly 40% of students pursuing an associate degree indicated they considered taking a break from their studies. Of those students, nearly two-thirds identified emotional stress as the primary concern.² Over 50% of college students reported mental health concerns impacting their academic performance on more than one occasion.³ Despite the nearly 50% increase in mental health needs since 2013, nearly 60% of students seeking support shared it was harder to access services as a result of the pandemic.⁴

Legislative action in Washington state has contributed to knowledge and support for postsecondary mental health resources. In 2019, [SB 6514](#) awarded grants to eight higher education institutions to partner with health care entities in creating student suicide prevention programs. Also in 2019, [HB 1355](#) created a task force on counseling in community and technical colleges. Finally, this Mental Health Counseling & Services Pilot Program originated from [SB 5194](#) in 2021.

HB 1355: Task Force on Community and Technical College Counseling

Approved by the Legislature in 2019, HB 1355 created a task force on community and technical college counseling. The bill, as originally introduced, considered setting minimum standards for counselors and establishing a student-to-counselor ratio. However, through amendments, the final bill focused on examining issues related to minimum standards, staffing ratios, and best practices for community and technical college counselors rather than mandating specifics.

A Community and Technical College Counselors Task Force met through the first year of the 2020 COVID-19 pandemic and produced a report and recommendations to the Legislature in December 2020. The report identified an urgent need for increased counseling capacity at community and technical colleges and a wide variance on what is designated as counseling. Counselors in the community and technical college system are considered academic employees with faculty appointments. As such, they are represented in collective bargaining agreements and are eligible for tenure consideration. A 2017 survey of faculty counselors found there were 117 faculty counselors in the system, with duties ranging from personal counseling in academic and career related areas, instruction in human development courses, and, in some cases, mental health counseling.⁵

Task force subcommittees focused on:

- **Recommended minimum standards required for community and technical college counselors** –This subcommittee identified minimum requirements related to level of education, content of coursework, and practicum or internship experience. The recommendations acknowledged the need for flexibility in local hiring decisions and did not require mental health counseling licensure.
- **Recommended best practices** – This subcommittee examined practices for counseling services in the community and technical college system and how colleges are meeting the mental health needs of students. The subcommittee examined practices from a literature review, from the California

² <https://www.luminafoundation.org/news-and-views/stress-weighs-heavily-on-those-who-remain-in-college-a-new-gallup-lumina-study-finds/>

³ <https://www.luminafoundation.org/wp-content/uploads/2023/03/Stressed-Out-and-Stopping-Out.pdf>

⁴ https://healthymindsnetwork.org/wp-content/uploads/2020/07/Healthy_Minds_NCHA_COVID_Survey_Report_FINAL.pdf

⁵ https://app.leg.wa.gov/ReportsToTheLegislature/Home/GetPDF?fileName=HB1355%20Task%20Force%20on%20CTC%20Counselors%20Final%20Report_20ce2b14-8e14-46b1-b840-8395d29125e0.pdf

community college system, and from a Washington community and technical college system survey that identified emerging, promising, and excellent practices related to student counseling services.

- **An examination of counseling staffing ratios** – This subcommittee highlighted the complexity of counselor staffing in the community and technical college system given the variety of duties performed by counselors, only some of which included direct mental health counseling. Key findings included: only seven colleges achieved a student-to-counselor ratio below 900:1; staffing variance in the system peaked at over 4,000:1, with a system average of 2000:1; and an acknowledgement that, in most cases, colleges were at or beyond their capacity to meet student mental health needs.

SB 5194: Mental Health Counseling and Services Pilot Program

Based on the legislative report and recommendations by the Community and Technical College Counselors Task Force, the Legislature in 2021 included the Mental Health Counseling and Services Pilot Program in SB 5194. Now law, the legislation is complex and multifaceted, requiring a number of equity-focused measures in the community and technical college system. Section 6 required SBCTC, in collaboration with a selection committee, to choose community or technical colleges to participate in the pilot program. The legislation required at least half of the colleges to be located outside of the Puget Sound Area (defined as Snohomish, King, Pierce, and Thurston counties).

A selection committee comprised of a college president, a college vice president of student services, two faculty counselors, a college student, and SBCTC staff developed an application process and selection criteria. Twenty-five community and technical colleges submitted applications to be considered for the pilot program. Four colleges – Grays Harbor College, Lake Washington Institute of Technology, North Seattle College, and Wenatchee Valley College – were selected from the competitive applicant pool. While all applicants identified a strong need for additional counseling resources and services, those chosen for the pilot identified the greatest potential to adopt the best practice strategies as recommended by the task force.

The 2021-2023 operating budget provided \$512,000 per fiscal year for the pilot project. SBCTC allocated each of the four pilot colleges \$125,000 in July 2021 (fiscal year 2022) and another \$125,000 in July 2022 (fiscal year 2023).

Beginning in August 2021, the four colleges met monthly to center their work, share insights and lessons learned, and support each other in expanding mental health services for students. Early in the pilot, colleges identified broad metrics to assess progress and developed data collection methods that worked for each college. Colleges shared concerns around student privacy and data management as they navigated how to work with their institutional research departments to collect annual data. Colleges varied greatly in their access to data support and available data-collection tools. Grays Harbor College and Lake Washington Institute of Technology converted to ctcLink, the community and technical college system's enterprise resource system, the first year of the pilot, which limited their access to data.

Strategies adopted by each pilot program

The following strategies were specifically identified by the HB 1355 Community and Technical College Counselors Task Force and by SB 5194 as priority areas for the pilot program.

Table 1: Priority areas for the Mental Health Counseling and Services Pilot Program as identified by each pilot college

Strategy	Grays Harbor	LWTech	North Seattle	Wenatchee Valley
A) Improve equity, diversity, and inclusion of all races in counseling services, such as by diversifying the counselor workforce by adopting equity-centered recruiting, training, and retention practices or by providing equity training and awareness for all counselors.		X	X	X
B) Meet mental health needs of students through an all-campus effort.	X	X	X	X
C) Engage students to help increase mental health and counseling awareness and promote help-seeking behavior through student groups and other methods.	X		X	
D) Increase the visibility of counseling services on campus.	X	X	X	
E) Increase or expand external partnerships with community service providers.	X		X	X
F) Adopt or expand upon the use of tele-behavioral health.	X*			
G) Develop an assessment of counseling services to inform improvements and ensure counseling services are meeting student needs.		X		
H) Implement counseling approaches grounded in theory that have evidence of being effective.				

* GHC added a tele-behavioral health contract to their project in 2022, after the college counselor resigned.

While no college explicitly identified theory-based counseling approaches as their strategy, counselors involved with the pilot drew upon their professional experience and consultation with other pilot programs to adjust methods to best reach and impact their respective colleges.

Grays Harbor College

Located on the Washington coast in Aberdeen, Grays Harbor College (GHC) enrolled 1,561 FTE (2,665 headcount) in 2020-21. As a rural campus serving many place-bound students, GHC identified a high need for additional counseling capacity given that the college had only one faculty counselor before joining the pilot. GHC participated in several mental health programs, including the Suicide Prevention Grant administered through the Washington Student Achievement Council (WSAC) in 2019, but still saw significant gaps in access and capacity. Their pilot application identified three primary, student-identified gaps related to mental health access and resources: a lack of mental health information, insufficient mental health services available, and a high need to access additional mental health services beyond what was available on campus.

Table 2: Demographic data of students accessing mental health counseling and services at GHC, 2023 data reported by GHC

Race/Ethnicity	All Students	Students Accessing College Services	Tele-health Registrations (% of 48 registrations)	Tele-health Utilization (% of 17 unique students)
American Indian/Alaska Native	68	1	2.22%	
Asian	49	2	11.11%	1.64%
Black/African American	38	1	2.22	1.64
Hispanic/Latino	424	10	6.68%	22.95%
Pacific Islander	4	0	6.67%	
White	1243	28	62.22%	70.49%
2+ races	160	6	8.89%	3.28%
Not reported	224	1	4.44%	
Attendance	All Students	Accessing Services		
Full-time	1216	36		
Part-time	992	8		
Family and Finances	All Students	Accessing Services		
Students receiving need-based financial aid	477	20		
Additional demographics selected by the college	All Students	Accessing Services	Tele-health Registrations	Tele-health Utilization
Veterans	34	1		
Median age	23	26	23-29	29
Female			72.92%	61.6%
Male			25%	38.1%
Students with disabilities	31	25		

GHC reported difficulty collecting data on certain demographics because of their conversion to ctLink. Gender identity and sexual orientation was a data element attainable in the college system's old software program, but not in ctLink. GHC has expressed an interest in exploring this further to be inclusive and supportive for these students.

Additionally, the college hired a full-time counselor in year one of the pilot. However, the counselor resigned after a few months due to logistical challenges of relocating to Aberdeen. Due to a shortage of qualified

applicants, GHC decided to pursue a third-party tele-health contract with TimelyCare. When the tele-health services began in fall 2022, the rate of students using the service was below the company’s typical projection. GHC attributed the lower level of student engagement to critical staffing turnover in GHC’s Student Services division. GHC is seeing a greater awareness of the resource and more student interest in this first quarter of the 2023-2024 academic year.

Table 3: Mental health counseling and services provided in terms of type and provider at GHC (number of meetings/events unless otherwise noted).

Service Provided	Campus Provider	Community Partner	In person	Virtual	Individual	Group
Personal Counseling (individual sessions)	272	0	230	42	272	0
Workshops	27	0	5	22	0	27
Outreach	15	5	10	10	0	15
Crisis interventions (individual cases)	5	0	4	1	5	0
Partnership touch points with community partners		25	5	20	0	0
Training/consulting opportunities	0	51	42	7	1	49
Career counseling (individual sessions)	11	0	6	5	11	0
Class visits	42	0	42	0	0	42

Despite staff turnover, GHC reported a number of renewed collaborations and increased student engagement around mental health needs and awareness. The college provided a number of trainings/workshops for faculty, staff, and students, along with several outreach and promotional events involving the student HOPE Squad (suicide awareness and prevention) and student government.

GHC also increased capacity and training for their campus CARE team, resulting in a collaborative, multi-disciplinary approach to reviewing student behavioral concerns. The CARE team is better equipped to provide a coordinated response to address concerns and support the student and campus community.

Table 4: Report on the effectiveness, including cost-effectiveness, of each strategy used to increase student access to mental health counseling and services (GHC).

Strategy	Additional students served	Reduced wait times	Other	Cost effectiveness
Meet mental health needs through an all campus effort (CARE Team)		X		
Engage students to help increase mental health and counseling awareness and promote help-seeking behavior through student groups and other methods (HOPE Squad and student government)	X			
Increase the visibility of counseling services on campus (outreach and promotion of services)	X			
Increase or expand external partnerships with community service providers (developing community partner relationships)			X	
Adopt or expand upon the use of tele-behavioral health (TimelyCare)	X			X

GHC found it difficult to directly correlate additional students served with reduced wait times. However, anecdotal evidence suggests GHC’s multi-pronged approach to increasing student access (outreach/promotions, student organizations, community partnerships and tele-health) contributed to more students served. Meanwhile, wait times were low as students typically saw a counselor within a week.

The following observations relate to some of the key strategies:

- All campus effort: With assembly of the CARE team, GHC quickly screened students’ concerns or behaviors and intervened to address the issues. This team did not exist prior to the pilot program.
- Increased visibility: Due to staff turnover, GHC did not track outreach/awareness details of participants. However, through collaboration with student groups and student government, mental health services were actively promoted.
- Adopt tele-behavioral health provider: With the resignation of the full-time mental health faculty counselor hired in year one and challenges hiring counseling staff in the community, GHC opted to purchase a tele-health subscription in spring 2022. It launched fall quarter of 2022-2023 school year, with year one use/access data as follows: 48 registrations, 52 total visits, 40% of visits occurred after hours and the average wait time was less than six minutes. GHC learned that both tele-health and in-person mental health services are indispensable for the holistic well-being of students.

Lake Washington Institute of Technology

Lake Washington Institute of Technology (LWTech), located in the Seattle suburb of Kirkland, enrolled 2,911 FTE (5,183 headcount) in 2020-21. LWTech is one of five technical colleges in the community and technical college system with an average student age of 30. LWTech shared related campus strengths prior to joining the pilot, as having an established and experienced CARE (Campus Assessment Response and Evaluation) team, participation in the WSAC Suicide Prevention Grant, and Mental Health First Aid trainings for faculty and staff. However, they noted a strong need for additional counseling services as they employed a part-time contract mental health counselor and did not have internal resources for a faculty counselor position. LWTech identified gaps and unmet need in the areas of insufficient mental health expertise on the CARE team, lack of knowledgeable campus leadership for additional prevention work, an inability to provide appropriate crisis response, and an alarmingly inadequate counselor to student ratio.

Table 5: Demographic data of students accessing mental health counseling and services at LWTech, 2022 data reported by LWTech

Race/Ethnicity	All Students	Students Accessing Services
American Indian/Alaska Native	47	3
Asian	624	16
Black/African American	231	5
Hispanic/Latino	61	1
Pacific Islander	25	0
White	2061	43
2+ Races	446	3
Not Reported	1212	38
Attendance	All Students	Accessing Services
Full-time	2354	32
Part-time	2353	70
Unknown		7
Family and Finances	All Students	Accessing Services
Students receiving need-based financial aid	785	36
Additional demographics selected by college	All Students	Accessing Services
LGBTQ+	75	4
Sexual Orientation – other/prefer not to answer	4391	100
Gender – Female	2848	70
Gender - Male	1859	32
Gender – Not Reported		7
Veterans	114	1
Veterans – Dependents	14	3
Average age	32	29
Work Status – part/full time work on/off campus	1232	28
Prior Education – no prior degree	1842	45
Disability Status – Yes	262	13
Disability Status – Not Reported	1625	18

LWTech was one of the colleges who converted to ctcLink late near the end of the first year of the pilot.

Conversion processes made it difficult for campus-based data collection methods to interface with ctcLink in year two. Data analysis difficulties were compounded by turnover in the grant funded counseling position between year one and year two of the quarter. Despite these challenges, LWTech was able to implement local tracking of appointment and demographic data. The college also has systemized a quarterly evaluation survey of students to assess their experience with counseling services. They saw an increase in students accessing using information acquired through presentations, events and activities and via monthly wellness newsletters.

Appointment data reflected the average number of appointments per student was 5.5 with nearly 75% of appointments with returning clients. Average wait time for new client appointments was 13 days which was due to a combination of capacity and students' schedules. Over 86% of students kept their scheduled appointments.

Table 6: Mental health counseling and services provided in terms of type and provider at LWTech (number of meetings/events unless otherwise noted).

Service Provided	Campus Provider	Community Partner	In person	Virtual	Individual	Group
Personal Counseling	602 (individual sessions)	122 (contract)	157	504		
Workshops			2 workshops			
Outreach	Classroom visits		Service-learning event with EDI to raise awareness	Counseling newsletter sent out monthly		Monthly Wellness Advisory meetings
Crisis Interventions	110 CARE reports opened				2 crisis sessions	1 crisis session
Partnership touch points with community partners		King County Crisis Line, NABITA training for CARE Team		Counselor participated in monthly consultation meeting with other technical college counselors		
Training/consulting opportunities	1		1	1		

LWTech greatly expanded their campus-wide communications and awareness on mental health issues by having the full-time counselor on staff. In addition to providing direct support to students through 602 individual personal counseling appointments, the pilot funded counselor also brought training and expertise

to the CARE Team and provided leadership for several all campus events and activities. Because the counselor was the only licensed mental health counselor on staff at LWTech, they partnered with other technical college counselors for monthly consultation to debrief on and gain additional insight.

Table 7: Report on the effectiveness, including cost-effectiveness, of each strategy used to increase student access to mental health counseling and services (LWTech).

Strategy	Additional students served	Reduced wait times	Other	Cost effectiveness
Improve equity, diversity, and inclusion of all races in counseling services, such as by diversifying the counselor workforce by adopting equity-centered recruiting, training, and retention practices or by providing equity training and awareness for all counselors.	X	X	X	
Meet mental health needs of students through an all-campus effort.	X		X	X
Increase the visibility of counseling services on campus.			X	
Develop an assessment of counseling services to inform improvements and ensure counseling services are meeting student needs.	X		X	

LWTech reports the presence of a full-time mental health counselor had a positive overall impact on the confidence of faculty and staff in supporting student health and wellness. Additionally, the expertise of a trained mental health professional greatly expanded the college’s collective ability to handle student crisis situations. Specifically, LWTech found the following in support of effectiveness of the strategies employed:

- 200% expansion in counseling services available for 1 part-time counselor in 2020-21 to 1.5 counselors in 2021-22.
- 100% of counseling clients who completed the quarterly counseling evaluation agree or strongly agreed with the statement, “I was able to get an appointment when needed.”
- 100% of counseling clients who completed the quarterly counseling evaluation agree or strongly agreed with the statement, “The counselor considered my cultural background and needs when showing me support.”
- Visibility of LWTech’s commitment to mental health seen by an anonymous donor who contributed \$50,000 to Foundation in support of the work.
- 90% of counseling clients who completed the quarterly counseling evaluation agree or strongly agreed with the statement, “If I didn’t have access to counseling services at LWTech, I would have difficulty accessing mental health services elsewhere.”
- 40% of students who accessed counseling reported they heard about the service through email communication from the college.

North Seattle College

Located in Seattle, North Seattle College (NSC), enrolled 4,005 FTE (11,360 headcount) in 2020-21. NSC is part of the Seattle College District and serves a diverse student body. Prior to joining the mental health pilot, NSC had two faculty counselors resulting in one of the highest student-to-counselor ratios in the system. While the counseling staff scheduled over 577 counseling appointments in the year prior to the grant, they were reaching less than one percent of the student headcount. NSC had strong goals for the mental health pilot, including eliminating equity gaps and reaching vulnerable students who are less likely to self-identify as needing counseling, meeting developmental needs of diverse young adult students, and addressing the pandemic effects on mental health.

Table 8: Demographic data of students accessing mental health counseling and services at NSC, 2023 data reported by NSC

Race/Ethnicity		Students Accessing Services	Men of Color	Women of Color
American Indian/Alaska Native		1	0	0
Asian		100	45	51
Black/African American		63	24	35
Hispanic/Latino		44	13	26
Pacific Islander		1	1	0
White		87	29	51
2+ Races		87	29	51
Not Reported		N/A	N/A	N/A
Attendance	Accessing Services	Students of Color	Men of Color	Women of Color
Full-time	146	87	32	48
Part-time	266	142	52	78
Not currently enrolled	189	67	28	38
Family and Finances	Accessing Services	Students of Color	Men of Color	Women of Color
Students receiving need-based financial aid	271	168	57	96
Students in WorkFirst/Work Retraining	35	25	3	21
Additional demographics selected by college	Accessing Services	Students of Color	Men of Color	Women of Color
LGBTQ+	NA	NA		
Female	312	164	0	164
Male	246	112	112	0
Non-binary	3	3	0	0
Unspecified	40	17	0	0
Veterans	8	4	3	1
Median Age	21	21	20	23
Average Cumulative GPA	2.46	2.38	2.23	2.48
Credential completed	60	36	10	25

The data collected by NSC is unduplicated and does not reflect multiple meetings with the same student over the year. Over the two-year span of the pilot, direct service increased from 577 student contacts to 1146 student contacts the first year and 1252 student contacts the second year. Students of color are accessing services at a higher rate than White students by nearly a 2:1 ratio. As with other pilot colleges, collecting data on LGBTQ+ identifying students was hampered by the system transition to ctcLink.

NSC conducted some additional data analysis that may model methods for other colleges in subsequent years. They note the median age of students seeking counseling services is 20, which is younger compared to the overall college population (median age 24). Students of all groups seeking counseling were achieving academically, with an overall mean GPA of 2.46. Additionally, the average credits accrued was 28 credits, suggesting that students were persisting in their studies.

Table 9: Mental health counseling and services provided in terms of type and provider at NSC (number of meetings/events unless otherwise noted).

Service Provided	Campus Provider	Community Partner	In person	Virtual	Individual	Group
Personal Counseling	NSC Counseling	45 th Clinic, Harborview Counseling, Valley Cities, Sound Mental Health, KCSARC, ACRS			641	155
Workshops	NSC	United Way King County/Benefits HUB, Jewish Family Services		172		380
Human Development Courses	NSC	N/A	220	38	N/A	75
Crisis Interventions	NSC – CARE Team	45 th Street Clinic, Harborview, Valley Cities, Sound Mental Health, API Chaya, Crisis Clinic		57		

Service Provided	Campus Provider	Community Partner	In person	Virtual	Individual	Group
Partnership touch points with community partners	Benefits HUB	United Way King County, DSHS, SNAP and WIC, Food Pantry, Solid Ground Housing			60	
Training/consulting opportunities	NSC – Teaching and Learning, Housing Specialist OCEE	Jewish Family Services, MH First Aid Training		147		151

NSC maintained a hybrid model with a mix of in person and online options for service delivery. NSC counselors regularly teach Human Development Courses (HDC) to help students succeed in school. Through these consistent interactions with the 220 enrolled students, NSC counselors made an impact on providing consistent wrap around services to these students in addition to separate mental health focused interventions.

NSC heavily focused on counseling outreach activities to reach a greater array of students with information about mental health and a low-barrier strategy to promote mental health and wellness. Through innovative programs such as weekly, informal support groups; quarterly college success skills workshops; and quarterly informative mental health information published with Student Leadership, NSC counseling was able to use these interactions as ways to destigmatize and decolonize mental health services.

Table 10: Report on the effectiveness, including cost-effectiveness, of each strategy used to increase student access to mental health counseling and services (NSC).

Strategy	Additional students served	Reduced wait times	Other	Cost effectiveness
Improve equity, diversity, and inclusion of all races in counseling services, such as by diversifying the counselor workforce by adopting equity-centered recruiting, training, and retention practices or by providing equity training and awareness for all counselors.	X	X		X
Meet mental health needs of students through an all-campus effort.	X	X		X
Engage students to help increase mental health and counseling awareness and promote help-seeking behavior through student groups and other methods.	X			
Increase the visibility of counseling services on campus.	X			X
Increase or expand external partnerships with community service providers	X			

NSC noted several effectiveness measures related to each of their strategies including:

- 1,146 student contacts last year to 1,252 this year – a 9% increase in students served.
- In most cases, there was no wait time to meet with a counselor.
- The innovative Let’s Talk program served an additional 288 students and additional workshop offerings reached 380 student participants.
- Let’s Talk program touchpoints increase from 78 in year one to 288 in year two – a 269% increase in students connecting with counselors.
- Student Leadership engaged with counseling services through timely student panels on various timely topics including Trans Awareness Week, Sexual Assault Awareness month, and integration with various cultural awareness activities.
- Bi-monthly counseling bulletin reached over 13,500 students and student leadership Instagram feed with over 417 followers provided broader reaching information on mental health resources.
- Preventative measures with counseling staff being highly visible on campus and actively engaging with student groups contributed to a sense of ease and welcoming for students in seeking out individual counseling appointments and further worked to destigmatize and decolonize mental health.

Wenatchee Valley College

Wenatchee Valley College (WVC), located in Wenatchee, enrolled 2,773 FTE (4,937 headcount) in 2020-21. An Hispanic serving institution, WVC's Latinx students comprise nearly 40% of its enrollment. WVC has one of the largest community college service districts in the state, covering parts of Chelan, Douglas, and Okanogan counties and a branch campus located in Omak, nearly 100 miles from Wenatchee. WVC shared they had two full-time faculty counselors on staff who provided comprehensive personal counseling and advising services with a student to counselor ratio of over 2400:1. They shared challenges in providing counseling at the Omak campus and in reaching their Hispanic/Latinx students with supportive, culturally responsive services due to limitations in faculty counselor capacity.

Table 11: Demographic data of students accessing mental health counseling and services at WVC, 2023 data reported by WVC

Race/Ethnicity	All Students	Students Accessing Services
American Indian/Alaska Native	111	20
Asian/Pacific Islander	68	8
Black/African American	37	21
Hispanic/Latino	2009	207
White	1572	225
2+ Races	146	67
Not Reported	1096	11
Attendance	All Students	Accessing Services
Full-time	2247	Data not tracked
Part-time	2794	Data not tracked
Family and Finances	All Students	Accessing Services
Students receiving need-based financial aid	2144	Data not tracked
Additional demographics selected by college	All Students	Accessing Services
Veterans	56	37
Gender - Female		340
Gender - Male		202
Gender - No answer, other		22
Running Start	732	53

WVC's counseling department received support for a student data tracking system developed in-house by the college's IT department. The in-house system allows the counseling team to collect and analyze student information and usage patterns and maintains client confidentiality. WVC also blends mental health counseling and services with check-ins and points of contact related to student basic needs, providing a holistic one-stop for students in need.

Table 12: Mental health counseling and services provided in terms of type and provider at WVC (number of meetings/events unless otherwise noted).

Service Provided	Campus Provider	Community Partner	In person	Virtual	Individual	Group
Personal Counseling	X	X			310	
Food Pantry	X	X				
Emergency Funding	X	X				
Group Sessions	X		7	4		11
Staff/Faculty Wellness	X		78			78
Wellbeing Sessions	X		30	45		75
Outreach	X		319	134		453
Crisis Interventions	X	In partnership			5	
Partnerships and referrals	X	X			18 students referred	

Like many of the pilot programs, WVC included assessment of student basic needs in their individual personal counseling appointments. In addition to increasing student access for mental health needs, WVC greatly increased their community-based partnership with expanded capacity to develop ongoing relationships and referrals both in Wenatchee and in Omak. Columbia Valley Community Health, Catholic Family Charities, Confluence Health, Sage Advocacy Center, Omak Support Group, The Community Action Council, Wenatchee School District, Central Washington University and Skill Source all provided valuable resources and services to WVC students in 2022-23. Additionally, The Wenatchee Valley College Foundation, Numerica Credit Union, BIELLA, Weinstein Beverage sand various community donations generously provided additional food pantry resources and emergency funding.

Table 13: Report on the effectiveness, including cost-effectiveness, of each strategy used to increase student access to mental health counseling and services (WVC).

Strategy	Additional students served	Reduced wait times	Other	Cost effectiveness
Improve equity, diversity, and inclusion of all races in counseling services, such as by diversifying the counselor workforce by adopting equity-centered recruiting, training, and retention practices or by providing equity training and awareness for all counselors.	X	X		
Meet mental health needs of students through an all-campus effort.	X	X		
Increase or expand external partnerships with community service providers.	X	X		

The biggest impact WVC reported was hiring a bi-lingual counselor who reflects the large population of Latinx students at WVC. This new counselor provided additional expertise in mental health supports and strategies and was vital for staff and faculty consultation. Additionally, having an additional team member allowed WVC Counseling Services to foster deeper connections with community partners to assist students with additional basic needs that often intertwine with mental health, including domestic violence supports, rent assistance, and drug and alcohol counseling. The expanded counseling services team had capacity to offer more wellbeing sessions for the entire campus to increase awareness around a variety of mental health conditions and supports. With regard to cost effectiveness, WVC notes that prior to this funding, they could not sustain a twice weekly presence in Omak to support students in that community. 73 more students were served at Wenatchee and 14 at Omak through the additional counselor. Additionally, WVC noted:

- Twenty eight students attended wellbeing sessions planned throughout the year. These sessions were offered to students, faculty and staff. Students did not have to sign up or wait to learn about different mental health and wellbeing topics.
- Eighteen students were referred to community service providers for ongoing support. Campus offices have been designated for community partners to meet with students at both Wenatchee and Omak. The resulting strong partnerships with on campus meeting space reduced wait times for access to services.

Lessons learned and recommendations for improving student access to mental health counseling and services

Grays Harbor College, Lake Washington Institute of Technology, North Seattle College, and Wenatchee Valley College identified and worked through several complexities and challenges as they implemented strategies to increase student access to services, including the fact that the colleges themselves were still reeling from the COVID-19 pandemic. As stated earlier, the work of counseling in Washington community and technical colleges encompasses a wide range of duties from teaching and advising, to supporting students' academic needs, health and wellness, to mental health counseling. The focus of the pilot was on mental health counseling that differs from the previous broader understanding of counseling within the community and technical college system. It should be noted that not all pilot colleges employed licensed mental health counselors prior to entering the pilot.

In November 2022, the pilot programs took part in a systemwide webinar called “Lessons Learned from the First Year of the Mental Health Counseling & Services Pilot Program.”⁶ Each program highlighted several “wins” – both small and large – from their experiences in the first year. Building on that momentum in the second year, several lessons learned are highlighted below.

Lessons learned

- The investment of \$125,000 annually per pilot provided a good starting point to increase capacity in providing mental health counseling and services for students. All four pilots reported a boost in their ability to promote and provide counseling services and to provide consultative support to faculty and staff related to student mental health. However, pilots reported their student-to-counselor ratios were still not adequate to fully meet all the mental health needs of their students.
- Filling counselor positions is difficult due to limited hiring pools and fluctuations in the workforce. Two pilot programs reported needing to repost positions due to faculty turnover. The lengthy process of hiring a counselor can be difficult for understaffed colleges.
- The increased statewide demand for counseling services also made it difficult to form partnerships or contract for supplemental counseling support for individual colleges.
- As students became more aware of mental health counseling and services, the demand for services increased. This correlation shed light on the significant, underlying need for mental health counseling and services. According to the pilot colleges, offering additional services led to increased student satisfaction, enhanced sense of student well-being, and appears to have also contributed to student retention and success.
- It is vital to provide more than one choice for counseling support so all students can access counseling and connect with a provider who understands their experiences.
- While there is a sense of optimism around the option of securing third-party tele-health providers, several factors make the contracting process difficult, including complex selection and contract negotiations, concern for standards of care around developing strong community support for students, and local collective bargaining agreements related to contracting out for services. These challenges may make it difficult to hire third-party providers for student counseling services.

⁶ “Lessons Learned from the First Year of the Mental Health Counseling & Services Pilot Program,” SBCTC Webinar, [GMT20221129-210458 Recording_1920x1080 \(panopto.com\)](https://panopto.com/Recording/1920x1080/GMT20221129-210458)

- Some institutions may be able to secure third-party providers to support mental health counseling services, but this option should be considered within the context of each college’s local resources.
- Partnering with other college initiatives — such as benefit hubs or other services addressing students’ basic needs — makes counseling services more visible and creates points of connection for students who might not otherwise seek counseling.

Recommendations

Based on their experiences in the pilot program, colleges made the following recommendations:

- Ideally, provide an ongoing legislative appropriation for counseling services at all 34 community and technical colleges. In the absence of a systemwide legislative appropriation, extend the current pilot program to July 2027 and expand the number of participating colleges. This extension would provide stable funding for pilot colleges and prevent a backslide due to a loss of funding in 2025. Expansion to add an additional four colleges to the pilot would provide an even greater cross section of data and strategies for the community and technical college system.
- Recognize that current funding levels for the pilot do not cover year-round support for counseling services. Increasing funding to support year-round counselors, or to contract with external providers during breaks, would create greater lasting impact.
- Drawing upon the experiences of the pilot colleges, develop a process to collect best practices and obtain data for use by counseling offices, institutional research staff, and other staff across all 34 community and technical colleges. This approach would enable the community and technical college system to maximize expertise and efficiencies and support a long-term evaluation of the impact of counseling services. Privacy laws, student records systems, and turnover in institutional research staff make it difficult for colleges to collect student data related to mental health counseling and services.
- Continue to provide colleges with resources and the autonomy to determine the best approach to expand mental health counseling and services for students. To expand access to counseling, colleges must hire college-based counselors or contract with local providers or tele-health services — complex decisions best determined by local colleges based on their students’ needs.
- Provide legislative investments to enable colleges to lower student-to-counselor ratios.
- Explore additional partnerships and capacity-developing solutions with community and state organizations related to mental health supports.

Conclusion

National research indicates a direct correlation between mental health and success in college. Washington state’s investment of \$1.024 million for the first two years of the pilot program has had a positive impact on students and on the four participating pilot colleges. The lessons learned, best practices identified, and data collected in the pilot project will benefit the entire community and technical college system. Sustained funding is needed for the pilot colleges to maintain progress and advance even further in addressing students’ mental health needs. Additionally, the pilot colleges recommend expanding the program from four to eight colleges.

In the long-term, the Legislature should consider funding mental health counseling and services at all 34 community and technical colleges as a vital part of the long-term solution to supporting students’ mental health.

Appendix: Definition of Key Terms by College

Grays Harbor College

[Diversity Definitions | Grays Harbor College \(ghc.edu\)](https://www.ghc.edu/diversity-definitions)

Key Term	Definition
Diversity	Diversity includes all the ways in which people differ, and all the different characteristics that make one individual or group different from another. It includes race, culture, ethnicity, gender, age, national origin, religion, ability, sexual orientation, socioeconomic status, education, marital status, language, and physical appearance. It also involves different ideas, perspectives, and values.
Equity	<p>The proactive reinforcement of policies, practices, attitudes, and actions that produce equitable power, access, opportunity, treatment, impact, and outcomes for all.</p> <p>Inclusion: Inclusion has roots in the disability movement, as a strategy for including students with disabilities in mainstream classrooms. Over time, it has come to describe the process by which all students who have historically been excluded and marginalized because of their race, ethnicity, religion, nationality, citizenship status, and gender identity and other social identity markers, can experience belonging, be respected and valued, and fully participate in all aspects of the educational environment. In this sense, inclusion goes beyond mere integration to require the removal of barriers to educational participation. However, it falls short of requiring equitable outcomes or the transformation of institutional power arrangements.</p>
Cultural competence	<p>The National Center for Cultural Competence (n.d.) references the seminal definition provided by Cross et al, 1989: "Cultural competence is a set of congruent behaviors, attitudes, and policies that come together in a system, agency or among professionals and enable that system, agency or those professions to work effectively in cross-cultural situations.</p> <p>The word culture is used because it implies the integrated pattern of human behavior that includes thoughts, communications, actions, customs, beliefs, values and institutions of a racial, ethnic, religious or social group. The word competence is used because it implies having the capacity to function effectively.</p> <p>Five essential elements contribute to a system's institution's, or agency's ability to become more culturally competent which include:</p> <ol style="list-style-type: none"> 1. Valuing diversity 2. Having the capacity for cultural self-assessment

	<p>3. Being conscious of the dynamics inherent when cultures interact 4. Having institutionalized culture knowledge 5. Having developed adaptations to service delivery reflecting an understanding of cultural diversity</p> <p>These five elements should be manifested at every level of an organization including policy making, administrative, and practice. Further these elements should be reflected in the attitudes, structures, policies and services of the organization.” (National Center for Cultural Competence, n.d.)</p>
Historically marginalized communities	Historically marginalized communities or populations are: “Individuals, groups, and communities that have historically and systematically been denied access to services, resources and power relationships across economic, political, and cultural dimensions as a result of systemic, durable, and persistent racism, discrimination and other forms of oppression. Long standing and well documented structural marginalization has resulted in poor outcomes – health, social, political, economic and overall increased vulnerability to harm. Historically marginalized populations are often identified based on their race, ethnicity, social-economic status, geography, religion, language, sexual identity and disability status.” (Department of Health and Human Services, 2021).
Communities of color	The term “of color” embraces Black, Asian, Latino, and indigenous peoples both within the U.S. and transnationally, whose collective marginalization as “colored” peoples and colonial subjects informs coalition politics that cut across many issues. “Communities of color” is sometimes used interchangeably with people of color but can also refer to the geographic areas in which they are concentrated.
Low-income communities	According to the federal government, a “low-income individual” means an individual whose family's taxable income for the preceding year did not exceed 150 percent of the poverty level amount, as established by the Census Bureau. (U.S. Department of Education, 2021). Low-income communities, then, refers to a collective of individuals so defined (Office of Management and Budget, 1997).
Community organizations	Community organizations, or community-based organizations, refers to nonprofit or grassroots organizations that operate in and for the benefit of a specific community.

Lake Washington Institute of Technology

[Glossary of Working Definitions | Lake Washington Institute of Technology \(lwtech.edu\)](#)

Key Term	Definition
Diversity	The wide variety of shared and different personal and group characteristics among human beings.
Equity	The situation in which all people or groups are given access to the correct number and types of resources for them to achieve equal results; differs from equality, which focuses on the equal distribution of resources rather than equal results.
Inclusion	The action or state of including or of being included within a group or structure. In a way that acknowledges and shares power.
Cultural competence	The ability to effectively and empathetically work and engage with people of different cultural identities and backgrounds in order to provide safe and accountable spaces for dialogue and discourse; cultural competence is relevant in all fields of work, education, and informal social interactions.
Culturally appropriate	Service delivery systems that respond to the needs of the community being served as defined by that community.
Historically marginalized communities	Those communities who have been historically excluded from involvement in our cities , as well as those continuing to face other barriers to civic participation. This includes those marginalized by factors like race, wealth, immigration status, and sexual orientation.
Communities of color	Identity-based communities that hold a primary racial identity and/or shared racial characteristics among members.
Low-income communities	U.S. Census tract where 51 percent of the residents are low - income families with an annual income that does not exceed 80 percent of the median income for the area or that does not exceed 80 percent of the median income for the State, whichever is higher, as most recently determined by U.S. Department of Housing and Urban Development .
Community based organizations	A private , nonprofit organization (which may include faith-based organizations), that is representative of a community or a significant segment of a community aimed at making improvements to a community’s health and well-being through the coordination of public and private agencies.

North Seattle College

[Equity, Diversity, and Inclusion Definitions | North Seattle College](#)

Key Term	Definition
Diversity	As an open access institution, Seattle Colleges holds diversity as an ongoing discovery of the intersections of identities and "diversity refers to all of the ways in which people differ, including primary characteristics, such as age, race, gender, ethnicity, mental and physical abilities, and sexual orientation, and secondary characteristics, such as education, income, religion, work experience, language skills, geographic location, and family status. Put simply, diversity refers to all of the characteristics that make individuals different from each other and in its most basic form refers to heterogeneity." (Williams and Wade-Golden, 2008)
Equity	<p>"Historically, equity refers to the process of creating equivalent outcomes for members of historically underrepresented and oppressed individuals and groups. Equity is about ending systematic discrimination against people based on their identity or background." (Williams and Wade-Golden, 2008)</p> <p>Seattle Colleges leads with racial equity because we acknowledge the history and impact that intergenerational and institutional barriers have had on students of color, who make up 44% of our student body (or nearly 60% of students who identify by race on their applications), while our faculty and staff do not yet reflect these same demographics.</p>
Inclusion	<p>This work matters because students and employees thrive where they feel they belong, especially in a climate of political divisiveness.</p> <p>"Inclusion exists when traditionally marginalized individuals and groups feel a sense of belonging and are empowered to participate in majority culture as full and valued members of the community, shaping and redefining that culture in different ways." (Williams and Wade-Golden, 2008). It is important to note that inclusion, by itself, is not enough. The pursuit of inclusion without discernment of the impact of providing commensurate access to majoritarian actions and practices can actually undermine the original purpose of empowering minoritized communities.</p>
Cultural competence	The continued development to effectively communicate and knowledgeably engage with people across cultures concerning but not limited to social identities. This can include race, gender, veteran status, sexual orientation, nation of origin, age, ability, socio-economic status, and faith, among others.
Culturally appropriate	The understanding of what is suitable given a particular context. Including awareness of norms, symbols, values, etc.
Historically marginalized communities	"Groups who have been relegated to the lower or peripheral edge of society. Many groups were denied full participation in mainstream

	cultural, social, political, and economic activities" (Heritage Bulletin, 2018). E. g., People of Color, women, people with disabilities.
Communities of color	An umbrella term used to refer to people of color often when describing the impacts of systemic racism.
Low-income communities	An area in which 20% of people live below the poverty line or families whose incomes do not exceed 80 percent of the median family income for the area.
Community based organizations	Coordination and organizing aimed at making improvements to a community, area, or group's social health, well-being, and overall functioning. This takes place in geographically, socially, culturally, spiritually, and digitally defined communities and spaces.

Wenatchee Valley College

[Equity and Inclusion Strategic Plan for Wenatchee Valley College 2022 – 2024 \(wvc.edu\)](https://www.wvc.edu/equity-inclusion-strategic-plan-2022-2024)

Key Term	Definition
Diversity	Psychological, physical, and social differences that occur among any and all individuals; including but not limited to race, ethnicity, nationality, religion, socioeconomic status, education, marital status, language, age, gender, sexual orientation, mental or physical ability, learning styles, and the ways in which identities or characteristics intersect. Diversity can be considered a numerical representation of different types of people and it does not necessarily entail inclusion or equity
Equity	The process by which individuals are provided access to the correct amount and types of resources, opportunity, and supports needed to achieve equal footing with others. It differs from equality, which focuses on the equal distribution of resources rather than equal outcomes.
Inclusion	The deliberate, authentic, and intentional act of including systemically excluded individuals and groups in processes, activities, decision-making, and policymaking and acknowledging the ways individuals interact within systems and institutions to achieve a sense of belonging.
Cultural competence	The effort to incorporate or include different cultural beliefs and identities into the work we do. Continual journey that makes an effort to remove systems and beliefs from utilizing only dominant white culture and instead utilizes non-dominant cultural thought processes and identities as norms.
Culturally appropriate	The understanding of what is customary or needed given a particular culture, context, identity or belief system. Including awareness of norms, values, systems and symbols.
Historically marginalized communities	Non-dominant cultural or identity groups who have not had power or privilege or recognition historically in the United States. Groups who have been intentionally discriminated against with laws and systems within the United States. Especially people of color, people with disabilities, women and LGBTQIA+ communities.
Communities of color	An overarching term to identify groups of people of color often used when describing the impacts of systemic racism. Can include many different racial and ethnic groups within the United States.
Low-income communities	Areas where large portions of the population live below the poverty line. This often disproportionately impacts the communities access to resources and systems of power.
Community based organizations	Groups, programs or organizations working in the community such as non-profits to improve community health and well being in a variety of ways.

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