

HB 573 – Maryland Higher Education Commission – Access to Mental Health Advisory Committee – Establishment

Committee: Appropriations Date: February 28, 2023

POSITION: Support with amendments

The Maryland Coalition of Families: Maryland Coalition of Families (MCF) helps families who care for a loved one with behavioral health needs. Using personal experience, our staff provide one-to-one peer support and navigation services to family members with a child, youth or adult with a mental health, substance use or gambling challenge.

MCF enthusiastically supports HB 573 with amendments

HB 573 would establish an Advisory Committee to study access to mental health care in institutions of higher education. The Advisory Committee will be directed to study such things as the challenges colleges and universities are having in meeting the demand for mental health services; barriers to implementing counseling services; and best practice models, including the use of telehealth. Then the Council is to make recommendations.

Across the country, colleges and universities are facing a huge increase in the number of students who need mental health care.

- 1 in 3 (30.6%) young adults between the ages of 18 and 25 experienced a mental, behavioral, or emotional health issue in the past year (SAMHSA, 2021).
- Among college students, 29.1% have been diagnosed with anxiety and 23.6% have been diagnosed with depression (NCHA, 2021).
- 25.5% of adults ages 18-24 reported having seriously considered suicide in the past month. This is a higher percentage than any other adult age group (CDC, 2020).

In a survey of directors of college counseling centers in 2020, nearly 90% reported that the demand for their services had gone up in the previous year – and this was for the year <u>prior</u> to the onset of the COVID pandemic. We know that COVID has had a profound negative impact on the mental health of the population, hitting young adults particularly hard.

Colleges and universities are struggling to meet the demand for mental health counselling.

Lengthy waits for an initial appointment with a counsellor are typical because of the tremendous demand for services along with a shortage of providers. Moreover, once a student is finally seen by a counsellor, they are only allowed a handful of visits before they have to secure a private counsellor off-campus. Many students do not have the resources to do this, and/or they don't want to tell their parents, and/or they don't have access to transportation to go off-campus. While the use of off-campus counsellors (and telehealth) may be one way to address the struggles that college campuses are having keeping up with demand, this approach needs to be undertaken in a thoughtful way that is supportive of the needs of students.

The amendments offered to HB 573 would slightly broaden the charge of the Advisory Committee. The Good Samaritan Law provides legal protections for people who call for help in the event of an overdose or alcohol poisoning. The Advisory Committee must look at how colleges and universities can adhere to spirit of the Good Samaritan Law, and not punish students who reach out for help in the event of a medical emergency brought about by a substance use crisis. Additionally, they should consider the benefits of providing protections to those who are experiencing the medical crisis, to promote help-seeking.

An Advisory Committee is critically needed to look at all of these pressing issues.

Therefore we urge a favorable report on HB 573 with amendments.

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