

CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON HIGHER EDUCATION
JOINTLY WITH COMMITTEE ON MENTAL
HEALTH, DISABILITIES AND ADDICTION

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October 16, 2020

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B E F O R E: Inez D. Barron,
Chairperson for Committee on
Higher Education

Diana Ayala,
Chairperson for Committee on
Mental Health, Disabilities and
Addiction

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SERGEANT SADOWSKY: At this time would the
Sergeants in charge of recording, please start their
recording.

SERGEANT HOPE: Recording on the computer
started.

SERGEANT SADOWSKY: Thank you.

SERGEANT LUGO: Cloud recording good.

SERGEANT SADOWSKY: Thank you and Sergeant Hope,
take it away with the opening. Thank you.

SERGEANT HOPE: Thank you. Good morning and
welcome to the Committee on Higher Education joint
with the Committee on Mental Health, Disability and
Addiction. At this time would all panelists please
turn on your videos. I repeat, at this time would
all panelists turn on your videos. Thank you.

In order to minimize disruption, please place all
electronic devices to vibrate or silent mode. If you
wish to submit testimony, you may do so at
testimony@council.nyc.gov, I repeat,
testimony@council.nyc.gov. Thank you for your kind
cooperation.

Chair, we are ready to begin.

CHAIRPERSON AYALA: Which Chair is starting
first, is it Inez or is it I?

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SERGEANT AT ARMS: I am not sure but she is
having – Chair, you are muted.

CHAIRPERSON BARRON: Can you hear me now?

SERGEANT AT ARMS: Yes, yes we can.

CHAIRPERSON BARRON: Thank you. Okay, [GAVEL]
thank you so much. I have been having so many
technical difficulties but I have to – I am going to
wing it to make sure that I am following the format
that we are using for the virtual.

But for my opening statement is that what I
should be doing next, I am going ask my Counsel to
help direct me because I don't have the run of show.

COMMITTEE COUNSEL: Yes, Council Member, you can
begin your opening statement.

CHAIRPERSON BARRON: Thank you so much. Good
morning and welcome to today's oversight hearing on
Mental Health Services for students at the City
University of New York. I am Council Member Inez
Barron, Chair of the Committee on Higher Education
and a proud CUNY alum.

Thank you Council Member Diana Ayala, Chair of
the Committee on Mental Health, Disabilities and
Addiction for joining us to hold this very important
hearing. I want to start by noting that countries

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that celebrate Black history month outside of North America do so this month in October.

The fact that they celebrate in a month with 31 days as opposed to 28 serves as a further acknowledgement of a tremendous impact Black and Brown people have had on the world and across the nation, across the oceans.

It has been several months since we celebrated Black history month in this country but the weight of our historic struggle to survive as Black and Brown people in America has resonated loudly in those months. Today's topic is but one reminder of that. Historically speaking, Blacks have largely been excluded from America's healthcare system versus patients and then as professionals. But there is a little known error in which Black men and women were systematically recruited for racist medical experiments that were largely conducted to further the health and wellbeing of White Americans.

Take for example, our so-called father of gynecology Dr. Marion Sims who was allowed for surgical and other medical procedures that today, enhance the vaginal and reproductive health of women worldwide. Yet, he developed these procedures by

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dissecting the genitals of enslaved Black girls and women without their consent and often times without anesthesia.

And more recently, we have seen the 40-year long Tuskegee experiment that preyed upon impoverished Black men with the fake promise of medical treatment but left many to die, suffer blindness and infect others with untreated syphilis disease through the early 1970's.

Despite some overall advances in healthcare equity since those days of human lab rat experimentation, the U.S. Department of Health and Human Services Office of Minority Health has found that healthcare disparities particularly among mental health services continue to persist among U.S. citizens of color. Racial and minority groups in the U.S. are less likely to access mental health services due to a lack of insurance and indeed mistrust of the mental health system. Black people for example were 20 percent more likely to experience mental health problems than the general population due to economic, racism and other societal circumstances.

While only 25 percent sought mental health care as compared to 40 percent of White people. The same

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is true for our nations colleges and universities where according to the American College Health Association, mental health needs are almost directly related to measures of academic success.

A 2015 survey found that students who reported psychological distress also reported receiving lower grades on exams, important projects and courses. Receiving an incomplete or dropping courses all together or experiencing a significant disruption in their course work. Yet, while higher education is a transition for all students, the challenge is often greater for student of color. Especially those from low income families and those who are the first in their families to attend college.

Not only do these students deal with every day stresses unfamiliar to their more privileged classmates, including poverty, increased violence and lack of hope that resonate in some low income communities but they are also in a new and unfamiliar setting without guidance.

Moreover, this feeling of alienation a Black or Brown college student might feel is exacerbated by discrimination and racism. Large and small, conscious or unconscious, collectively these stresses

which often crop up at an age when mental illness is known to develop at a higher rate are a perfect storm for the developments of anxiety disorder, depression and other mental illnesses. That is, stress is a strong contributing factor, a predictor of the onset of those very illnesses.

A 2018 study from the Journal of Adolescent Health found that a large variation in service utilization across race and ethnicity. Overall, students of color are significantly less likely to seek treatment than White students. Why is that? What is it about our healthcare system? Mental health in particular that feeds this disparity.

According to a 2016 Student Experience Survey at CUNY, which is celebrated for its racial diversity, 5 percent of community college students respondents and 9 percent of senior college respondents were dissatisfied or very dissatisfied with student health services which work out to a total of 8 percent of the university as a whole as dissatisfied or very dissatisfied.

Though that may seem like a relatively low percentage of overall dissatisfaction, 39 percent of community college respondents and 46 percent of

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senior college student respondents were neutral with regard to student health services at their school. Which works out to a total of 43 percent of the university as a whole, which indicates that these students may not have sought on campus student health services.

There are several reasons why a student may not have access campus student health for mental health services but it is one issue that the university student senate has repeatedly brought up. In the past, we have heard testimony, [PHONE RINGING], I am so sorry. In the past, we have heard testimony about long wait lists and short term individual counseling as well as a general lack of knowledge about the existence of such a resource.

Before the pandemic, many CUNY students struggled with housing and food insecurity and balancing the demands of family, work, if they are employed and school. COVID-19 has only intensified these inequities which negatively impact retention and academic success.

Now, maybe more than ever mental health services are crucial. Students may have lost jobs, family members and friends. Students may have had to leave

a safe haven at school where they could be themselves
or quarantine someplace where they may not feel safe.
In addition to gaining a better understanding of the
universities mental health resources for students, I
am particularly interested in how CUNY is addressing
what can be a growing need for such services.
Moreover, I am interested in learning how each school
is working to address the stigma that certain
students might have about mental health services, as
well as how services are being tailored to meet
student needs like the Black Mental Health Matters
Support Sessions which are lead by two Black
psychologists at Baruch College.

Let me close by saying that the cultural
competency with which CUNY provides its mental health
services is another important part of today's
discussion. We know that there is an inherent
mistrust of healthcare and mental healthcare in
particular among people of color.

Culturally competency having a healthcare
professional that can effectively care for those who
have diverse cultures and racial backgrounds should
be the paramount consideration in the delivery of
mental health services at CUNY. Moreover, having

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mental health professionals who look like and share
these diverse cultures and racial backgrounds is also
important.

We have lots of questions for you regarding these
matters but first, I want to acknowledge my
colleagues who are present. I will do that after my
colleague because I can't see the screen right now
and in addition to the Mental Health, Disabilities
and Addiction Committee Staff, I would like to thank
my Chief of Staff Joy Simmons, my Director of
Legislation and CUNY Liaison M. Ndigo Washington,
Chloe Rivera the Committee Senior Policy Analyst,
Paul Sinegal Counsel to the Committee and Michele
Peregrin the Committee's Finance Analyst. And now,
my colleague Council Member Diana Ayala will deliver
her opening remarks. Thank you so much.

CHAIRPERSON AYALA: Thank you Chair Barron. Good
morning everyone, I am Council Member Diana Ayala,
Chair of the Committee on Mental Health, Disabilities
and Addiction.

First, I want to thank Council Member Chair
Barron for Co-Chairing today's hearing and I would
also like to thank and acknowledge all of my fellow
committee members who are here today with us at this

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remote hearing. Welcome Council Members Cabrera,
Borelli, Ampy Samuels and I will do you the favor
Inez because I know you can't see your members.
Council Members Rodriguez and Maisel who sit on the
Higher Education Committee are also here.

CHAIRPERSON BARRON: Thank you.

CHAIRPERSON AYALA: I think that it is safe to
say that no one who is experiencing COVID-19 pandemic
has escaped some feeling of emotional anxiety brought
on by the public health crisis. The uncertainties
associated with the fear of contracting coronavirus
have been compounded by the ripple effects of the
pandemic on daily life.

For young college aged students, the pandemic has
interrupted the critical period of human development
known as emerging adulthood, which is typically a
time of physical and emotional transitioning.
Emerging adulthood is usually associated with peak
physical health and wellbeing but it is also a time
of life when mental health disorders may emerge. In
fact, with the exception of dementia, emerging adults
experience more of every diagnosed mental health
disorder than any older age group and the rates of

serious mental illness can double of that of adults
over the age of 25.

In 2019, the Journal of the American Medical
Association reported that young adult suicides in the
U.S. had reached its highest level in two decades.
And next to unintended motor vehicle accidents, a 47
percent increase in suicide and homicides were a
leading cause of death among people age 15 to 24
years of age.

Additionally, the Center for Disease Control has
reported that COVID-19 has disproportionately
impacted the mental health and well being of young
adults at a time when many of the adults that they
would normally reach out to for guidance and
reassurance such as parents, teachers and mentors are
also facing their own uncertainties and anxieties.

CUNY students have cited the effects of COVID
stressors to include disruption of degree programs,
difficulties with virtual learning, financial
uncertainties, as well as the worries about possible
infection among friends, family, teachers and fellow
students.

Notably, barriers to accessing mental health and
substance use disorder services have been compounded

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by the pandemic and a recent study found that 13.3 percent of adults found new or increased substance use to be the ineffective coping tool for increased stress and anxiety brought on by the effects of the COVID-19 crisis.

At today's hearing, the Committee looks forward to hearing from representatives from CUNY and other education advocates about programs and initiatives that are being utilized to address these rising mental health challenges among CUNY students. I want to thank the representatives from CUNY who are here today and look forward to hearing about their commitment to ensuring that quality mental health services are available for all CUNY students.

I also look forward to hearing about what is being done to ensure that these services are delivered when and where they are needed and the role that the City Council can play in supporting those efforts. I also want to thank my colleagues as well as my committee staff Senior Counsel Sara Liss, Legislative Policy Analyst Cristy Dwyer, Finance Analyst Lauren Hunt, my Deputy Chief of Staff Michele Cruz and Chief of Staff Jose Rodriguez for making this hearing possible. Thank you all and I look

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forward to a great discussion. I now turn it back to
Committee Counsel.

COMMITTEE COUNSEL: Thank you Chair Ayala. Thank
you Chair Barron. My name is Paul Sinegal and I am
Counsel to the Committee on Higher Education here at
the New York City Council. I will be moderating
today's hearing and calling panelists to testify.

Before we begin, I want to remind everyone that you
will be on mute until I call on you to testify.

After you are called on, you will be unmuted by the
host. Please listen for your name. I will

periodically announce who the next panelist will be.

Council Members questions will be limited to five
minutes. Council Members, please note that this
includes both your question and witnesses answer.

Please also note that we will allow a second
round of questions at today's hearing. These will be
limited to two minutes, again, including both
question and answer. For public testimony, I will
call up individuals in panels. Council Members who
have questions for a particular panel should use the
raise hand function in Zoom. You will be called on
after everyone on that panel has completed their
testimony.

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For public panelists, once I call your name, a member of our staff will unmute you and the Sergeant at Arms will give you the go ahead to begin speaking after setting a timer. All public testimony will be limited to three minutes. After I call your name, please wait a brief moment for the Sergeant at Arms to announce that you may begin before starting your testimony.

So, before we commence the Administration's testimony, we will first hear from a panel of students. Those students in order of speaking will be, Juvanie Piquant President CUNY University Student Senate, Amber Rivero Vice Chair Senior Colleges University Student Senate, Neha Syeda from Brooklyn College and Anna Compton from Hunter College. We will now hear from Juvanie Piquant.

SERGEANT AT ARMS: Starting time.

JUVANIE PIQUANT: Thank you so much. Good morning to members of the New York City Council and all others present here today. My name is Juvanie Piquant and I serve as the Chairperson of University Student Senate and Student Trustee at CUNY.

I would also like to thank Chair Barron for holding this oversight hearing regarding mental

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health services at the City University of New York.

The COVID-19 pandemic has drastically shifted the

lives for CUNY students and many are facing great

challenges during the fall 2020 semester. Many

students rely on the campus life and resources to get

through their everyday lives, whether it may be the

library food pantry or counseling services and more.

The constant disinvestment at CUNY has had an

immediate impact on every day students receiving the

short end of the stick. This did not begin when the

COVID-19 pandemic began but this has been years of

systemic disinvestment.

We've noticed first hand during the past semester

the leadership of New York City Mayor Bill de Blasio

make attempts to remove ASAP and cut funding for CUNY

and grades aspects. Disinvestment in higher

education should never be an option but investment

should be the way we should be leaning towards.

Due to the COVID-19 pandemic and campuses not

being accessible to students has had great impact

mentally, physically and socially for our students.

Virtual learning has caused us to spend an increased

amount in front of the computer screens and has

offered fewer opportunities for less human

interactions. Students have reported waiting six weeks to hear back from their counseling services and strenuous obstacles just to receive the investment they deserve. Many students have expressed the effect on this pandemic, having a great impact on their mental health.

Yesterday, a student reached out to me regarding the concern that they have and they are also a student with a disability and I quote they say, "I feel as a student with disability, I understand that funding is no longer there from what I heard but why can't there be some collaboration with disabilities tutoring and the writing center and I don't think that's being explored, which also is making me more frustrated and stressed."

The constant hiccups that students are experiencing with this semester has not only propelled onto be stressed this semester but also, having them decrease their moral as a student at this University of New York.

It is extremely important for us to understand that these calamities within the pandemic has not only impacted us socially but also the interactions that we have and our consistence and our perseverance

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throughout our collegiate career. It is no secret or news that resources have been limited at CUNY and it is important to know that CUNY having limited services being offered to students calls for more of a focus and attention behind communication and visibility of the services that are already there.

Local campuses and CUNY should be having a holistic approach to centralize marketing and communication to our students to hear from students themselves and include them in the conversations of how we will disseminate these resources and communicate with students.

Based on a report from inside higher ed, from a survey that was conducted to see the impact of COVID-19 on college students, it reported that students suggested that their wellbeing has been devastated by the pandemic social and economic consequences and the uncertainty of their college education.

SERGEANT AT ARMS: Time expired.

JUVANIE PIQUANT: And post-college career. Thank you.

CHAIRPERSON BARRON: Juvanie, were you finished?
Juvanie, were you finished?

JUVANIE PIQUANT: Yes.

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CHAIRPERSON BARRON: Okay.

JUVANIE PIQUANT: And I definitely would be
remised if I didn't mention what is going on socially
in our society here today.

CHAIRPERSON BARRON: Okay.

JUVANIE PIQUANT: We see the injustices of what
is occurring in our communities and every day lives.
Students are on the frontlines fighting for justice
and equality for everyday people and I really want to
thank Council Member Barron for always speaking truth
to exactly what situations are understanding we are a
university that is in a unique situation.

The majority of the students that we serve are
students of color. It is important that there is
attention being brought to that. Thank you.

CHAIRPERSON BARRON: Thank you.

COMMITTEE COUNSEL: Thank you Juvanie. The next
panelist will be Amber Rivero.

SERGEANT AT ARMS: Starting time.

AMBER RIVERO: Good morning. I would like to
start by thanking Chair Inez Barron and the Higher
Education Committee as well as Chair Ayala and the
Mental Health Disabilities and Addiction Committee

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for the opportunity to submit this testimony amidst
the global pandemic we are enduring.

I wish you and your families good health during
this time. My name is Amber Rivero I am a senior at
John Jay College of Criminal Justice and I also serve
in the duality of Vice Chair for Senior Colleges at
University Student Senate as well as President of our
student government.

I should be no surprise to anyone today that
mental health is one of the most urgent and
reoccurring topics for student leaders to assist with
this year at CUNY. Our students are experiencing
higher education virtually, a lack of social contact,
the loss of parents and loved ones to COVID, racial
injustice being heightened, economic oppression and
much more.

In a student government led survey this summer at
John Jay, 41 percent of the 600 students who
participated said that mental health was one of the
most urgent challenges that they are facing in a
virtual CUNY environment. In my individual
experience as a student who has attended two senior
colleges, when seeking mental health services in
2018, I was advised I could only see a counselor six

times for the semester and not ever exceed that. In 2019 at a different institution, I was advised I could only be accommodated for an emergency drop-in appointment. I did take that appointment and after the hour session with the counselor, I was informed that there was a six month wait for regular therapy or mental health services and provided a list of outside mental health resources to contact on my own without a referral.

Students that shared across CUNY the high volume of students in need that attribute to long wait lists, another common concern for our minority students is the White dominance in these centers at some colleges. Students feel less inclined to receive counseling when there is lacking diversity in the centers.

Since COVID, we have received many reports from students about mental health services becoming more inaccessible and even receive students reaching out about severe depression and suicidal ideations but when we as student leaders tried to offer the counseling center as a resource, often students wanted nothing to do with the center or were hesitant due to the process.

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Many times, student complained the policies and environment can prove to be discouraging and even retraumatizing for students that are in dire need. I would like to also submit a short testimony of a student that is one of our constituents named Sundesh Latchman[SP?] who has also attended two senior colleges and address mental health resources is across CUNY issue. Mental health resources at CUNY are inaccessible and inefficient. I have met trauma incompetent practitioners. I have been deselected for an appointment after waiting months because of a correspondence issue.

Mental health providers are managing a lot. Their schedules are booked, so I don't blame the commissions. I blame the system. Some clients need psychiatric and psychological care but they are only treated by a counselor. Those are three very drastic redistinguished disciplines. CUNY needs to create an effective mental health team which includes all three and is more holistic. CUNY is doing far below the bare minimum. I don't even think they value their clinicians. The clinicians are overwhelmed, untrained and underpaid. I passionately believe our constituents -

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SERGEANT AT ARMS: Time expired.

AMBER RIVERO: Thank you.

CHAIRPERSON BARRON: You can finish your
statement.

AMBER RIVERO: Thank you Chair Barron.

CHAIRPERSON BARRON: Yes.

AMBER RIVERO: I passionately believe our
constituents testimony is a fair assessment of the
issues students are faced with. It would be
extremely revealing to see what qualitative responses
would yield if CUNY did a survey of mental health
needs, resources and experiences that students have
experienced just this year alone. We are in a global
pandemic, attending university and quarantine is
enough to spark a need for mental health support.
But now we are faced with even more adversities. The
disproportionate rate of counselors to students at
each campus exacerbates our anxieties and contributes
to another layer of obstacles to overcome while
pursuing a higher education degree and just fighting
to survive in 2020.

I ask that the Committee on Higher Education
jointly with the Committee on Mental Health,
Disabilities and Addiction consider the testimony

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shared today and hold CUNY accountable to a more purposeful, intentional and holistic mental health approach to provide the services we deserve as students. I also request that any extra funding that is needed to efficiently expand and support the existing mental health centers be provided to the colleges as CUNY students are constituents of New York City and deserve the right to adequate mental health resources at their respective campuses free of cost. Thank you for your time.

COMMITTEE COUNSEL: Thank you. We will now hear from Neha Syeda.

SERGEANT AT ARMS: Starting time.

NEHA SYEDA: Good morning. My name is Neha Syeda and I am a junior at Brooklyn College. I am also a Policy and Advocacy fellow with Young Invincibles. I want to thank the New York City Council for the opportunity to testify.

I am here before you to share the perspective of college students where a challenge to persist through higher education, while also juggling the burden of mental health. A 2018 survey from Health CUNY found that more than 40,000 CUNY undergrads report symptoms

of depression, while nearly 50,000 report symptoms of anxiety disorders.

These numbers were staggering even before we were in the midst of a global pandemic and both research and students themselves suggest that COVID-19 will increase mental health needs on college campuses. As a Brooklyn college student, I have had numerous encounters with students who are struggling to keep up their grades while also managing their anxiety and depression. They would love to seek mental health counseling; however, accessing these services has proven challenging.

I have also learned that students are often unaware of mental health services and how to access them because of the lack of communication, marketing and outreach. Even when the students do seek these resources, they are often greeted with unbelievably long lists because most CUNY campuses are severely understaffed with mental health professionals.

And once students are able to meet with mental health counselors, they are met with restricted time appointments where everything feels rushed. We recommend the following changes to increase on campus mental health services at both central and campus

levels. CUNY must increase its communication and outreach of available mental health services and how to access them.

The information should not only be clearly visible on its website but it must also be shared with students via text and social media. In addition, messages should be coupled with information about how to access basic needs such as food pantries and single stops because in most cases, the mental health issues are not isolated.

We need hire more mental health counselors across all CUNY campuses to reduce long wait lists. Currently the ratio of mental health counselors to students across New York State colleges and universities is 1 to 2,400. The recommended ratio by international accreditation of counseling services is 1 to 1,000.

Finally, I would encourage CUNY and the City Council to exam the new initiative that SUNY recently launched with thriving campus and ask those providers to help meet the growing demand of mental health servicing. Knowing that the capacity is limited, CUNY should consider similar partnerships. Thank you for the opportunity to testify.

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COMMITTEE COUNSEL: Thank you. We will now hear
from Anna Compton.

SERGEANT AT ARMS: Starting time.

ANNA COMPTON: Okay. Good morning, my name is
Anna Compton, I am a Senior at Hunter College. Thank
you to the New York City Council for the opportunity
to testify. As a transfer student with a documented
IEP and a history of depression and anxiety, I
believe improved and stable mental health resources
are needed. Transferring from a SUNY community
college to a four year CUNY school was extremely
hard. I felt extremely anxious every single day of
my first semester at Hunter. Luckily, I had the
stability of the accessibility office and was able to
speak with a disability counselor assigned to me who
helped me in navigating a new school.

However, I was not so lucky when trying to access
a mental health counselor at Hunter. When I called
to schedule an intake appointment, the wait list was
four to six weeks. Once I finally got into the
counseling office, I tried to limit what I shared
because friends at Hunter warned me that if you
shared too much, you will be sent off campus.

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And while I was lucky enough to have insurance, I knew I could not afford the weekly copays to see someone off campus. I was deferred off campus and was given a list of therapists. It took me eight months to find a therapist through these references, eight months.

The therapist they referred me to had six to eight week wait lists for an intake appointment which should not guarantee sessions. It would take over an hour of transit each way, did not take my insurance entirely, had limited hours or never even called me back. I went back to the counseling services about three more times asking for new references, only to get the same references or others that would again, not call me back.

When the pandemic hit in March, I was at a point of desperation. Distance learning as a student with a learning disability was my biggest nightmare and I just wanted someone to listen. Even when I asked to meet my on campus counselor for short-term sessions, she referred me off campus. It was in August that I got my first call back and was desperate to start sessions but the therapist made me uncomfortable and I had to stop seeing him.

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I went back to searching and finally got a call back from a place I had called exactly a year ago. They immediately scheduled me for an intake appointment and I haven't heard back from them sense. It is now October. Our wellness services are failing students. CUNY campuses need more mental health counselors. We need more counselors to work with students with disabilities, students who are food or housing insecure, students of color and LGBTQ students. We needed this before the pandemic and we certainly need it now. We need our New York leaders to care about supporting CUNY and SUNY students from the governor to the City Council to the Board of Trustees and Campus presidents and to invest in students mental health.

CUNY students are about to be hit with another tuition hike. Part of this is for our health and wellness fee. Why are students being charged more for a failing service? We need to look at how other colleges are addressing mental health and invest in options that work for all CUNY students. The money can be found and it needs to be prioritized for students mental health. Thank you.

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CHAIRPERSON BARRON: Thank you so much. I just have a few questions. I am going to start first with questions for Ms. Compton and then after I ask my questions, I will ask my Co-Chair, Chair Ayala if she has questions of you as well.

I am particularly concerned Ms. Compton about the comments that you made in terms of transferring from a community college to a senior college, to Hunter and was there any kind of transfer information that was sent from the community college to Hunter to put them on alert, so to speak or to let them know that there might be some kind of continuity of services?

ANNA COMPTON: Well, while I was at the community college upstate in Utica, I was communicated by my advisor at the two year school that it would be an easy transition and because I was going from a two year school to a four years school and it was only SUNY to CUNY, that all of my credits would transfer and then once I got to Hunter after they accepted me, it wasn't until I had started the semester that I found out that I was losing an entire semester of credits from transferring. And so, that instantly impacted my mental health and with that, I have to take an extra semester next fall for my senior year.

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Which as a top recipient is effecting my graduation rate but I wasn't fully aware and it was not like properly communicated to me of services on campus.

CHAIRPERSON BARRON: So -

ANNA COMPTON: And when transferring I didn't - sorry.

CHAIRPERSON BARRON: In particular for the mental health services.

ANNA COMPTON: Yeah.

CHAIRPERSON BARRON: Was there any kind of information that was relayed? I was thinking it was CUNY but you are saying SUNY did it.

ANNA COMPTON: Yeah, it was SUNY.

CHAIRPERSON BARRON: Is there any mechanism that allows sending school to send information to another institution about what is going on?

ANNA COMPTON: Well, I had - at my old college, I had accessed the counselor service and it was much easier because it was a smaller school and because there were so many less students. But when transferring, it wasn't communicated because I had actually taken a year off between transferring from the two year school and to Hunter. So, I had been out of -

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CHAIRPERSON BARRON: Okay.

ANNA COMPTON: The system, I had been out of the public school system for a year. So, once I transferred back, I was kind of just on my own and then I chose Hunter based on you know, its reputation and it is a great CUNY school. But when I transferred in, just like the normal issues that so many CUNY students have with speaking with an advisor and you know, like 1 advisor to 1,000 students, I had a really hard time finding resources. And then once my documentation was transferred over as – like as a student with an IEP, that was when I was told more about the resources on campus but I don't think that if I had not had the IEP I don't know if I would have found out about all of these services. And I think because I had that documentation accessibility was like a big advocate for me in finding those resources. But I definitely don't think I would have known about that without that, so.

CHAIRPERSON BARRON: Okay, great, thank you so much. I wish you well.

ANNA COMPTON: Thank you so much. Thank you.

CHAIRPERSON BARRON: Council Member Chair Ayala, do you have questions?

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CHAIRPERSON AYALA: Yeah, no, I wanted to say thank you all for your testimony and I think the only question that I have, I am curious to know, for those of you that may have been offered services off site, did anyone follow up with you to ensure that there was a connection? That a connection was made? Because often times you know, we find that a referral is made but yet you know, the person never makes it. Was there anyone that was tracking that information, do you know?

ANNA COMPTON: I personally was in contact more so like on my end with my counselor at Hunter on campus. I had communicated multiple times what references she had given me weren't working but it didn't really seem that she was taking those exact therapists into consideration because when she would refer me to new therapists, she would give me the same names but on her end she didn't reach out to me to follow up on references unless I was emailing her saying hey, this didn't work out. It has been two months and like, I am not finding a therapist off campus.

So, on her end, she, the counselor I worked with at Hunter, she wasn't speaking with me to follow up

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on references to make sure I at least had a
connection outside of Hunter unless I was initiating
the conversation.

CHAIRPERSON AYALA: Now, the counselor — I am
sorry, I missed this. The counselor that you are
referring to, is that a guidance counselor kind of?

ANNA COMPTON: No.

CHAIRPERSON AYALA: Or a mental health counselor?

ANNA COMPTON: No, for mental health counseling
at Hunter. So, yeah, so the references she had given
me unless I would directly email her stating that
they weren't working or I wasn't hearing back from
them but there was a point where I was just kind of
done with even trying to find a therapist and I
didn't hear from her until I contacted her in March
when COVID occurred but it was never her reaching out
to me first to like confirm that I had any
connections.

CHAIRPERSON AYALA: Was there a referral to maybe
a program like Well NYC ever made? Sorry Anna, I
think, can Anna be unmuted?

ANNA COMPTON: Yeah, sorry, I got muted again. I
am sorry, can you repeat the question?

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CHAIRPERSON AYALA: So, a more immediate service
would you know, sometimes that you would get a
referral to or maybe Well NYC, so that you have
someone that you can speak to immediately. Was that
type of referral ever made?

ANNA COMPTON: No, I never got that reference.
So, I did outside research to find a therapist on my
own but I never got that contact, which would have
been helpful but –

CHAIRPERSON AYALA: Okay, thank you so much.
This is really helpful, thank you.

ANNA COMPTON: Thank you.

COMMITTEE COUNSEL: Thank you. At this point, I
would like to call on Council Members for questions.
If any of you would like to ask questions of this
panel, please use the Zoom raise hand function.

Okay, seeing no questions, we will move onto the
Administration. So, I will now call on the following
members of the Administration to testify. First,
Denise Maybank Vice Chancellor for Student Affairs
and Enrollment Manager, Gerard Bryant Director of
Counseling at John Jay College and Chair of the
Counseling Center Directors Counsel at CUNY and
attending to answer questions following the testimony

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of Ms. Maybank and Mr. Bryant will be Ryan Camire
the University Director of Mental Health and
Wellness.

I will deliver the oath to all three of you and
after, I will call upon each of you individually to
respond. Please raise your right hand. Do you
affirm to tell the truth, the whole truth and nothing
but the truth before this committee and to respond
honestly to Council Member questions? Ms. Maybank?

DENISE MAYBANK: Yes.

COMMITTEE COUNSEL: Mr. Bryant?

GERARD BRYANT: I do.

COMMITTEE COUNSEL: And Mr. Camire.

RYAN CAMIRE: Yes, I do.

COMMITTEE COUNSEL: You may begin your testimony
when ready.

DENISE MAYBANK: Good morning Chairperson Barron,
Chairperson Ayala and members of the Committee's.
Thank you for the opportunity to provide testimony
before you on this critical issue of mental health.
As I listen to the students, I have adjusted my
presentation because that is what is critical.

CHAIRPERSON BARRON: That's right.

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DENISE MAYBANK: That I want to make sure that I
respond to what it is that they have indicated.

CHAIRPERSON BARRON: Right.

DENISE MAYBANK: But so that you know, my name is
Denise Maybank and I am honored to be the recently
appointed Interim Vice Chancellor for Student Affairs
and Enrollment Management for the City University of
New York.

I am a proud first generation alum of the
illustrious Brooklyn College and I had the benefit of
education and service at a variety of our nations
institutions. So, I have had the experience of
working with students and understanding their needs
in a variety of context. I also hold a doctoral
degree in counseling psychology.

You have my full testimony fortunately, because I
will be diverting from it this morning. As you
heard, I am accompanied by Ryan Camire, who will be
in a better position to answer questions, as I am 14
days into my tenure at the institution but glad to be
here today.

So, as I listen to Juvanie, Amber, Anna and Neha,
I hope I am pronouncing your name correctly. I
didn't hear it, so I am hoping I am pronouncing it

correctly. As I listen to the things that they raised and the concerns that they shared, I had to adjust what I was saying because that is the issue. We have to be responsive to our students. We have to be able to pay attention to what it is that is happening in the midst of COVID but also in the general experience of our students.

A part of my testimony included drawing attention to the fact that you Chairperson Barron, as a graduate of Hunter and you Chairperson Ayala as a graduate of Bronx Community College, along with me as a graduate of Brooklyn College, we know the usual circumstances that result in trying to navigate the city and being a student at CUNY. But the students today are confronted with a pandemic. Something we have never experienced that is impacting the world and confounding the experiences that they are having on the campuses.

And so, we have to be responsive to these things. What I want you to know is that there is the full time equivalent of 108 individuals providing service at our counseling centers, so that students can receive what services we can provide.

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No, we are not going to be able to meet the full need, not everyone is going to be able to have one on one counseling services but we do have to step into the space to make sure students see those who are most able to respond to them and have counseling experiences that are consistent with their cultural context understanding and being. And these are things to which CUNY is paying attention.

I want to bring to your attention that recently a significant funding has been allocated to mental health and wellness services across CUNY by the Cares Act resources with an investment of \$5 million, we are providing additional shared services across the university to support mental health during this difficult period.

For 24 hour support and accessibility, a crisis texting service will be instituted allowing trained crisis counselors to interact with students on text messaging to assure safety, connection to services and support. And that may help some but it won't be sufficient for all.

Clinical staff members will engage in new professional development activities leading to Board Certification in tele-mental health to assure that

best practices are employed and providing virtual services to students. A new space and territory for us all.

An online asynchronous psychotherapy service for out of state and international students will be made available as well. As those students who are unable to access tele-health services due to licensing laws. This service will also allow students who are unable to access those services through campus because of technological limitations to have access to some support.

Specifically targeting faculty and staff has been initiated with two online courses, forced on brief and bereavement which is an increasing demand for service and on self-care and resilience. Supporting this will be additional professional development opportunities preparing faculty and staff to identify students facing mental health concerns and to respond to them in an appropriate and compassionate manner.

As I participated in the university student senate meeting on Sunday, I heard our students say that they are concerned about the economic impact as well as the mental health impact they are experiencing right now. So, with that recent

1 understanding and listening to four of the most
2 amazing student anywhere this morning, I commit to
3 you as a new member of the Administration that I will
4 be paying attention. That I will attend to the
5 things that you have indicated are problematic, in
6 terms of the long waits, the referrals out and not
7 understanding what it is that you need to do and how
8 you need to do it.
9

10 So, that's a commitment that I am making to you.
11 My email address is my first name
12 denise.maybank@CUNY.edu. I got to remember it. Feel
13 free to email me. I am glad to respond to you and to
14 do whatever I can to support you. Not only from a
15 position of being an Administrator but understanding
16 the issues you presented as a psychologist.

17 So, I offer you that and in closing because I
18 know my time is almost up and I am about to hear
19 time, let me just offer that the expansion of
20 services and funding are important and critical. The
21 funds that we have identified certainly fill our
22 short term need for particular types of services that
23 can be covered by one time resources.

24 Still, there continues to be great need and that
25 is one reason CUNY continues to seek for the federal

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government to provide additional assistance to the state as well as to higher education institutions across the state. CUNY will continue to advocate for additional resources to augment and expand the essential mental health services that our students require.

Chairpersons Barron and Ayala, I thank you for this opportunity. I thank you for the opportunity to hear what I heard on day 14, so that I can commit all the days going forward to making sure that we are responsive to our students, to their needs, to understanding mental health issues, food insecurity, housing instability, the intersection of all of those things to make sure that the destiny of these young people is fulfilled and the future of our city is secure. Thank you.

COMMITTEE COUNSEL: Thank you. We will next hear from Mr. Bryant.

GERARD BRYANT: Thank you. Good morning Chairpersons Barron and Ayala, members of the Committee's on Higher Education, Mental Health, Disabilities and Addiction. And it is good to hear from our CUNY students who testified earlier and Amber, it is great to see you representing John Jay.

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I want to thank you for the opportunity to provide testimony before you on the critical matter of mental health services for students at the City University of New York and my testimony will focus on services at John Jay College for criminal justice.

My name is Dr. Gerard Bryant and I have the honor of serving as Director of Counseling at John Jay College of Criminal Justice of the City of New York. In addition, I am the Chair of the CUNY Counseling Center of Counsel and Assistant Professor in the psychology department at John Jay College.

I believe my extensive experience as an administrator and psychologist along with an outstanding and diverse clinical staff allows us to provide timely effective and a vast array of mental health services to our unique and resilient student population.

My goal today is to provide the committee with a comprehensive picture of mental health services at John Jay College and like Vice Chancellor Maybank, I will defer or divert a little bit from my testimony that I submitted. I had submitted some factoids about John Jay enumerated on many of those. Clearly, the highlights of this college has been focused,

laser focused on student success and we realized a
several achievement under President Carol Mason's
leadership. And again, those are enumerated and
listed in the testimony I provided.

I do want to skip down and just get to the heart
of the matter. And you know, you have already heard
that on the central part of our mission is for the
retention and graduation of our students and is the
provision of services necessary to accomplish the act
and goals of each student enrolled in CUNY.

To this end, the Counseling Services Center
across CUNY plays an integrate role in helping
students and at John Jay, their students reach the
finish line. Which is in line with President Mason's
emphasis on student success. The Counseling Services
Center provides free and confidential psychological
and counseling support services to meet the mental
health and developmental needs of the John Jay
College students. Counseling services provided by
our diverse group for full or part time doctoral and
master's level mental health staff services and by
graduate externs or interns under the supervision of
licensed clinicians.

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Currently, we have seven full time and five part time clinicians on staff. The demographic breakdown of staff is as follows: We have 8 females, 4 males, sorry - 4 African Americans, 2 Hispanic, 2 Asians and 4 White.

In addition, two of our staff are fully bilingual in Spanish and English. We also have 11 trainees from graduate programs across New York City and New Jersey and I can tell you that this is an extremely diverse group. We have 9 females, 2 males and of the 11, all of them are minorities. And their languages that they speak include, besides English, Spanish, Korean, Greek, Hungarian, Urdu, Indo and Gujarati. So, you can see that's a pretty, pretty good representation of our CUNY population.

The Center is fully accredited, site in good standing of the standards of the International Association of Counseling Services and of March 2020, all of our services are offered remotely. This means we conduct counseling sessions via telephone or via video which i.e. Zoom.

We have many services and I enumerated in the written testimony to include intake evaluations. By the way, they are provided by our licensed

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professionals and graduate trainees. So, intake evaluations, crisis counseling, consultation, individual counseling, group therapy, referral consultation, substance abuse evaluations, substance abuse counseling, confidential Title 9 evaluation, medication assessment and management.

And again, all of our John Jay College graduate and under graduate students may access our services that I just enumerated. Currently, currently, no John Jay student is ever turned away if they ask to speak to a counselor when contacting our staff or if they request an intake evaluation. Access to services is typically available within days to one week of initial contact.

Currently, we do not have a wait list for any of our services. Not all John Jay students however are able to be able to be seen for an ongoing individual counselor, as our center is not able to appropriately meet everyone's treatment needs and by that, I mean, folks, students, who have a higher level of care and which may be more appropriate for a care provider in the community.

Roughly, less than 5 percent of our students are referred to outside community entities as we try to

work with as many students as possible who are appropriate for our clinical setting. Personal counseling for students right now is limited with what we model with the option to extend treatment if needed and I can tell you just speaking off the script here that we have many students who are way beyond the 12 week model.

For example, if a student is connected to multiple services at John Jay, it makes sense to keep him in house or the nature of the clinical picture dictates longer intervention, the number of counseling sessions can be lengthened.

So, basically, the 12 week model is by no means a hard and fast rule but provides a parameter to ensure we see as many students as possible and to avoid a wait list for personal counseling services.

Our services are advertised to students in a number of ways, including our website, social media, word of mouth, Town Hall meetings, frequent outreach to classes, professors on campus, attend entities, to many to enumerate here via email, via phone or way students can access our services. The cultural competency of our clinicians as was mentioned earlier is of utmost importance to the provision of our

services to our student population. We make it a point to higher culturally diverse clinicians and I think I made that point earlier.

We also conduct multiple presentations on race and cultural and graduate seminar in our staff meetings. Some examples include immigration issues at John Jay College, structural racism, reflections on culture and psychotherapy, racial identity, religion and personality testing, LGBTQ+ issues at John Jay and a veterans awareness workshop.

Examples of some of our innovative programs include virtual drop in counseling, group counseling made available to students which we started in the summer and we continue in the fall and an update to intake procedures in order to gather data comparable information that was obtained by a computer generated self-administered questionnaire prior to COVID-19.

Speaking of that, prior to the pandemic, the majority of the presenting problems we saw in our cities from what were listed earlier, the trauma, family conflict, academic trouble, anxiety and depression.

And there was no doubt that COVID-19 has offered many challenges to our students. A main difference

we are now seeing are people dealing with the consequences of COVID-19 and its aftermath. For example, many students impacted by the death of a loved one due to COVID-19, which of course brings a grief and bereavement issues, difficulty adjusting to online classes, more significant financial stress due to loss of job or financial resources and difficulty living with family alone with presenting problems, referral problems we saw prior to March 2020.

We have made a concerted effort to conduct research in as many forms as possible since we have moved to remote counseling and operation. And in terms of the workload, I offered a lot of stats, well some stats in my testimony and we have obviously seen over the last three years an extensive amount from three years ago over 6,000, actually two years ago over 7,000. Last year over 5,000, almost 6,000 student sessions that were attended and almost 1,000 students.

Before closing, I want to say that without these services many of our students would not make it to the finish line. I know counseling center employees across CUNY and all of my staff members would agree that the greatest reward we experience is when we see

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a student who has used our services and has overcome insurmountable odds, walk across that stage at commencement and that is no small number of students.

I would like to thank the New York City Council for this opportunity to offer an overview of services we provide to our unique and resilient student population at John Jay College and we are grateful for your continued commitment to the success of all students at CUNY. Along with my fellow CUNY directors of counseling, we appreciate the leadership of the committee's in Higher Education and Mental Health, Disabilities and Addiction and we are thankful for the ongoing support of the Council to our CUNY community.

CHAIRPERSON BARRON: Thank you to the panel for the testimony. We appreciate you coming and sharing the programs that you are offering and we are so grateful that we did have the students go first and that you had the sensitivity to adjust your testimony to reflect what it is that the students presented. But it is like we were talking at two different worlds. Based on what the students say they experience in reality and what CUNY is saying they are offering. So, we have got to try – and I want to

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welcome Dr. Maybank and welcome to CUNY and you are
being tested in the fire and I am glad to hear you
offer your contacts, so that students can have a
direct outreach to you.

But based on what the students have said and that
that they shared with us, there is the ratio at CUNY
is 1 to 2,400 where as a standard that is proposed is
1 to 1,000. Is that what your data also reflects
that there is basically one counselor for every 2,400
students? Can you hear me, are you muted?

DENISE MAYBANK: I was looking for the
opportunity to unmute.

CHAIRPERSON BARRON: Okay.

DENISE MAYBANK: So, there are different
standards that are set by different entities and the
IACC's which was the one that was referenced is the
International Accrediting and Counseling Services
entity and they have a ratio set at 1 to 1,500.
Whereas the association of University and College
Counseling Center directors annual survey in 2019 set
the ratio at 1 to 1,362.

Yes, I understand that our situation is such that
the services, the staffing is in a ratio of 1 to
2,595 and one of our campuses is in a situation where

1
2 it is 1 to 6,009. And so, agreed, that is not where
3 we want to be. I don't know that we can easily get
4 to the 1 to 1,500 number but certainly, we can't
5 afford to be at 1 to 6,009 under any set of
6 circumstances in order to meet the needs of our
7 students. And so, yeah, additional resources are
8 necessary. When we talk about the \$5 million that we
9 are investing, those investments are for things that
10 we know we can do with one time money in order to
11 meet the demands and the needs for additional
12 staffing, we need ongoing resources and that is why
13 we have to make the appeal at all levels to try to
14 get additional resources to make sure that we hire
15 ongoing services.

16 CHAIRPERSON BARRON: Well, I think it calls for a
17 very targeted and very specific allocation of money.
18 I think if CUNY is going to have people believe that
19 they want to take actions and support students and
20 provide them with the social, emotional and
21 counseling services that they need, its got to be
22 reflected and dedicating money for that purpose. In
23 the Department of Education, it was an issue which
24 the City Council raised very clearly and the
25 Department of Education responded by saying, okay we

1
2 are going to do it. We are going to make sure that
3 those counselors are hired, trained and reflective
4 again of the needs of the students and I think that
5 short of that commitment and saying, this is our
6 goal. This is our objective, this is our timeline,
7 that all the rest of it is just talk at the issue.
8 The issue is going to take a dedicated allotment. It
9 is going to money and it is going to take a program
10 that addresses that.

11 I understand the CUNY did have an announcement
12 today. I haven't been able to access it; I am
13 technologically challenged here. That they are going
14 to have some money that will be dedicated to that but
15 unless you are targeting specifically what it is that
16 you are going to put into long range, sustainable
17 counseling services, I think it is just so much talk.

18 Now, the students also talked about the fact that
19 they don't know that the programs exist. They
20 haven't been given the opportunity to access that
21 information. It is not widely distributed to them.
22 So, what is it that CUNY plans on doing to make sure
23 that there is greater outreach, there is greater
24 communication, there is greater information that is
25 shared with students?

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DENISE MAYBANK: I am going to defer to Ryan to
respond to that. As I said, 14 days in.

CHAIRPERSON BARRON: Yes.

DENISE MAYBANK: I don't want to venture too much
of a guess, so Ryan if you don't mind?

RYAN CAMIRE: I don't mind. Just to start, my
name is Ryan Camire, I am the University Director for
Mental Health and Wellness. I want to thank both
Chair's Barron and Ayala for the opportunity to
provide answers to questions. I also want to thank
Dr. Bryant for his testimony and Dr. Vice Chancellor
Maybank for her testimony as well. I think she is a
real champion and just what CUNY needs right now in
terms of these services. So, I am very, very glad to
have her.

The question is about advertising and marketing
and how we have our information out to our students.
So, their counseling services are advertised multiple
ways across campuses, including virtual, digital,
word of mouth. The information about the services
including the locations of all of our counseling
centers, a list of mental health resources, access to
shared services and infrequently asked questions are
available at the CUNY mental health web page, which I

can provide to the Committee so you have the exact details.

So, links to that page are all of the individual websites for counseling across CUNY campuses and each campus website, the CUNY campuses have hours of operation, how to access the services, specifically what services are available because some students may have needs that the services are unable to accommodate and the location on campus.

The websites have also been recently updated to include how to access services during the time of distance learning and most websites have not only something on the counseling website, but also on the website of the COVID resources.

So, each campus maintains their web page independently. So, they keep their services up to date there. We also have a robust social media presence. News and updates are available at Twitter and I can again share the Twitter address with the Council. And campuses also have their specific Twitter Instagram, Facebook, Tic Tok accounts that advertise information about the counseling centers.

Services are advertised on campus television screens, on information boards. Many campuses will

have class presentations at the beginning of each semester. We provide information at student orientations and by email as appropriate.

Also, we are working on training faculty and staff, as Vice Chancellor Maybank spoke about to engage with faculty and staff, as well as student who have connected with the mental health services to the community.

So, those are our overall methods of marketing and communication of our counseling services throughout the university.

CHAIRPERSON BARRON: Well, it appears that they are not effective and it appears that we need to perhaps find another – add some other kinds of outreach that can be more effective in letting students know. Before I continue, I want to acknowledge that we have been joined by Council Member Van Bramer and we are glad that he is here.

I have another question and then I am going to turn it over to the Co-Chair for this event and then it will go to members because I have lots of questions but I know that some of the students are going to be leaving soon and I want to be able to have them share what their experiences have been and

to remind them that they can submit testimony,
written testimony and we will review their testimony
as we review this hearing.

So, my last question before I turn it over to the
Co-Chair is that students talked about waiting a long
time to get a response and that was before the
pandemic. And now that we have the pandemic and
students are even feeling greater stress, greater
levels of stress, that there is a long wait list.
And now I heard the presenter from John Jay, Mr.
Bryant said that they don't have a wait list. I
thought that's what I heard him say.

So, how is it that some schools don't have a wait
list and others have a wait list that is so long that
students wait weeks and months before they get a
response? And what happens for those critical,
urgent situations where a student needs to talk to
someone immediately?

RYAN CAMIRE: So, yes, I agree. There does
appear to — there doesn't appear to be, there are
certainly some discrepancies between certain schools
and how the wait lists function as you said. Dr.
Bryant mentioned that John Jay does not have a wait
list and other students experiences are different.

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I think that it comes back a little bit to Vice Chancellor Maybank's comments about the staffing ratio. How the staffing can affect the wait times and the accounts for appointment. So, I think that's something that as we work on improving our staffing ratios and getting the services up to the point where they should be, we will be able to reduce or eliminate wait times at those campuses that do have them.

In terms of the follow up questions for emergency services, first thing I will say that we have emergency service contacts that are distributed on campus. They are in the body of emails that are distributed and all of the communications that are distributed to students, have some sort of emergency contact at many schools. Including contacting not only counseling but also public safety with whom counseling works very closely where there are issues of emergencies.

The urgent and emergent issues that may come up on campus, there are resources in place to be able to manage those when campuses are in operation and there is also contingency plans for when they are not in operation.

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As part of the Cares Act funding however, we are instituting a crisis texting service that will be available to all CUNY students, so that they can send a text message 24/7 365, to be able to manage the crisis that they may be in. We also have NYC Well advertised as they offer texting, talk and online services.

So, those are the emergency services that we have but we also will acknowledge that despite the counseling directors being busy, no student will get turned away if they are in an emergency or urgent situation. Those take priority across the board.

DENISE MAYBANK: I think that's an important point as well in terms of the stabilization of a student. I think Dr. Bryant addressed that in terms of his comments about what was going on at John Jay. That's true from just a practice model therapy and a therapist and so forth. We don't leave a student who is in crisis to fend for themselves to find something. You have to stabilize and then figure out what is going on next and as I understand it, that is a practice. So, I don't know if Dr. Bryant you wanted to hit that again but.

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GERARD BRYANT: Thank you Vice Chancellor. Yeah,
just to reiterate the point to Chairperson Barron's
question and comments. Any student in crisis is
going to be seen immediately and even during this
time of teletherapy and Zoom and you know, the
virtual world that we are living in, there are many
avenues we get referrals. We still get referrals
from professors whose students may be acting out in
class or showing signs of acute you know, emotional
distress right now. We have, all of our CUNY
campuses have behavioral intervention teams, which is
comprised of mental health personnel as well as
public safety, our students. You know, most of these
committees, a five to ten people committee. So,
there are a lot of eyes on campus even in this
virtual world and these students get referred to us
even in this time and we will be immediately on it.

I mean, I could draw on examples that just
happened in the last ten days of students who
appeared on the Zoom Classroom, something was just
not right or in something they submitted in writing
for an assignment and we were notified immediately.
And we are on it, I mean, there is you know, there is
a lot of good communication that happens. And I am

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not just saying at John Jay, on our campuses when it comes to students that are in crisis.

CHAIRPERSON BARRON: Thank you. I have got lots of more questions but I do want to turn it over now to the Co-Chair, Council Member Diana Ayala. Thank you.

CHAIRPERSON AYALA: Thank you Chair Barron. Mr. Bryant, you mentioned that there are currently seven full time and five part time clinicians available, did I get that correctly and are these clinicians servicing all 25 campuses?

GERARD BRYANT: No, no, this at John Jay.

CHAIRPERSON AYALA: Got you.

GERARD BRYANT: Ryan has data for all of the CUNY campuses.

CHAIRPERSON AYALA: Mr. Camire?

RYAN CAMIRE: Sorry, oh, I wasn't on mute. Sorry about that. Yes, we currently have 108 full time equivalence across the university to provide services. So, that includes all of our full time and part time employees.

CHAIRPERSON AYALA: 108 full time or is that 108 full and part time?

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RYAN CAMIRE: I am sorry. It is 108 full time equivalent. So, the actual person count includes – that includes both as probably in the neighborhood of 120, 120 persons.

CHAIRPERSON AYALA: Is there – I am sorry for my ignorance; I am trying to understand how this works. So, is there a counseling support center at each campus or is there like a main –

RYAN CAMIRE: Each campus has its own counseling center with the exception of two of our colleges which are shared models, so that the students at those two colleges can access a college counseling center at another college but basically there are 23 centers that serve 25 colleges.

CHAIRPERSON AYALA: And is the staffing ratio comparable through our campuses?

RYAN CAMIRE: No, I would say it is not. I would say as Vice Chancellor Maybank brought up; we have some fluctuations there with the average being 1 to about 2,500. You know, some go as high as 1 to 6,000 and some have you know, some have 2 counselors for 400 students. Really, there is a lot of variation in the way that it has been done on campus.

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CHAIRPERSON AYALA: So, does that translate into longer wait times because I heard from Mr. Bryant that at John Jay it does not but throughout the other campuses, I mean I am assuming that if the ratio is 1 to 2,400, 2,500, that there has to be a wait list. I couldn't understand how there wouldn't be one.

RYAN CAMIRE: I suspect that there may be wait lists at other campuses and I don't have that information at my fingertips but I can get that for you if you would like it.

CHAIRPERSON AYALA: I would like, I would like. Could you tell me, could anyone tell me, does CUNY solicit feedback from student when evaluating the efficiency of its campus mental health professionals?

RYAN CAMIRE: I am sorry, there are multiple surveys that do that in different ways that we employ including the student experience survey, which is every two years represent surveys with our colleges at the School of Public Health that do healthy CUNY survey's. So, there are survey's that have been in different areas of the university.

CHAIRPERSON AYALA: What is the response rate of the survey?

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RYAN CAMIRE: I don't have that information at my fingertips again, because it is another department but I will get that information to you directly.

CHAIRPERSON AYALA: Yeah, that important because we want to know that you know, the student understand that there is an opportunity to provide feedback. They don't have to wait until we have a hearing you know to share their experiences.

RYAN CAMIRE: Of course.

CHAIRPERSON AYALA: And I think that every two years is just not frequently enough, right? When we are talking about something as serious and as fragile as mental health services.

DENISE MAYBANK: Chairperson Ayala, may I ask for clarification?

CHAIRPERSON AYALA: Yeah.

DENISE MAYBANK: So, I heard the first part, you asked about assessment of the professionals but I am hearing in your follow up that you want to know about the assessment of services as well, is that correct?

CHAIRPERSON AYALA: Yes, I was asking, I was asking how frequently does CUNY solicit student feedback. So, we were discussing that there is a survey that goes out every two years. So, I wanted

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to know what the response rate was for the survey because I want to be able to gauge whether or not students are actually understanding and participating in a process that allows them to dictate what that service looks like.

DENISE MAYBANK: Thank you.

CHAIRPERSON AYALA: So, understanding that it is limited capacity and a shortage in existing resources, is CUNY maximizing its relationships with outside partners to ensure that students are connected to these services.

DENISE MAYBANK: Yes, I was provided quite the list. So, Ryan, I am going to defer to you to give them all but I now know about New York City Well, I think is one, North Ridge something, associated with hospitalization. So, I am going to be quiet and let the experts tell you what those connections are.

RYAN CAMIRE: So, we have several outside providers that we work directly with. We also — each campus has of course their own community centers, so I won't go through all of the list because there are hundreds and we would be here all day. But I will just tell you about some of the major ones that we do partner with.

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You know, NYC Well has become since its institution a couple years ago has become a huge referral source for us and as the student mentioned before, the advertising and follow through with that system you know, we need to work on that somewhat. So, I am definitely taking that note from the student regarding NYC Well. Because it can be difficult to negotiate the New York City mental health system, especially if someone hasn't done it before.

We also use the New York State Office of Mental Health Provider Network. If students have health insurance coverage, we will help the students to work through their health insurance to connect to treatment providers. We routinely refer to large community based organizations, hospital systems like Health & Hospitals of course, independent providers depending on proximity to students homes, confidentiality concerns and level of care required.

To provide several examples, we have a partnership with Northwell Health, their behavioral health college partnership which works specifically with college students who have in-patient behavioral health needs and can help them transfer after their

inpatient needs to an outpatient provider. And we
have worked with them for a number of years.

In terms of our outpatient community partners, we
have worked with Mount Sinai, Mount Sinai Adolescent
Clinic, Beth Israel, the LGBT Community Center, the
Institute for Family Health and the Jewish Board just
to name a few.

So, we work with a lot of different agencies
because the needs of our students are so varied and
because as was mentioned before it can be difficult
to establish treatment in the community.

CHAIRPERSON AYALA: And how do you ensure, like
is there a process to ensure that the student that
was referred to outside services actually received
those services? Because we heard from Anna earlier
that you know, she had to basically you know, come
back and reach out to her counselor several times
because the referrals were just not adequate and
there was no follow up. It should have been the
reverse way right.

So, the counselor should have been you know in
constant communication with her to ensure that
whatever services they referred her to were
efficient.

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What is your process for ensuring that the
connection is actually made?

RYAN CAMIRE: Well, I will ask Dr. Bryant if you
have any thoughts about that, since he works directly
at a center. So, he may be able to speak more
clearly about that.

GERARD BRYANT: Thanks Ryan. Chair Ayala, yeah,
we have often, well as I said, less than 5 percent
but in cases where we referred people out to outside
agencies, I would like to say and think that our
counselors have been very diligent in following up
with the students and supervising clinicians. That
has often been the case. Where they literally handed
off the person to the community site.

Now, we find out sometimes later that the student
may not, you know attended one or two sessions and
then stopped going. Now, of course there is little
we can do about that but I can tell you that without
that, we are there to make sure we have handed off to
the outside or the community person and it works both
ways.

We also get phone calls from in-patient
psychiatric hospitals, where students are returning
from an in-patient stay and then they are notifying

us that the student is now coming back on campus and we are in tune in making sure we are following up with those students who are really at highest risk, right, when they are coming back from maybe a suicide attempt, there is a serious psychological problem back on campus.

So, the communication works both ways and one other thing I will add which we really haven't talked about and I admitted from my testimony was, in fact we have two – well, pre-COVID, we had two part time psychiatrists on our campus working 12 hours a week, 60 hours a month.

Because of COVID, they were pulled back into their – you know, they could not do the moonlight hours but we do have a nurse practitioner on our campus to help with our prescriptions and doing assessments for psychiatry.

And those by the way, those psychiatrists and nurse practitioners are well steeped in the community and our two psychiatrists helped – and we have them for as long as I have been there, six years. Have helped us with referrals to the community. They were primarily responsible for a lot of the handoffs. They work with Mount Sanai, they know a lot of the

references, the community resources that Ryan mentioned and they were instrumental in helping us get a lot of help for students who needed high level of care.

But I am out here to say, I can only speak from John Jay's experience. So, you know, and I know a lot of my counterparts are sensitive to this but there is also a piece where students are handed off sometimes but just may not follow through.

CHAIRPERSON AYALA: Understood but there has to be a process for gauging you know, how many students actually connect and how many don't because it seems to me like you know, in the case of Anna, that she was desperately trying to get you know services and it was just a lot harder than it should have been, right and we all understand the sensitivity of you know timing in these circumstances and so, we want to make sure that if somebody is actually physically you know, being proactive in trying to access services that we are connecting them as quickly as possible.

So, that's concerning to me because – and I understand that there is no such thing as a perfect system but we have to be open to the idea of reevaluating those systems to ensure efficiency and

that's the point that I am trying to make is that one person that kind of falls through the cracks is one person too many in my opinion and so, especially when we are talking about you know, mental health in a post COVID world.

Now, have you seen an increase in the number of students that are accessing services via telehealth now, seeing that is a new alternative to treatment?

RYAN CAMIRE: Based on the data that I have collected over the past semester and over the past year and a very interesting thing has happened actually. The amount of requests for services, for initial services has stayed similar to previous years. However, the attendance at appointments has skyrocketed because virtually, we virtually eliminated no shows.

So, people are actually attending appointments and coming to them with significantly higher frequency. So, services are being offered at a higher level, especially with the addition of the groups that we have added.

CHAIRPERSON AYALA: It is very convenient, so I wonder if that is something that you know, that you may be considering continuing beyond COVID because I

1 think that you know, it is really helpful because if
2 you are in class or if you are at work or you are at
3 home, you don't - you know, you eliminate travel
4 time. You know, you eliminate the just, you know,
5 the inconvenience of having to be at a certain
6 location at a certain time.

7
8 So, I think that you know, we have seen a lot of
9 success with that and I hope that it is something
10 that is a learned lesson and that we are able to
11 continue to provide services in that way as well.

12 I have just two more questions. So, regarding
13 the marketing, so you were pretty clear on the
14 marketing approach but I wonder has that approach
15 been changed somehow to ensure that students that are
16 now remote learners are accessing those - are seeing
17 that marketing material as frequently as they would
18 have if they were walking through campus.

19 RYAN CAMIRE: I will say that centrally we have
20 made an effort especially through social media and to
21 more consistently communicate that things are
22 available. That services are available in mental
23 health and wellness and that you know, here is the
24 link to the counseling centers. Because folks may
25

not know that things are open obviously unless they
go online.

We have also changed a lot of the language on our
website that has information to reflect what is
available and how it is available and I know that on
campuses they have done similar efforts to
communicate that information.

GERARD BRYANT: Yeah, we've really upped the game
in terms of social media. We were - I thought we
were pretty up to date. We were but we are even
doing more on Instagram in some of those platforms
advertising our services. If you go to the John Jay
website, you can click on just corona's update,
corona virus updates and we are right there in terms
of wellness center. You know, available resource,
things of that nature. Of course, just like anything
more can be done but I think we are seeing - that's
really the only way we can do it right now is through
social media.

CHAIRPERSON AYALA: Hmm, hmm, no, absolutely.
And last and final question, can you tell us what
supportive services are currently being offered to
students with learning disabilities?

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RYAN CAMIRE: So, I am, we will just say that in terms of learning disabilities, that falls outside of the portfolio that I oversee, which is mental health and wellness. So, I would defer to Vice Chancellor Maybank but again, she is only 12 days, so I am assuming we will have to follow up with you with the services regarding disabilities and learning differences.

DENISE MAYBANK: And we do have a unit that is responsible for that and Dr. Chris Rossa[SP?] [LOST AUDIO 1:30:40] is the person who -

CHAIRPERSON AYALA: You are fading out a little bit.

DENISE MAYBANK: I'm sorry. Dr. Christopher Rossa is the person that would be best able to respond to that and we will get that information to you Chairperson Ayala.

CHAIRPERSON AYALA: I would appreciate that. I would appreciate that. Thank you, thank you so much. I will turn it back to Chair Barron.

CHAIRPERSON BARRON: Thank you Council Member Ayala and at this time, we will have the Council ask if there are members that have questions.

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COMMITTEE COUNSEL: Correct, are there any
Council Members who have questions for this panel.
If you do, please use the Zoom raise hand function.

Seeing none, we will turn the floor over to Chair
Barron for more questions and closing remarks.

CHAIRPERSON BARRON: Yes, thank you. I do have
questions and I just wanted to defer to other members
for them to be able to pose their questions.

So, just to request first, you did share the
information of the staff, the staffing at John Jay
but we would like to have it for the CUNY system of
the 108 persons that you talked about. If you could
please give us a breakdown disaggregated by
ethnicity, by language, by gender and by LGBTQ, we
would appreciate that. Thank you so much.

And then in terms of the qualifications for the
staffing, can you just briefly share what those
requirements are?

RYAN CAMIRE: Sure, thank you and we will get
back to you regarding the data from human resources.
So, we will certainly follow up with that and I
wanted to just comment to Chair Ayala one thing that
you brought up in your previous question is regarding
the ongoing footprint of tele-mental health. I just

wanted to put that out there that part of our thinking around the Cares funding spending is maintaining a telehealth footprint on campus even post-COVID. So, thank you for — I am glad we are on the same page on that because that's definitely been part of our thinking. So, thank you.

And in terms of the qualifications. Qualifications, all of the employees are licensed mental health providers in the areas of social work, psychology, creative arts therapy or mental health counseling. As Dr. Bryant said, we also have nurse practitioners in psychiatry. Psychiatrists, there are very few that employ those employees but we do have them, so I did want to point that out.

CHAIRPERSON BARRON: Excuse me, you said, social workers, psychologists —

RYAN CAMIRE: Creative arts therapy and mental health counseling.

CHAIRPERSON BARRON: Okay.

RYAN CAMIRE: So, all of the licensed disciplines for mental health counseling in New York. We represent all of them at CUNY. All of the full time employees are required to have —

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CHAIRPERSON BARRON: Well, just to interject,
what if a student has been seen by a creative arts
person but there is a need for another type of deeper
perhaps level of service, how does that work? Is a
student locked into the person that they are assigned
to initially or can a referral be made for someone
who has a deeper need or more intensive questions
that are being not addressed.

RYAN CAMIRE: There is always the opportunity to
work with the counseling department, the director to
be able to switch therapists if there is a need
that's not being addressed or if there is another
specialty for example that's discovered after
assessment.

So, there is that need for flexibility in terms
of who is assigned to that person.

CHAIRPERSON BARRON: Okay, thank you but you were
saying something. You can continue with what you
were saying.

RYAN CAMIRE: Thank you, sorry. The employees in
the counseling center must have at least six years of
clinical experience. It is also embedded in our
hiring documentation; the job description and part

time employees maintain the same license and
qualifications as our full time employees.

CHAIRPERSON BARRON: And in terms of the
evaluation, Chair Ayala sort of referred to it as
well. What assessments do you maintain as the
institution for the quality or the effectiveness of
the services that these mental health professionals
are delivering.

RYAN CAMIRE: I would refer back to the
assessment research that the school of public health
does as well as the university at the institutional
level and I will get back to you regarding the
details of those assessments because again, they live
in departments that are outside of the department
that I oversee. In terms of institutional research
and in terms of the Schools of Public Health's work
on that.

CHAIRPERSON BARRON: And just to follow up in
terms of the new Cares money that has been received
and will be utilized, how will every student in CUNY
know that this money is there and that they may have
an opportunity to take advantage of it? How will
every student, we are talking about the marketing and
making sure – how will every student in CUNY know and

during this age of this pandemic and social distancing, remote learning. How will every student know about this?

DENISE MAYBANK: I know that there is an effort to make sure that there is public announcement of a \$5 million investment but I hear what you are asking about then, how are we pushing it out in a specific way so that students are aware that there are new services or new opportunities for them. I think that is something that we need to build unless Ryan or Gerard can offer something different.

I certainly am hearing what you are asking because you said every and there is no equivocating on that. I heard every. So, Ryan or Gerard do either of you have anything that you can offer in that regard?

RYAN CAMIRE: I will say that as part of our efforts to institute new services is an importance, in our opinion, the importance of and I am hearing loud and clear the importance of marketing to every student from everyone here.

So, as part of our thinking about how the new services are going to be rolled out over the next few weeks and months, will also be a marketing plan

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associated with each one to be sure that each student has access to that information. Whether it is through email and social media, whether it is through communications in other ways, we will certainly, certainly work on that.

CHAIRPERSON BARRON: I think that's critical. I think it will show the need that may have been undetected previously and then result hopefully in the shifting of finances to be able to get the numbers of mental healthcare workers that we need. And in terms of finances, what's a typical compensation for CUNY mental health professionals. You gave me several titles and what is the compensation that — is it the same regardless of the title of a social worker or psychologist, creative arts, is it the same?

RYAN CAMIRE: The salaries are determined by each colleges human resources office. So, we personally at the university — I am sorry, let me take that back. In my office, I personally don't have access to the methods by which human resources makes those decisions.

So, the range that is provided for a typical full time employee in our counseling center ranges from

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1
2 somewhere from 80,000 to 133,000. And that's based
3 on the higher education officer line. I'm sorry, I
4 misspoke, let me just take that back. The higher
5 education officer line, which is what most directors
6 are on at this moment ranges from 80,000 to 133,000.
7 And that's based on collect bargaining and that's how
8 each role is determined.

9 Since human resources typically take into account
10 education as well as experience, there are some
11 fluctuations between there. I will just add that
12 full time employees who are doing the counseling work
13 in our centers are often - are typically on the
14 higher education associate line and that salary range
15 is 63,000 to 111,000.

16 CHAIRPERSON BARRON: Okay and finally, before I
17 ask my Co-Chair if she has additional questions as
18 well, how important is it to you that there be some
19 type of consideration for the cultural values of the
20 healthcare providers matching that to the students?
21 How important do you think that is and if you think
22 it's important, what is being done to try to provide
23 that opportunity for students to know and to say, I
24 would feel more comfortable with a particular mental
25 healthcare provider?

DENISE MAYBANK: That's essential. Given the diversity of the CUNY student population, we would be remiss if we did not pay attention to the cultural competency of all of our therapists, clinicians and those [LOST AUDIO 1:41:18].

But I also believe that the training matters in that regard as well. So, yes, we need to recruit for those competencies but we also need to train to make sure that everyone understands. So, I am going to defer to my colleagues for more direct information but it is essential. There is no question, there is no doubt, no equivocating on that.

CHAIRPERSON BARRON: Thank you. Chair Ayala?

GERARD BRYANT: I will, can I just weigh in on that for a second?

CHAIRPERSON BARRON: Okay.

GERARD BRYANT: Just to reiterate some numbers I gave you before. Our graduate training class this year is 11, we have 11 students and they come from various graduate training programs from around the New York, greater New York tristate area pretty much, from psychology, mental health counseling and social work and as I mentioned and I will say it again, they have 11 - and all of them are members of ethnic

1 minority groups. It starts at training. We need to
2 get them onboard and in our – on our campuses because
3 we are the pinnacle. We have the most diverse
4 student population across the country and as the Vice
5 Chancellor just mentioned and I know Ryan is onboard
6 with this, we would be remiss if we did not pay
7 attention to these cultural sensitivities and I go
8 back an earlier question about regarding if a student
9 doesn't feel comfortable with a particular clinician.
10 Of course, we always have to take that into
11 consideration and as a director, I would certainly
12 listen to what the student has to say and I have in
13 the past. Sometimes you know, we have come to an
14 understanding. Okay, maybe this is not a good fit.
15 We will have to find someone else for you to work
16 with. So, we have to be flexible and in tune to our
17 students needs as it relates to many different
18 issues, gender, cultural, you know, whatever.

19 CHAIRPERSON BARRON: Thank you Chair Ayala.

20 CHAIRPERSON AYALA: I have no further questions,
21 thank you. Thank you to the panelists though, this
22 is great.

23 CHAIRPERSON BARRON: Thank you so much. We do
24 have additional questions but we will put them in
25

1 writing. We do want to thank you for your time. You
2 have been very patient and responsive to our
3 questions and we do appreciate that.
4

5 I do have another question. If a student does
6 not have health insurance and has a need for services
7 beyond the limited number of sessions that CUNY
8 provides, what happens in that instance? Because my
9 understanding is that a student is only entitled to a
10 designated number of contacts.

11 RYAN CAMIRE: At some campuses, that is correct.
12 In other campuses, there is more flexibility in the
13 number of contacts and so that varies campus to
14 campus but to the heart of your question, is if
15 someone is uninsured or underinsured, what the
16 process is, is that we will – the counseling staff
17 will work with the student to find on two fronts, to
18 find services that either do not require insurance or
19 could be worked on a sliding fee scale and make other
20 arrangements and the other opportunity is, is that we
21 have a relationship with the Office of City Access
22 program through HRA to work with the students to
23 determine if their insurance could be improved if
24 they switched to another provider or switched to
25 another program to access.

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So, those are the options that we got. There are services available that do not require insurance, so we will often utilize those as well.

CHAIRPERSON BARRON: Thank you. Some other questions that you can send to us in terms of data. We would like to know the number of students that CUNY has referred to mental health such as through Thrive and NYC Well and do we have any data on the percentage of students that are referred to H&H as compared to other referrals that you give and I have to ask the question about CUNY's imposition of this \$120 health and wellness fee which was approved by the Board of Trustees. I don't think it has been implemented as yet but the Board of Trustees approved an additional \$120 health and wellness fee per student per academic year.

Is there any indication that that money can be put in fact to the needs of the health and wellness? Of course, I have to state my position is that I don't think it should be implemented at all but since it has been approved by the Board of Trustees, what are the plans and we are hoping that in fact it does not become implemented but what are the plans for that money?

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DENISE MAYBANK: As I understand things, it is a
part of the proposed budget.

CHAIRPERSON BARRON: Right.

DENISE MAYBANK: And the Board of Trustees has
not yet voted on that budget, so without a vote on
the budget, there is no final decision about that
fee.

CHAIRPERSON BARRON: Okay.

DENISE MAYBANK: And right now, the \$5 million
that is in position through the Cares Act money is
keeping us from having to do that for this year. So,
we are using that as best we can and so, that's why
we provided that information and it is included. The
list of those services is included in my testimony I
know, but we can get you additional information about
how we are using that money this year.

CHAIRPERSON BARRON: Thank you so much. You have
been patient; you have been responsive. We do have
additional questions which we will put in writing to
you and ask that you respond and once again, I want
to welcome Dr. Maybank to CUNY and in the new
capacity and to the other panelist Dr. Bryant and Mr.
Camire. Thank you so much for your testimony.

DENISE MAYBANK: Thank you.

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GERARD BRYANT: Thank you.

RYAN CAMIRE: Thank you.

COMMITTEE COUNSEL: Thank you Chair Barron, that concludes the public testimony, the Administrations testimony forgive me. Now that we have concluded the Administrations testimony, we will now turn to our next panel. Before we do that, I would like to remind everyone that individuals will be called up in panels, Council Members who have questions for a particular panelist should use the raise hand function in Zoom. You will be called on after everyone on that panel has completed their testimony.

For panelists, once your name is called, a member of our staff will unmute you and the Sergeant at Arms will give you the go ahead to begin after setting the timer. All testimony will be limited to three minutes. Please wait for the Sergeant to announce that you may begin your testimony before starting.

So, the next panel in order speaking will be Abigail Rojas, Diana Valenzuela and Ashly Huerta. Ms. Rojas, you may begin your testimony.

SERGEANT AT ARMS: Starting time.

CHAIRPERSON BARRON: We can't hear you, are you on mute Ms. Rojas?

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COMMITTEE COUNSEL: Okay, we can come back to Ms.
Rojas. If Ms. Valenzuela is ready, you may begin
your testimony.

SERGEANT AT ARMS: Starting time.

DIANA VALENZUELA: Good afternoon, my name is
Diana Valenzuela and I am a sophomore at Broncs
Community College studying political science. I want
to thank the New York City for the opportunity to
testify at today's hearing.

As a student currently attending counseling
sessions, I believe that there is room for
improvement in the way that mental health services
are administered. Personal counseling has helped
with the anxiety that I am experiencing; however, I
think that there are some ideas the students will
benefit from if implemented. In my case, it was not
difficult to access the benefits, however, the
sessions at times feel like we are going more through
like a scripted – sorry, dialogue instead of
addressing my stressors one by one, so that I may
effectively eliminate them.

To a certain extent, these counseling sessions
are failing to address the circumstances during a
regular semester do not compare to what we are

currently experiencing. Midterms are not the only cause of stress rather eviction or the fear of potentially contracting a deadly virus by simply going grocery shopping is what is elevating students anxiety.

While speaking with others who have sought counseling, I have noticed that their experience is more discouraging than mine. Due to COVID, more students are seeking counseling and many have pointed out that CUNY mental health services are severely understaffed, which leaves students on their own when navigating their mental health. Undoubtedly, taking a toll on students health and academic career.

My recommendations for CUNY to improve mental health services would be, more referrals to departments better suited to address the issues identified during the sessions, such as loss of income or food insecurity by providing information about food pantries and emergency grants. Better collaboration between departments that provide aid such as single staff which would deliver a more structured sessions with counselors that are trained beyond counseling.

Instead of a one size fits all approach, we would benefit more from personalized experiences based on our unique need. Sessions should be more goal oriented with tangible solutions that address the circumstances that are causing the stress. CUNY should increase the diversity in counseling services because through research has found, with the lack of equal presentation discourages students from seeking help.

More research into the way that students are coping with COVID is necessary to give our respective institutions better insight into how to properly serve their students. Furthermore, I urge CUNY and the Council to acknowledge these unprecedented circumstances that we are facing when establishing grading policies and academic standards.

When students are expected to adjust to the changes that the institution has made, while not only paying full tuition but also maintaining our grades, it takes a toll on our mental health, which inevitably effects our academic performance.

Thank you again for the opportunity to share my story and recommendations.

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COMMITTEE COUNSEL: Thank you. Before I announce the next panelist, I will just note that we have been joined by Diamilatou Barry who will also join this panel. However, we will first go back to Ms. Rojas, if she is ready to testify. You may begin now.

SERGEANT AT ARMS: Starting time.

ABIGAIL ROJAS: Hi, I am just have difficulty. I felt like I was ready to do so, but I feel a little too anxious and I just wanted to express that and I am sorry for not being able to do so.

CHAIRPERSON BARRON: Well, thank you for your interest on our topic and if at some point you want to submit something in writing, we would certainly be pleased to have that.

COMMITTEE COUNSEL: Thank you Mr. Rojas. Our next panelist will be Ashly Huerta.

SERGEANT AT ARMS: Starting time.

ASHLY HUERTA: Good morning everyone. My name is Ashly Huerta and I am a Senior at Lehman College studying English and political science.

I want to thank the New York City Council for the opportunity to testify at today's hearing. Today, I am highlighting the story of Alo[SP?], a 20-year-old average college student that commutes to school,

works a part time job and goes back home to fulfill
her duties as an older sibling every day.

Like many college students, student like Alo and
I are constantly running back and forth between our
responsibilities without asking, am I taking care of
myself. We only realize how far we have taken
ourselves until our battery runs out. As a natural
response, Alo reached out to Lehman College's mental
health resources for a hand. What started as I need
help quickly equipped to, I will deal with my
problems myself.

When Alo realized a limited availability of the
mental health resources on campus. The counseling
center was booked, the hour availability was not
enough and the Saturday hours were very limited, not
open passed 2. It became clear that limited mental
health resources feels like a closed door when you
most need a hand.

Alo is not alone, a 2018 healthy CUNY survey of
CUNY community college and four year students found
an estimate of 40,329 undergraduates report symptoms
of depression. 47,662 report symptoms of anxiety
disorder and 40,818 for symptoms associated with
moderate or severe psychological distress. That is 1

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in 6 CUNY undergraduates experience depression, 1 in 5 experience anxiety disorder and 1 in 6 show signs of moderate to severe psychological distress. For students with household incomes lower than \$30,000 a year, they report higher levels of three conditions than their peers living in households with higher incomes.

When our mental health is not appropriately treated, it becomes a barrier to our learning and overall success as a student. I am asking the city to invest in the visibility, accessibility and expansion of our mental health resources here at CUNY.

I am asking for an increase in license full time mental health counselors at each CUNY campus. CUNY should aim to have one counselor for every thousand students as recommended by the international accreditation of counseling services. Currently, that ratio at CUNY is one counselor for every 2,400 students. I am asking for an increase in accessibility for mental health resources beyond the current school hours. Mental health counseling must extend to accommodate students who take classes at night and during the weekend.

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My final recommendation is to prepare students to serve as mental health advocates to increase the visibility of mental health resources and to destigmatize experiencing mental health struggles. Limited access to mental health resources is a crisis and our most vulnerable students are at risk. We must take action now. Thank you.

COMMITTEE COUNSEL: Thank you. The last panelist will be Diamilatou Barry.

SERGEANT AT ARMS: Starting time.

CHAIRPERSON BARRON: Ms. Barry, if you are available, have you turned on your microphone? We can't hear you.

COMMITTEE COUNSEL: Maybe we can begin Council Member questions –

DIAMILATOU BARRY: Hello.

COMMITTEE COUNSEL: Oh, we hear you.

DIAMILATOU BARRY: Okay, can I start now?

COMMITTEE COUNSEL: Yes, please, you may begin.

SERGEANT AT ARMS: Starting time.

DIAMILATOU BARRY: Good afternoon everyone. My name is Diamilatou Barry. I am a Senior Student at Hunter College studying computer science and psychology. I would like to thank the New York City

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Council for the opportunity to testify at today's hearing. Mental health issues such as depression and anxiety are debilitating academic success for some college students at CUNY. Depression and anxiety can lead to academic fear. I called in to the 2000 Health [INAUDIBLE 1:57:54] approximately 40,329 students report symptoms of depression, 47,662 report symptoms of anxiety disorder and 40,818 report symptoms associated with minor and severe psychological distress. Although the rate of student mentor is higher, the number of counselors available in each college is low. Currently, CUNY student to counselor ratio of 2,400 students. The counselor is well above the recommended level.

In my own experience, I have had both depression and anxiety for many years. Unfortunately, I could not see a counselor for the last four months due to lack of information about health access in counselors. So, I have been struggling both since 2016. Three weeks ago, I started seeing a mental health counselor at Hunter College but she referred me to other counselor services.

I believe that there should be more focus on mental health counselors available to CUNY students

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and it should be advertised better. I also believe that it would be more helpful if individual appointments are extended. It would increase the access of mental health services for CUNY students such as having more professional mental health counselors to students who serve as a fear advocate through faculty to give accurate and brief information about access of mental health services. Thank you all for your time.

SERGEANT AT ARMS: Time expired.

COMMITTEE COUNSEL: Thank you. That concludes testimony for this panel. We will now turn to Chair Barron for questions.

CHAIRPERSON BARRON: I want to thank the panelists. It is always to me the most appropriate to have those who are directly impacted by the topic that we are discussing today to present and share their personal experiences. I support all that you have said. I appreciate the specific recommendations for CUNY to consider as they address ways to respond to this issue and I want to thank you all for sharing your testimony. Chair Ayala, do you have any comments or questions?

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CHAIRPERSON AYALA: I just wanted to thank all of the panelists for coming today and speaking truth to the current situation at CUNY and throughout the city and I think, you know, I very much sympathize as a former CUNY student who was you know, trying to raise a family living on a very, very, very fixed income. I you know, really understand the complexities and how all of these other influences really affect a persons mental health and their ability to really dedicate themselves to their studies.

So, I am just really proud of all of you for coming today and having the courage to speak before us and on behalf of all of your peers and I hope that this hearing actually translates into better services for all of you. Thank you.

COMMITTEE COUNSEL: Thank you. At this point, I would like to ask if there are any Council Members present who have questions? Please use the Zoom raise hand function.

Seeing none, we have concluded this panel and I will introduce the next panel. Next up will be Barbara Bowen President PSC and Pedro Luna Seek Program Counselor. Ms. Bowen, you may begin your testimony.

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SERGEANT AT ARMS: Starting time.

BARBARA BOWEN: Okay, thank you very much. Thank you Chair's Barron and Ayala for holding this joint hearing and for raising such an important topic. And I also just wanted to say that I applaud the courage of the students who have spoken about their own challenges with mental health. In some cases, today I know that takes tremendous courage, so thank you.

And Chair Barron, you spoke in the beginning about racism and medicine. You know, I think one thing that is worth reflecting on is the very assorted history of why we don't have universal healthcare in this country and it has a lot to do with racism. There is so much important research showing that connection about why the U.S. does not have universal healthcare. Because of course if we did have that some of these problems would not be present.

The issues that I want to highlight really boil down to just a few. One, is that the needs for mental health services at CUNY are unusually high compared to colleges across the country given the stresses that our students already face even before COVID. Poverty, racism, extreme stressors that they

are and then the unemployment, 40 percent unemployment in the Bronx, the unemployment, the grief, the loss the stress of being an essential worker.

So, we already have a situation where the needs are unusually high before COVID. Then since COVID, those needs have been multiplied and yet, the services at CUNY are appallingly low. The services were low before the pandemic and now with an increased need, there is even more pressure on those services and it is a structural problem. I mean it is good to have \$5 million sent to it. It sounds like they may not be instituting the wellness B this year but \$5 million is a one time amount and it is not going to solve the problem. It is really, and you have heard me talk about this before. It is an issue of investment and an issue of political priorities.

Does the mental health of CUNY students matter? Does it matter? If it does, it has to be invested in. So, the PSC was interested to hear the figures today. It is really a ratio of 1 to about 2,600 mental health you know counselor to mental health

provider students at CUNY. I don't know which campus has 1 to 6,000 but that is really shocking.

The national accreditation ratio that is recommended is between 1 to 1,500 and 1 to 1,000 and the PSC is actually proposing legislation in Albany, a new deal for CUNY that would bring that number up to the right number and we estimate that the cost would be \$15 million for 125 new mental health counseling positions.

And it is important that and this come up earlier, it is important that that include people trained as clinicians –

SERGEANT AT ARMS: Time expired.

BARBARA BOWEN: As well as social workers. Thank you. There is more to say –

CHAIRPERSON BARRON: Please continue.

BARBARA BOWEN: Okay, thank you very much. I will make it quick. I also just wanted to say that at this moment, CUNY students for the past several months not only are going through the drama of COVID in very particular and intense ways but also many of them are recalling their personal trauma's of police violence and racism and many students, White, Black, Latino, other students, Asian students are taking

risks to defend Black lives. And this courage and these risks and this remembered trauma and absorbing the trauma that we see around us also takes a mental health toll.

So, I think we need to factor in all of that but the underlying issue is that the structures are not there when we have 1 to 2,600 instead of 1 to 1,000, no matter how dedicated and you will hear in a minute from my colleague Pedro Luna, incredibly dedicated counselor. No matter how wonderful and dedicated those counselors are, if they are working at three times the number of students they should be seeing, that means they cannot serve students as well as they want to and as they are trained to do.

We simply need to demand the funding from Albany, the new revenues for taxation, the funding from the city to make an investment and prioritize this health and I will just mention one thing in closing, CUNY as you know, also has graduate employees and in the last contract, we bargained for additional money and succeeded in putting aside money for extending the graduate employee health insurance for students who don't have it currently.

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CUNY is still blocking negotiations on that. The money is sitting there. We have not been able to negotiate that and that means hundreds of graduate employees who are teaching these students, are not getting health insurance that we have paid for in a pandemic.

So, I urge you to those here from CUNY, to also make that a priority because that of course includes mental as well as physical health. So, thank you very much Chair's and Council Members. Thank you.

COMMITTEE COUNSEL: Thank you. The next panelist will be Pedro Luna.

SERGEANT AT ARMS: Starting time.

PEDRO LUNA: Good afternoon everybody. My name is Pedro Luna I am Seek Counselor. I work for Lehman College and I just wanted to just give you a little brief of what my experience has been collaborating with the counseling center.

We serve about 900 students in the Seek program and you know, we support them academically and when they face mental health issues, we refer them to the counseling center. We work very closely with them and my experience is it has been very responsive. You know, especially when we do the referral and

everybody in here who mentioned that definitely the student ratio is very high for them to give the attention that they need. But the qualification of the counselor is — I believe as a counselor, they are very highly qualified and in the last six years, I have been working at CUNY for the 12 years, I have been part of the hiring committee for many of these counselors and we just hire the best.

You know, but I think the issue is the student ratio and you know, I think counselors don't have time to follow up with the students you know, because every day their schedule is packed, you know. And we only have 35 hours as hero's to work. So, it is limited. So, I just wanted to give some suggestions just real quick before — I wrote down that when we look at mental health, you know, we have to move beyond what mental health has been displayed. I think we need to look at mental health as more as a community based mental health, where everybody is part of this.

So, in addition to reducing the student ratio, 1 to 1,500, 1 to 1,000 that would be great. I think we need to make sure that we have professors. The ratio in the classroom is low as well because professors

1
2 play a key role. So, we have to realize the student
3 ratio of students in the classroom.

4 We also have to work with community
5 organizations, making sure that they are strong. You
6 know, because – so we need to invest in them because
7 it is not just our students, our family members also
8 that are facing. Some of them, they lost their job,
9 so we want to make sure that we have vocational
10 opportunity for them as well. So, when you are
11 facing anxiety, you are facing issues because you are
12 real. You know, you don't have a job. You are
13 hungry, you don't have anything. Of course, you are
14 going to be anxious. If you don't meet those needs,
15 no matter what we do, it is not going to be fixed.
16 So, we need some financial resources in the community
17 and within CUNY.

18 And finally, I would say let's work with
19 insurance companies. Zero co-pays for students when
20 they go to mental health, zero co-pays. So, let's do
21 that now, we are in a crisis.

22 SERGEANT AT ARMS: Time is expired.

23 CHAIRPERSON BARRON: Have you finished Mr. Luna?
24 Have you finished?

25 PEDRO LUNA: Almost. Let me just real quick –

CHAIRPERSON BARRON: Okay.

PEDRO LUNA: I think that we need to do some money that when — if we can hire some other counselors at CUNY. You know, CUNY is the economic mobility not the perfect institution and we know that. We know it is a great institution. We serve 272,000 students, 77 percent of them, students of color. You know, the high hit for COVID right and even in terms of that 117 percent of Latino and Black Latino and Latinx hired in other groups in terms of that from COVID-19.

So, we definitely, we need to treat this as a pandemic and we definitely, we need a community based. We need to work with employers, we need to give students jobs, zero co-pay and in the whole community but CUNY cannot do it by themselves. We need a holistic approach. Thank you.

CHAIRPERSON BARRON: Thank you so much. I want to thank this panel for coming and for sharing their testimony and we certainly know that those persons who are on the frontline are the ones that we are looking to make sure that we can get the kinds of programs in place that will bring us the result that we need.

We know that this is a time of — statistics are showing that the ages from 18 to 25 are critical in the human development and while we certainly don't have a traditional, normal traditional student in this day and age, still there is quite a large number of students in that age group that are part of the CUNY student population and it is a critical time and as they are going through these developmental stages and being at CUNY, they are also adding on those feelings of anxiety and stress and trauma. The exhaustion just of dealing with moving back and forth in an era of being able to have to wear a mask and perhaps take public transportation to go to their jobs if they are able to have those. The anxiety, the sadness, the feeling of loneliness but perhaps compounding all of that is that sense of hopelessness. Well what's in it? Where is the light at the end of the tunnel? And that to me is one of the great contributing factors to students who are experiencing these levels of stress.

So, we have got to make sure that we do our part. This is a golden opportunity for CUNY to step up. CUNY's got to step up. If we say that our society as it exists has got to address those issues of mental

1 health and provide those kinds of services, CUNY has
2 got to step up and bottom line, it is going to take
3 money. We can have all of the grandiose plans and
4 talk about how we can address this and what we are
5 going to do and how we are going to coordinate, the
6 bottom line is it is going to take money. And we
7 want to make sure that that is reflected in the
8 budgets going forward. We have got to tax the rich.
9 We have got to be able to have those persons who are
10 making multiple millions of dollars contribute and
11 share the burden of providing education, post-
12 secondary education and of course, you know, my
13 position is always that I went to CUNY because I had
14 a B-average. Graduated from a public high school in
15 the city and was entitled to go. We need to come
16 back to that, particularly in this day when a
17 secondary education is not enough to move us through
18 the times that we have.

19
20 My Co-Chair Diana Ayala?

21 CHAIRPERSON AYALA: You said it all so
22 eloquently. I have nothing further to add but thank
23 you all for coming today.

24 CHAIRPERSON BARRON: Okay, so Council Member, do
25 you have any closing comments that you want to make.

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This is the last panel. I think the Council will make sure that there are not any members that we overlooked.

COMMITTEE COUNSEL: Correct, at this point, I would like to ask if there are any Council Members present who have a question? Please use the Zoom raise hand function.

Seeing none, that concludes public testimony. However, if we inadvertently missed anyone that would like to testify, please use the Zoom raise hand function and we will call on you when you do so.

Seeing no hands, we have concluded testimony for today.

CHAIRPERSON BARRON: Thank you. I just want to say, I want to thank all the panelists, PSC for their presentation. They always bring that dimension of those who are involved in a very face to face, even though it is virtual right now, interaction with the student that are there. I want to also thank CUNY, as always they don't just testify and leave, they do stay so that they can hear all of the testimony and use that as a part of drafting a response to the issues that we have addressed and certainly, to the students because you are the ones that are

experiencing this first hand and are able to share
with us what we need to focus on from your levels.

So, I want to thank everyone. I want to thank my Co-
Chair Council Member Diana Ayala for her sharing this
very important topic. I look forward to having other
joint hearings with you as well and if there are no
further – Council Member, you want to say something,
Ayala, Council Member, no. Okay, so if there are no
further comments.

Oh, I have to thank those behind the camera
behind the scenes. I was so challenges and flustered
this morning trying to juggle everything and figuring
out how can I get the script on the screen. How can
I get all that information on the right tile and
still be able to see, but we made it through with
your great help. I want to also thank particularly
my Counsel and the Higher Ed staff. All of you who
work with me and also to Indigo Washington.

It was a challenge today. This is not the first
but this one was the most challenging but we got
through it and I think we delivered it well. So, I
want to thank you all and with that, this hearing is
adjourned. [GAVEL]

C E R T I F I C A T E

World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is interest in the outcome of this matter.



Date November 3, 2020