STUDENT GOVERNMENT ASSOCIATION AGENDA April 18th, 2023

- I. <u>ROLL CALL</u>: Mikayla Evans, Isabella Catao, Haley Kane, Maggie Roberts, Eric Hardy, Loic Black, Alexandria Mallios, Lukas Apel, and Scott Doan were absent from the meeting.
- II. APPROVAL OF MINUTES FROM: April 11, 2023

III. PRESIDENT'S REPORT: Aaron Lessing

I don't have anything else for tonight, but I would like to mention what I said in an email to you all this weekend. Unfortunately, Kim Hosmer, our administrative assistant, passed away last Sunday. While Kim had not been here for the past year, due to her sickness, Kim always brought happiness to students coming in the SGA room. I remember her always having life savers for students and her great humor that made all of us laugh. With that said, I just want to have a moment of silence for Kim.

A. State Senator John Velis

Hello everybody, how are you doing good. This is changed right you guys used to be like right in front of me yeah I'm noticing stuff. So I want to tell you that you how lucky you all are just right out of the gate the president in my line of work and I've been I think I've probably had two or three presidents maybe rap and senator and the willingness to engage the breadth of perspective different areas of life and different skill sets to say it's a unique perspective is an understatement umm there is not any single time that I as a lawmaker have not reached out to the president and said hey I want to talk that has been met with anything other than let's set it up and let's have a conversation and that's a really big deal you might not know how big of a deal it is but it's really important because one of the things that you're going to a hear me say here in a second is that for folks in my line of work it's absolutely critical that we reach out to and speak people who are subject matter experts we can't do healthcare shocking to all of you but we as lawmakers are not the smartest people in the room and we need to reach out we need to talk to people so very fortunate everyone's room is to say that president Thompson is their president so round of applause for president so I guess what I kind of wanted to say is just kind of give you the update of where we are and then I love throwing it out to you folks having that back and forth that that human that always is what in my opinion leads to our best discussions the one thing that has changed last time she had from the president spent a good amount of time talking about this is kind of this this mental health right it's really it's really in in many respects and so since the last time that I've been here really in the last month and a half the Senate President has part of the job you're reelected you get committee assignments and I've got a really Senate President and it's widely known in the in the world of the state Senate that the Senate President Karen Spilka's biggest issue and kind of like her baby committee if you will is the mental health substance use and recovery committee now just think about that committee for a second like everything that falls in that line it's a committee that in essence deals with and tries to come up with policy solutions to behavioral health and a lot of people say it's her favorite committee so when I got named the chair of that committee as well as continuing my spot as the chairman of veterans and federal affairs it was a I was humped I was humbled but I was also reminded that you know we've got a lot of work to do and a lot of different spaces and I'll talk more about this but I think Massachusetts is at a really big fundamental crossroads right now we've got a lot of challenges that are coming at us at once that if we don't deal with them we are going to be at a

competitive disadvantage some would say we are already at a competitive disadvantage but and you're going to get many different people up here many different reps and senators that would say this is the biggest challenge in the state well I'm going to give you my opinion what the biggest issues are first and foremost I'm the chair of the committee so I have to say so I think mental health is the biggest challenge we have in Massachusetts and it's the biggest challenge that's the least talked about I think it's the least talked about if you think about it and one of the things that I'm going to be doing next week is I am absolutely intrigued and want to know what's going on in your world so that I can bring it back as we get into kind of the policy side because the one thing that I know with absolute certainty from being out in the community from going to the gym from going to the grocery store from being if you recall from last year a person in recovery who struggled beyond belief I know that what's going out in the community is that there's a lot of pain and there's a lot of death and if that's not something that gets you motivated to say hey I want to be part of the solution I don't know what will so mental health but again I'm going to say it was behavioral health because there's so much talk right now about mental health and rightfully so it almost obscures substances and recovery and we've got this thing maybe you've heard of it called fentanyl right now that is killing people left and right and nothing is safe let me be very clear here is not a single substance that is safe right now out there in the community that does not run the risk of being adulterated with fentanyl and that's scary that should be very very scary for literally every single person in this room because it scares me to death so again that committee mental health housing anybody in this room think about you know when you graduate college and you go there if you want to stay in Massachusetts the cost of living in this state yeah I mean I spent a lot of time thinking about it and I look at those numbers and there was a report that came out from mass Inc not long ago and Tennessee in particular I don't know if we ever did the Tennessee but Tennessee is eating our lunch right now in terms of getting people to graduate from Massachusetts schools and moved to Tennessee and people that are here moving to Tennessee and the main thing that comes up over and over again is housing, you can't afford to buy here you can't afford to rent you can't afford to do anything. We can spend time talking about that if you want about the challenges but that being said like that's a very legit challenge that I've spent a lot of time thinking about like can I even afford to live in Massachusetts when you talk about things like the debt that I had when I graduated from undergrad and law school and all those other topics so housing and then lastly and it's what the president was kind enough to meet with me today workforce challenges every challenge in Massachusetts right now in some shape form or fiction seeing some shape form or fashion has an impact on workforce challenges and more vice versa whether it be behavioral health whether it be a hospital the emergency room boarding that's going on where you literally go into a hospital and see people on journeys because there's not beds for them to get the type of care that they need right now it's backing everything up and the fact that you can call a provider today because you're going through something and literally be told yeah we can get you a appointment in 10 months when was the last time you talked to someone that was go somebody was going through something a very legit like I have to talk to someone and they were told yeah we got you it's call us back in 10 months does that even make sense to you we're hearing that a lot and that's and that's what's going on so there's any number of other issues that obviously are going on in this Commonwealth right now and we're going to take them all up but to me right now those are the three largest pressing issues in the Commonwealth of Massachusetts because if you think of all those issues any other issue that's on your mind right now that you're thinking and saying hey John didn't say that well guess what those issues that I just mentioned

impact that issue and the one thing that we're really starting to realize and I hope you take this from me because I think it goes to everything right we have for a very long time and Massachusetts and beyond viewed problems and challenges as if they all are in separate silos and what and what that means is and I'll give you I'll give you a perfect for instance I was at mass General Hospital the other day and they're really doing some cutting edge stuff in the substance use realm and what they've come to realize in this program that they're doing and they're piloting is they're saying OK we know that if someone comes through this door and they present with let's say they are in the throes of a heroin addiction a fentanyl addiction in many respects the model for treatment is to say OK well you're abusing heroin let's get you some medicine for that maybe you should go to an NA meeting or an AA meeting in other words treating their substance use disorder as a separate silo the way you do away with that is say OK well is there anything else I'm going on you know any anxiety issues any depression issues any serious mental issues going on right now you're getting rid of those silos hey by the way how about transportation hey by the way you have housing that seems kind of logical she asked me but that's not happening it's beginning to happen so all problems today are being dealt with through the lens and contemplated I should say and acknowledge through the lens of getting rid of separate silos and saying we need to break down all of these barriers and when someone comes forward to us and is looking for some type of a treatment we're not just treating that one issue we are treating the whole of the person and that is a monumental change for the way that things have been done for a very long time not just here in Massachusetts but beyond so yeah there's that you know I guess what I'd say is that I think that there are a lot of issues that come up that come in front of us that in many respects you can kind of I don't want to say not prioritized because that's not what I mean but there's a lot of votes that I've taken over the years where I've been able to say to myself as I'm driving home on the mass Pike you know that's important it's kind of important it impacts a certain group whatever it may be whatever the issue could be but I think tomorrow when I look at my emails I don't think there's going to be an overabundance of people weighing and saying great job John or John you're awful the issues that we're dealing with right now this coming session when we start taking a lot of our votes I don't think that's going to be the case with any of them I think there's way too much at stake and the one thing that I would say is really important to remember and you're seeing this debate play out right now as we're taking up the budget right now as the house is about to take up the budget and the governor's recommended budget Oh yeah by the way that's the other new thing we got a new governor so we're all kind of I should have I should have started with that anytime there's a new governor kind of go through this this time period of all right how's this new person going to be like what are their priorities what are their issues how do they engage on certain things so I did a I did a test I I was I was telling my staff this I'm like alright I'm going to send a text message to the new governor and I said the former governor responded to my text message in $45\ \mathrm{minutes}$ the last one that I sent them all right I'm going to challenge governor Healey and see how long it takes you to respond to my message this is going to be my decision on if I like this new governor very elevated way of thinking so I send the text message and I kid you not I walked in the other room because I have a 15 month old I came back and I sent the text at 8:03 and by 8:04 and two paragraphs written back and response I said wow governor Healey's not playing around and what I will tell you is this you didn't ask but I'm going to tell you for people in my line of work um a very ego driven job. I have no problem saying that it's very ego driven job. The fact that the chief executive and pushing aside the text thing every single issue for me it's mental health and veterans and federal affairs because in the Senate when you were the chair

that's really kind of your subject matter stuff every single issue we have the governor or her team are reaching out and saying hey what do you think of this or we are going to name a secretary of fill in the blanks what do you think that's really important. I have taken a lot of lessons and I would say that everybody in this room should take a lesson from that that if you're in a position and it doesn't have to be the governor of Massachusetts if you're in a position to solicit feedback from other people that's a very underrated skill and people really remember when you ask them for their opinion and it pays dividends. I have no idea why I just told that story and I forgot where I was going with where was that going with that before I told you about the text message, Somebody helped me out here. Big help here, thank you. OK so I was so the issues that were taking up the governor's, the responsiveness oh saying we have we have a new governor and learning the approach. Every governor has a different approach to bills that are filed the role of the legislature probably everybody here is familiar kind of with this the separation of powers and you know we had a very at times contentious relationship there was a lot of very powerful moments where we all got together with governor Baker but there were a lot of very contentious moments and so kind of seeing like that back and forth between the governor and the legislature you know in Massachusetts really the legislature right so the process you might you may or may not know this the governor just released her budget a budget from the governor in Massachusetts is very similar to a mayors budget recommendation at the local level is nothing more than a political statement nothing more than a political state so now what's happening now is that the House of Representatives just released their budget last week they're going to vote on it the next week and then we will take it up in may and essentially what happens in that process and I think this is important for you to know because what's happening in our world right now there's a lot of advocates are reaching out to us and saying hey help me through this process the governor and we refer to the governor's budget as each one H1 came out and funded I'll give you an actual an actual thing the governor just came out with a plan that in her budget she paid for free Community College for folks who are 25 and older the house just came out with a budget that essentially said and provided some seed funding to do just that and the Senate posture has been the Senate President is on record saying that Community College should be free for all. So you're having this back and forth right now where it's OK we're going to have a vicious debate on this part of the process and I'm giving you this more as this is the process as it play outs but the most important take away is that the reality is that the governor in Massachusetts has the bully pulpit if you will but when it comes to actual legislation and actual allocation of money very similar if you think about it to the national level where I think the Congress and the Senate actually wield a lot more probably power than actually the president of the United states does because there's strength in numbers and because of what the various constitutions say specifically as it relates to money. Why don't we break here and why don't we why don't we see what what's on your folks mind.

B. President Linda Thompson

Good afternoon. I was just meeting with senator Velis so if he got lost, he got lost in my building so he should be here shortly. So thank you Aaron for introducing me and you know one of the things is I just want to thank the student government for everything you do. You are so responsive and engaged in so many things on our campus and I really appreciate your willingness to let me come and speak with you this this afternoon but also just because you're who you are. Senator Velis wanted to come and meet with you this afternoon to talk about how he can support you as students. But also, how you can support the community surrounding our campus. His real big interest is the mental health issues that are impacting our students from all ages from birth all the way up through graduation is something that he's really

passionate about and he's going to talk to you a little bit about his interest in that this afternoon. I also want to thank you for organizing such a wonderful fresh check program. You know the goats were interesting. I did not pick up one but I thought oh OK, so you took it to a different level. But that fresh check day is a day that you were trying to look at ways that we could promote awareness of the health and Wellness needs of young people and how it's important to create a culture of health and Wellness on our campus. A lot of people participated and came, and I thought it was just very well-conceived and very well organized. I still wanted to just give a shout out to that leadership program that the students organized on Saturday. I understand you put the whole program together all of the words and everything in that program and they write up and I was just really impressed with the way you organized it so thank you. As the state and public university one of the things I just want to say is we are committed to looking at ways that we can respond to all of your needs and commit it to looking at ways that we can identify the resources that support students and support those resources that will improve the health and well-being for students on our campus and I want to just say and senator Velis isn't here yet but I want to commend him on his role in trying to work to address the mental health issues across our state as well as across our country. The senator was appointed to a national task force that's focusing on the mental health issues and our not only in the Commonwealth but also in our country and his role in trying to identify the mental health issues are important for him to look at ways that he can assess I've been talking about that you can assess the concerns of the mental health needs not only in Massachusetts but across this country. He understands that you are the critical resource that is necessary in order to understand and as he works with his task force he wants to use what he learns here in Massachusetts to try to take that information back to other parts of the country and help them also identify issues the Massachusetts legislator legislature and Senator Velis specifically have been aggressively working to address the challenges of providing care to young people in the commonwealth. He has successfully helped to usher in the mental health ABC's 2.0 act designed to reform the mental health care policies to remove barriers for treatment and Massachusetts. This act aggressively addresses some of the issues that prohibit people from receiving the healthcare and the needs that they deserve now. People like senator Velis and other lawmakers can't do this alone, they need you, they need your help. They need your help in trying to assess the size of the problem to understand what gaps exist and then to look at how assessing the issues and learning from you can lead to them developing better outcomes and looking at ways that they can end up visually assist you in promoting positive mental health. You know there is an urgent need not only to understand your needs but also to help more people like you make a choice to go into becoming a mental health and behavioral health provider going into fields like social work, counseling, nursing, psychology, and medicine. You know last week a report was produced talking about the needs of the Bay State we had 625 residents among those 625 residents who were not able to get treatment 131 of them were children they were waiting emergency rooms all throughout the Commonwealth to get a bed the reason why they couldn't get a bed and get the care is because of staffing shortages. This staffing shortage is a big issue and one of the problems is we cannot admit you for treatment if we don't have people to provide services. So right now we know that we have a large number of psychiatric beds in this in the Commonwealth but we have a severe shortage of about 2500 people in order to provide care. So, one of the things that I'm looking at that Westfield state we want to make a pledge that we're going to try to help fill that gap with the need of the crisis and mental health in our state by looking at ways that we can work to provide supports through tuition supports through looking at ways that we can help you get into

to a pathway for healthcare career but also to look at ways that we can find you jobs we intend to work with senator Velis to design programs to effectively create pathways for students to get a degree in behavioral health we also are looking at ways that we can get tuition grants and stuff subsidies to increase the number of people who can go into the field the surgeon general in the United states also talked about this need so our role here today and tomorrow and for a long time that I'm here as president of Westfield State is to look at health and well-being as one of the primary areas that I think we can make a difference not only here and Westfield but also in Massachusetts and across the country. Dven those of you who want to become lawyers like my friend here Aaron, he can look at ways that we can change laws. I just want to say I want to thank you senator for coming this afternoon know that everyone in this room here and everyone on campus is willing to work with you in order to look at ways that we can help you be successful in supporting your goal of improving the mental health services to our people on our campus and are you going to meet again before graduation yes OK so go invite me back to say thank you to all of the students who are getting ready to graduate you know I just want to say this class of graduates have done a class that I have worked with since I came to campus and I have just thoroughly enjoyed working with each and every one of you. Those of you who are staying like Joseph here are going to continue to work with me to make this place a better place. So I'll turn it back over to you president and you can introduce our next speaker to the senator our wonderful senator.

- i. Dan Lyons: I just want to say thank you so much for coming. Especially what you were saying about the housing crisis and behavioral health. My mom is a teacher at the Whitman Hanson district, and you know they're really see like a lot of that it's not different silos, it's all connected because they're seeing a lot of behavioral problems like kids who come from families where having like you know trouble finding housing and are suffering from drug problems. So, it's very positive to hear that you are keeping your finger on the pulse of these issues so thank you for doing that.
- ii. Senator Velis: and I'll just say this and thank you for those comments but one of the things that and this has happened like I've been coming here now since I've been in office to to government and and I think it's really important for you all to know and and folks that I come across from the community it's it's that it's that feedback that we get you know my my best ideas and thoughts have not come from talking to colleagues certainly have not felt I'm talking to comics and a lot of times they don't come from like advocates or lobbyists or paid big bucks it's having a conversation with someone again at the grocery store at the gym like everybody has a perspective so thank you for your words.
- iii. Ethan Haynes: I just want to say thank you taking a chance tell me when I first moved down here. It meant a lot. It was the first winning campaign I've ever worked on. It was a really fun campaign to work on and so I just want to say thank you for taking a chance with someone who just moved to the area.
- iv. Senator Velis: thank you for you know you reached out but you had just arrived from across the country and you hopped at the opportunity and you were a critical part of the team so thank you and I got the impression with you that you know some of my fondest memories in the world are working on political campaigns they're just cool door knocking some of the craziness that you confront going to door so it's great to see you and I wasn't going to say anything but you said it like thank you for everything thank you enjoy you're welcome anytime.
- v. Aaron Lessing: Alright, thank you for coming down. I think like in terms of mental health one of the things I personally been

- affected by is I have a sibling with severe mental health disorders and going to a hospital for psych wards beds are filled up and they're they've had to turn people away that are in bad circumstances in their life so I think that's should be a really big priority.
- vi. Senator Velis: It's absolutely huge so we have a so in Massachusetts right now there are 3100 inpatient psychiatric beds 2500 of them right now are filled we don't have the capacity to have anymore why not why do you think staffing we just had a debate a raging debate in western Massachusetts where I was one of the ringleaders pushing back on it where nursing homes rent close and don't and I think it's really important to not forget when we talk about mental health too and behavioral health let's not forget the demographic like what we would say is older adults they have gone through the wringer and it's and he let me let me also dispel another notion out there too as it relates to mental health in general I was under the impression prior to kind of going on this deep dive that COVID was really what made this mental health crisis just completely COVID exacerbated what was already going on across the board make no mistake about it that is a really big deal that exacerbated but these mental health challenges that we're having and I've got a lot of thoughts on what's driving it by long predating code but a big part of this so back to the nursing home thing is they were shutting down and DPH the Department of Public health made a lot of representations to us as a western mass delegation about how many beds were available because my big part of this debate was that if my constituents there is a facility in Westfield two in Chicopee one in Springfield another shutting down where are these folks from the go and my big thing was tell me the mile radius that they're going to stay in because obviously at these nursing facilities the families wanted to be able to continue to go visit their loved ones some of them didn't have families so it's important to keep them here so anyway the state made a representation to myself and a state Rep that there were 400 beds that were unfilled OK 400 bids that's pretty interesting because I'm getting multiple phone calls they from my constituents saying they've got two options go to Pittsfield they're going to Boston these are folks that are get Westfield Chicopee and Springfield which makes zero sense so anyway Long story short is that to quote them in their apology they've got in front of it there are 400 licensed beds that are out there but only a hundred of those 400 beds they had the staffing for and my response was you don't think you want to tell us that you don't have to staffing for them so when we go tell our constituents that there's 400 beds out there so if you don't have staffing for the beds you don't have beds period end of story that right there is the biggest thing out there so there's a lot of things right we need to hence my meeting today with the president we need to encourage folks to go into behavioral health we need to do things like tuition reimbursement loan forgiveness we need to offer scholarships all of this is in the pipeline right now this problem that you just referenced is big all over the state more acute in the far western counties but it's a issue all over the state but the reality is that we just don't have enough people who are going into these fields we just don't So what you're going to hear a lot one of my priorities for this legislative session is going to be and you know I'm going to divulge because I think it speaks volumes about the present so I had a very lengthy conversation with a senator from Eastern mass who is really the leader in really she's the chair of healthcare financing so she really is in charge of all of this stuff and she's the confidant the Senate President and just it was right after I got named the chair and a

conversation we started talking about the president and basically we're talking about the background of the president the public health stuff you know kind of what her background was leading into this and they just said that is the type of person who needs to be part of this solution with their back so find something Westfield state would be a great place to start where we can talk about things like a pilot program where at this university we are allocating resources IE tuition reimbursement loan forgiveness partnering with the university to get people to go into these fields substance use disorder mental health the impact of social media on mental health all these things are causing these numbers to go through the roof and then you've got facilities that are closing you're urgent cares in Westfield that are closing and you wonder why there's a crisis at our emergency departments and you wonder why there's no beds available again another consistent theme of what I'm going to keep on saying these are not separate siloed issues this issue is tied to this issue so if we address this we need to address this otherwise we're just playing whack and mole and the problems will keep coming up.

- vii. Daniel Currier: thank you senator Velis for coming today so my question is more related to cost of living so I'm looking to get an accountant one day and I am affiliated with the mass society of CPAs. So recently they did a poll because a few weeks ago they were talking about their clients most of them planning to move as you said before most of them that were eligible under the fair share amendment as a result I know the tax proposals recently very strong in terms of removing capital gains that that I think that would be changed I know most people won't know about the changing in chapter 62 F as well that might really hurt some people may want them to move so I know if you could talk about how you're kind of leveraging both sides of that I guess they're going to be I'm sure a lot of people that might move as a result of that increased the tax even though it does benefit us in higher Ed.
- viii. Senator Velis: I just want to get your that's a great point right so this kind of goes to the competitiveness of Massachusetts and how I mentioned Tennessee and other states so anybody that you know 62FS so 62 F is a valid proposal that was in 1986 that was passed and it was essentially that if revenue at the Commonwealth room exceed wages and different things that we would give that money back we give that money back to the people and it would amount to about 13% so it's only been triggered twice. Once in 1987 the year after we did it and then this year last year it was 13% so 2021 rather so everybody in Massachusetts received a check state tax so we'll be about 13% of your state income tax level. and I think why you asked that question there's a lot of debate right now about changing that right so that's across that so it's again it's a 13% of whatever you pay so our friends in the House of Representatives just passed in their budget something that said that no matter what you paid you just got a flat rate everybody was going to get the same and the larger point that was being made is the competitiveness in Massachusetts so everybody whether you refer to it as the fair share amendment the millionaires tax however like 1500 different names more right so the concern is that as a result of that the millionaires tax the fair share amendment as a result of 62F and changed and really right now and I think we're going to change this things like the estate tax right \$1,000,000 that's the realities especially with home prices right now how high they are doesn't take a lot to get to \$1,000,000 for you really to get whacked with that estate tax so and we're an outlier in that so moving that state tax value to two million as opposed to a million or governor Healey's case \$3 million but all of this

together right we could talk to the individual onesies and twosies all we want but what all of them have the impact of doing is they have the impact of making people say Massachusetts I'm done I'm out here I can't afford this I cannot afford to live here anymore with housing with the taxes with the lack of tax relief reform I can't afford this my kids can't afford this I want to own a home someday. I was really happy to see the speaker of the house the other day say that competitiveness thing that's a really big deal and Georgia, North Carolina, South Carolina, and Texas. Did anybody read this past Sundays New York Times article by David Brooks, if you haven't go back and read it and it was essentially about from 2010 to 2020. Remember David Brooks the New York Times article from 2010 to 2020 the number of people that were leaving blue states that we democratic run in moving to red states and it was like this isn't a this isn't this isn't theoretical this has happened and it's happened and again the states that folks are moving to are Georgia, South Carolina, Texas, Florida, and Tennessee and then they took it a step further because many of the communities where folks are moving to and this is where it gets kind of interesting is that many instances they are the blue cities within the red states so like Texas they're moving to Austin which is an incredibly blue state in Georgia they're moving to Atlanta blah blah blah you know that they're moving to the blue parts of the red States and and David Brooks got into a long big dissertation on this but one thing that he said to you is that irrefutable right now is that people are leaving Massachusetts New York Connecticut and other states because of cost of living and competitiveness and they're going to other states like they there and that's a problem and that lawmakers in the states that people are leaving need to really think about ways they can make Massachusetts more competitive I think a big part of that is ensuring that folks who are graduating college know at least that there's a path to getting a house someday if they want to know that they're not going to be in debt with student loans until the time they're 70 years old the fact that every single dime and their paycheck is it going to be eaten up by some various tax so you're seeing a reflection of that in Massachusetts right now the again I can't stress it enough but the speaker of the house who arguably has not always been for some of these policies has said now this competitive thing is a legit we can literally see people leaving with respect to the millionaires tax part of it what's interesting about that is that so if you look at it was very close right it passed what like 53 to 47 something like that very close and the folks who voted against it if you look at some of the data after the fact you know obviously for those types of numbers many people voted on that who weren't millionaires right they wouldn't have been impacted by tax but very similar to the debate you're seeing happening in Boston right now with rent control with mayor who's proposal it's you know this doesn't hurt us per se because I don't make that much money but our gut tells us that this is just the beginning and that next year it's going to be \$500,000 and the year after it's going to be \$250,000 and that causes folks to say you know what I'm high and that's unfortunately that's a very real thing and we've now starting to see data where people are leaving Massachusetts in all of those issues again right not to be redundant but those separate silos right breaking them down housing transportation are you familiar with the east West rail debate kind of that conversation so a little a little bit so I had a I had a conversation with that so east West rail from Boston to Pittsfield have a train that gets you there and one of the one of the powerful and I just did not do it justice with the description I just gave but it would connect all of Massachusetts

and one of the most compelling arguments for it some would say is that folks who live out here where the cost of living is cheaper can hop on the train and drive to Boston and drive to other parts of the state and get there really fast and then come back and live here where there's cheaper homes and cheaper rent so anyway I was talking to someone the other day who I consider to be the foremost authority and housing in Massachusetts they looked at me he goes you know this whole EW rail debate intrigues me just because all this talk about people coming out to western Massachusetts and living here and working in Boston where are these people going to live for them to live so housing. I want to ask but are you all seeing an uptick in prices rent and stuff like that right trickle it's like it's not that that's the other interesting dynamic too like if you're a if you're a numbers geek and sometimes I try to be at least go to people that are it's what's interesting is that it's not there's no sector there's no socioeconomic status that's immune from this strange times like it's incredibly difficult to buy very well off places and then all the way down and everything in between the prices have shot up and then to make it even more interesting the Wall Street Journal had an article the other day where they've noticed something that they hadn't noticed before back to Austin TX West of Austin they're beginning to see prices go down and the housing market and east of Austin they're still going up and they had a bunch of economists that were on there but we have no idea what's going on here because typically when it goes down it goes down or up together and the West is going down but the east is continuing to go up which fascinates me.

- ix. Adam Carpenter: thank you for coming down the it's sort of dressing the other half of what Aaron was talking about with the mental health crisis I think that a lot of folks need to be put on weight lists and federation of those because I know I personally was told there was like more than a year wait list like get like a simple like therapy session if I didn't want telehealth so like that's just not acceptable so that's like that's something that I think should be majorly focused on if we're doing legislation.
- x. Senator Velis: Huge focus of mine for this session that right there. That's sorry you had to go through that. I mean I had someone I know someone who I would go to recovery meetings where he was ready to get help right. By the way the three hardest words for any human being to say matter what the issue is I need help definitely period end of story. This individual raised his hand and said I need help I've been an off and on intermittent user of heroin opiates and obviously everything is adulterate with the fentanyl right now and he said I want help. They said reach back out to us we should have a bed in about a week two weeks. Three days later died from heroin all those that's the wrong answer folks that's the wrong answer so forget about a year that was a week it's just like that that right there I mean that's just and what I've come to appreciate with through my own struggles is that you know when a person when a human being is ready to take a step they're ready to cater stuff right it's not I haven't seen much success with the model if you want to know what my life is going really good right now I'm going to continue on this path of causing absolute destruction and chaos and I'm talking about the substance use from right now and I'm going to come back help and a lot of people that are no longer with us because of that and I'd be willing to bet that and I'm not going to do it but if I ask every person in this room by a show of hands to say if you have someone in your life right family friend that has been impacted by addiction you know I don't have to

actually have questions I don't answer that's just a reality where we are and we can and must do better.

- Joseph Bonilla: Hello today, I just want they wanted to like thank you for coming first of all I know I said that again and I also wanted to know that I appreciate your like what you call you I'm like dismantling like perspective of like silos in mental health and think that's really important especially coming from a psychology major. So I actually have been working on it from the of literature for like probably the last couple of months regarding that in relation to social, cultural and developmental factors, delayed diagnosis, and comorbidities that are going to arise from that. US society and we live in it's kind of individualistic. You know we want to just kind of like you do yourself. You get there whatever like kind of American dream I guess that being said. I was wondering where you and your committee fall on that I quess. Correlation with educational burnout right now in relation to mental health post pandemic, I think that, you know, it's really relevant and really important, especially considering the staffing shortages and like the lack of people in these professions, it's ideal that it's deeply correlated with like the fact that we're seeing some of the lowest graduation rates that we've seen probably ever you know and that really plays a huge part on the fact that you know I'm. And you know, some people are more praised. You being what's called falling through the cracks, that's kind of what I've been doing in my review literacy and who's going to the cracks and what's happening and a huge disparity especially in BIPOC communities in Springfield, Holyoke and Chicopee. I just wonder like what I guess if there's anything that you have to say like on behalf of that.
- xii. Senator Velis: lot to impact there bring that up I mean so it's to your point so I represent I don't represent Springfield but I do represent Holyoke and Chicopee and it's almost like so one of the things back at the that the national task force into right so we've got this behavioral health crisis going on what's fascinating about this is that it looks different depending on where you are right so when I'm talking to students in Holyoke right that is a very different conversation from when I'm in Russell which is incredibly challenging as well for a whole new set of reasons lack of services and all that stuff I think where we are as a committee is that we need to do a whole lot of meeting people where they are because everybody is at different place I don't know if you saw it was about two months ago and now the CDC's report that came out that was absolutely devastating in that adolescence boys and girls and then there's a whole other category right they haven't seen levels of sadness hopelessness and suicidal ideations ever and the one thing they kept on going back to is where we were failing a lot is in school these programs and I think with those school based programs that's really where you can do a good job leading people where they are but additionally you know having people there that share that lived experience that have been through something that look like you you're more comfortable with where you feel more disarmed going into we've kind of got this Willy Nilly you go there you go there because we don't have enough people in this industry big part of this is there's going to be an influx of state money that's going to be dumb towards a lot of this stuff but you know what I've really come to appreciate is that money in and of itself does not solve everything you can throw money at a problem unless you do something to address the underlying causes and do that deep dive. About what is driving this you can completely swing and miss so I think meeting people where they are the school based programs and creating environment where people are

more likely to succeed or at least have a fighting chance of succeeding the reality is and we know this and I'm going to say this in the in the substance use space we know I mean there there's an expression in recovery some people have to die some others can make it that's just a it's not the best maybe politically correct statements maybe but it that's true um that's a great question and I'd be interested in your findings in your research and yours I'd strongly encourage you to stay in contact because I wanted to say this to everybody here like if you want to come I'm the chairperson of the committee you've got something you want to say to the committee to your state government let me know I will call you as a witness just straight up call you as a witness so put that in your back pocket we can certainly follow up.

- xiii. Senator Velis: I got a question for you all can anybody here with straight face tell me that tell me right now what impact social media has on you all? A lot of people are anxious to answer that one I'm going to lead with this to try to open up this discussion I think social media is one of the main drivers of the mental health crisis that we find ourselves in right now somebody stand up and prove me wrong. so if I found the bill tomorrow banning tick tock in Massachusetts, you'd all be good with it? Now people want to talk.
- xiv. Joseph Bonilla: I mean I want to like you know emphasize that social media while it's a large component of like what we take in as individuals considering like the way that we communicate with each other and you know the way I guess like you know it's a larger portion of like like time lifespan just like you know looking on our screens doing whatever communicate with each other I mean I find myself facetiming turn it away but you know that's just part of like kind of the lives that we live and lead however I do think that what's it called he learned about my mental health issues in the past or learning curve just appears mental health issues really has to do with just the way that we interact with each other outside of that science like I mean you know cyber really something but there's like added benefits and negatives but I wouldn't say that also shouldn't be like that has a lot to do with just like um community you know the way that we knew each other things that we have the way that we communicate what we think the ideologies that we're leading the leaders that we're making it really just has to do with like this overall kind of that we have for ourselves here so i don't know if that answered your question.
- xv. John Velis: It's definitely a part of the discussion but let me ask you this. How many of you post on social media? What is the So what are the like what the main social media outlets that you folks use right now. what are they? TikTok, Snapchat, and Instagram so let me ask you so let's use Instagram because that's one where you can post right? And what about what about Facebook no so I had I had an intern about five years ago and I said hey what's your Facebook thing and you looked at me Facebook even say my parent like my grandparents dated me a little bit but so let me ask you a question so Instagram you can post and you get feedback right so my question is this when you post on Instagram how often do you go back to look at how many likes you have every so here's my question here's my here's my due out for all of you I want you to the next time you post on Instagram I want to challenge yourself and there's I want you to challenge yourself to post but not look at the engagement you get. Someone posted and they did not look at all happy pride didn't happen right did anyone so it didn't it doesn't happen and the reason so there is a so that CDC and especially yourself because this is like anybody who's in this long life in this wants to go into this

there is a debate raging right now raging and what is the driving force right now with we'll say youth like I don't know how to say youth adolescent mental health do you have a group of really smart people who say absolutely 100% social media and it was the way you find the first thing you do and I just read this in a book that wasn't my thought it was somebody else's ask folks the last time they posted it in check and the reason behind that is makes a lot of sense right it's like you're looking and you get one of you I was waiting for one of you to say when's the last time you did that and I would have told you it never happened never she posed and you're looking for that validation right you're looking to say hey that person liked what I put in there they thought it was cool they thought and that's for me it's a political post for someone else it could be what they were wearing for someone else it could be where they went and you're looking for that feedback loop of stuff like that and that's a big part of social media what has changed you're constantly looking and seeking and a lot of people a lot smarter than me would say if you're not finding if you posted this and only six people responded to you but your buddy posted in 150 people responded or whatever that makes you feel a certain type of way does it not does it not why can't I have yes they wanna talk does make you feel wet because so so this debate the impacts of social media versus other driving factors is going to be a really big it's a big focus of where I'm going potentially potentially with legislation hold just one second before you say no I'll say that go ahead please.

- xvi. Guess question: Not to shift the focus but I just wanted to ask you for advice. A factor of mental health is like microaggressions that go on campus. Like racism, homophobia, all of that. For example at Fresh check day last week, we were running a booth and racism was brought into our booth and it was kind of weird because we were all people of color and obviously that going to affect us in a certain way. So what do you have to say to our leaders here about how we can improve our campus in that form.
- xvii. Senator Velis: For me personally there's like there's zero tolerance for that right like not anything. I just want to make sure I understand you correctly you're saying that your the folks in your table is that what's happening or externally it was happening from externally. Both. For me personally there's 0 tolerance right that would be my thought that'd be my opinion that would be my guidance if anyone asks. O tolerance and to me I've got a really simple philosophy to you know in this and I always and I've said this from day one and this is this is I got you know I got this a drill instructor in the United states army talking to myself and folks from all different races who are getting ready to going to foot patrol who said guess what you get blowing up you guys all bleed the same color so I don't want to hear any of this BS about any race or anything like that now that's a very contained different environment. That's Afghanistan. blah blah blah but that's my posture there should be zero absolutely zero tolerance for anything that would be my advice to anybody whether it be leadership or whether it be a group of kids that was coaching their basketball game and I would say it in pretty direct less than friendly language.
- xviii. Chris Lannan: hi I just want to thank you so much for coming down I hate to turn it back over to talk about I guess it seems like we're having so much fun with this on social media but I do want to ask you for when it comes to treatment for mental health how are we getting low income families the treatment they needed making sure they're not on a wait list or not turned away you myself I grew up low income I just put on wait list I was

- turned away how are we going to you know make sure that doesn't happen because sometimes people who aren't the richest are the ones that need it most.
- xix. Senator Velis: so the problem with the question is that it's there's no problem with the question it's a great question and it kind of dovetails what we've said I mean so there there's I am convinced that the driver of the waiting list and access all gets back to staffing side now there are some delivery systems as it relates to insurance and the type of insurance you have and I'm going to go down a path I'm not sure I want to is everybody familiar with mental health parity laws because this is a dangerous topic in terms of how complex and nuanced it is and every time I talk about it my head is going to explode what is anybody familiar with the medical necessity determination that's made by insurance companies that that that kind of sort of so a big problem that we have and this is another part of it so there's a staffing part of it and then we've got I just took a meeting the other day that was the challenges of medical necessity and this is another area where I think we could address the waiting list so just to kind of give you a drastically oversimplified version of what we're talking about here is let's say I go to the doctor and the doc says to me John ABC is what I'm recommending this is what's wrong with you and AB and C is my prognosis OK what you need to do all that stuff so insurance part of AB and C requires insurance so provider calls the insurance we try to get that coverage and then what happens is there's a determination and that determination is a medical necessity determination the insurance company is deciding is this course of action medically necessary now what's wrong with that right out of the get go what's wrong with that is that is there anybody that should be a better decider of what I need as a patient than me and my provider but insurance company quite frankly someone at a desk who's never met me who's never anything with me has the authority to say Nope sorry doctor that course of action that you just recommended we don't find it medical necessary go back to the drawing board that's a driver of a waiting list because then what happens is the doc a lot of doctors and a lot of providers say OK how do we get beyond this loophole and none Tom is gone by time is going by you send it back up to the health insurance so is that there's met there's mental health parity laws which to this day we have not figured out and essentially mental health parity laws are essentially the US Congress has passed some and we've been really good essentially saying that you need to treat mental health the same way you treat physical health and just to be very clear that is a description that is incredibly vague incredibly oversimplified but that's the gist of what they are with so much nuance and so much to it and the reality is is that's that's not happen does not happen. It's just not happening why it's not happening is where the challenge is why it's not happening and I had a meeting the other day with mass health private insurance and a group of advocates who were pushing for speeding up this process and like four fist fights almost broke out of my statehouse office so it's a very contentious topic but anyone of these issues if we minimize that a little bit we'll have the impact of reducing some of those waiting lists that many of you had already have already talked about but it's inexcusable it's an excusable there's a lot of drivers.
- xx. Chloë Sanfaçon: Hi hello, how are you? I'm talking about understaffing at hospitals and stuff. Do I know there are a lot of bills on the table right now in terms limiting the amount of beds that a nurse can have. Which I think is good for nurses and good for their mental health as well and I know there's a lot of things that the Nurses Association support as well. What is the

likelihood that you say that those get passed and the impact that they would have on this issue?

- xxi. Senator Velis: oh so yeah just use that thank you and thank you for what you do also and they thank you nurse patient safety ratios so that's an interesting one right so so the the the reasoning behind it right if you talk to if you talk to many nurses in the Massachusetts nursing association it's a safety thing it's a patient thing we need to do that and what's challenging is that the hospitals and this was on the ballot in 2000 and 18 I want to say 2018 it was on the ballot and it was one of the most fascinating debates to watch because the initial polling on this was that the essentially the nurses position was going to win it was going to win big and then the hospitals got together and what many people say is one of the greatest political strategies ever deployed completely went the other way so I guess the short answer is depends on who you ask hospitals fight these to say they vigorously oppose them is an understatement so to answer your question what I could see happening is these bills are filed every year and when I first became a state Rep same bill was filed and kind of what we did was we split the difference right they had a it was A to to reduce the ratio in the entire hospital and and the hospitals I think did a really good job kind of mirroring what they were going to do a few years and they said look it should not be just a straight number across the board because the reality is is that and then this is the hospital talking to us not necessarily my opinion was we need to look at the acuity of the patients so they would say you know what you need in the ICU to be different what you need in a rehab floor so we split the difference and we did the mandate if you will just in the ICU and we kind of left the others out for it and that's what you're seeing now kind of that debate going forward So what I would predict is going to happen is that especially right now when there's been so much volatility so many hospitals have been the recipients of federal funds so there they are saying like if we got hit with this right now we would go under and I'll be clear I don't believe a lot of the hospitals tell me because I have a long list of being let down with a lot of stuff for services by the way services and a big part for western state students and the psychiatric stuff right up the road I'll be very honest with you but I can see compromise I can see us looking at it and saying OK what is the what is the next part of a hospital where they're actually makes a lot of sense to make sure that those ratios are tightened up so it is a patient safety thing but the actual entire hospital I've met I've talked to a lot of healthcare professionals who actually agree with the hospital standpoint and again you don't we want obviously patient safety is number one number 12345 but at the same time we don't need these same ratio ratios on this floor as we do this for this. I would be interested in hearing the president's take on this to be honest.
- xxii. President Thompson: I think that it necessary to consider the acuity but also the shortage of staff with the patient amount.
- xxiii. Chloë Sanfaçon: The other thing that I wonder is that having things in place to keep our nurses safe would keep them around for longer.
- xxiv. Senator Velis: a good point that's a good way to look at it if I understand what you're saying is that cause absolutely with the president just said like we can't with there's being such an acute acute shortage right now but you're saying where they stick around if there were some of these safeties in place that's an interesting one and I'm familiar with the California model and it's there's been a lot of issues in California and I'm always hesitant alright you got California that literally takes up an

entire coast pretty much and a little Massachusetts to him always hesitant to draw parallels between states that are so much different demographically but that's an interesting that's an interesting take. On this topic one area that we're really diving into right now that I think has had a a big driver of this is everybody familiar with these traveling nursing agencies that you want to talk about what is made hospitals bottom line which legit take a hit I mean when COVID came around you know what they were so you have this what a lot of people refer to as this great resignation right where a lot of people kind of just baby boomer generation kind of retired some of them that was a legit thing some people left the workforce but a lot of folks decided wait a second if I go to this traveling agency I can make three times what I'm making there so if you're a base stater you're Bay State noble or you're mercy you're taking a hit and struggling to stay open. The only way that they are able to afford that was federal money coming in that is no longer there. So now so luckily those traveling nurse rates have gone down but the havoc that they caused on the healthcare system significant but there's but there's like the another bill like the M&A the assault and battery and nurses right the violence against nurses I mean at a very fundamental level we need to protect the people that go into all we need to protect everybody but certainly folks in the healthcare professions too so I think that they will actually pass the patient safety one more of a uphill battle as it's currently.

- xxv. Levi Ekstrom: I just wanted to ask about the climate around anti LGBT bills we're talking about social media like I know there's the comparison point of it but there's also working on your feed and seeing all of the opposition everything and it doesn't affect Massachusetts as much but it definitely affects mental health and I'm also wondering about an update on anything that has to do with the plumbing codes in Massachusetts and the gender neutral bathrooms that's something that we brought up last year and I just was wondering if there was anything about that.
- XXVi. Senator Velis: so just in the first part just I want to make sure I understand I understand your question correctly or is it more of a statement just about the what was what was the first part?
- XXVii. Levi Ekstrom: the mental health component of it so like you were talking a lot about people's own comparison with yeah but I'm talking about like opening up your feed and seeing the status of the country and specifically for LGBT schools and I'm sure you know the statistics for LGBT people and mental health and that should be like a big focus of it.
- xxviii. Senator Velis: easy report that I was focusing earlier it was even exacerbating further absolutely so so it's interesting because so you're saying looking at a feed and seeing kind of this toxicity and all the other places it's crazy it's absolutely crazy and this is not to not to sound like a a sounding board for the New York Times but it was a phenomenal article from this past Sunday again kind of about the war that's going on in certain states against certain communities LGBT being the community right now that they're talking about and how it's kind of galvanized it was fascinating how it kind of got into this new war this is the new war against same sex marriage it's the same players involved it's the same everything only difference what you just pointed out is that unlike the same sex marriage debate social media wasn't a thing like that or if it was it was like Myspace and Facebook do you even know what Myspace is you know OK so the and I will let you know because I know about the plumbing stuff I will let you know because my I will ask Katie from my office tomorrow Katie who was supposed to be here with me today but I

told her to get home on the road I just let her she was in my office the president and I said go home and beat the traffic now I wish I didn't say that I will can you follow up with us and I will follow up and we'll let you know what we found or where it was good memory.

xxix. Sarah Harrington: Thanks for coming down. I really like that you brought up fentanyl and how crazy that it is. I think that a lot of people are not educated enough on how big of a problem that it is because it is not just illegal drugs, but you can get it in the drug store. It's in things like marijuana that people use medically can be messed with not just the drugs that are bad but any drug. So how are you looking to educate people more on it and not just fentanyl but also Narcan because that saves lives.

xxx. Senator Velis: reverse order Narcan the FDA just they just that's a really big news right Narcan going to be moving to over the counter which is phenomenal the one big question that many of us had have is what's that going to mean for cost you know it's going to have the stigma right so you're going to be able to get Narcan that you're filling the blanks the grocery store right now pharmacy there's a standing order which means that the executive office of health and services said that we are allowing pharmacists to prescribe this to anyone now you just go and grab it and I have talked to people I didn't want to go to the pharmacist because that stigma right so I think that's going to go a long way the biggest challenge with Narcan is it is the gold standard we know it saves lives everybody has seen it save lives access to it so over the counter that really big deal on the awareness front we are getting I am in a debate not a debate back and forth with a state agency right now about coasters so we know that many drugs particularly a lot of stimulants cocaine, Ritalin, Adderall, other things like that increase when you drink alcohol so there's been some success in other jurisdictions where if you're at a bar and you have a coaster to your drink presumably you put it down on the bar having public safety messages public health messages about fentanyl and that that that it can that it can kill you we don't have time for this but so there's this huge debate raging right now kind of in like addiction circles and there's this thing called harm reduction which essentially is kind of keeping people alive Long story short you're going to hear us spend a lot of time talking about these things called safe consumption sites and there's only two in America right now that are mandated sorry that are operating with a government sanction meaning government approval and both of them are in New York City and one of them is in east parliament I was at that facility about a month ago and it absolutely is fascinating what they have going on there but pushing aside where you are on this debate the one thing that I would say in light of the fact that fentanyl in light of every anybody heard of xylazine is showing up more and more overdoses it's an animal tranquilizer and the problem is that it's I don't the problem is that there's so many there's so many mixtures right it's like there's so many adulterations but it's showing that it's resistant from Narcan and some of the overdoses that are out there so it's a really big problem or you need more or it kind of does the job on the fentanyl or the heroin but it hasn't dealt with this xylazine so there is to your point the public awareness stuff is absolutely huge and my message for anyone here I spent a lot of time talking to our District Attorney in Hamden county friendly and the reality is we spend a lot of time talking about this is that if you a big problem we're seeing on social media is pills that are being advertised to stay in oxycontin and an Adderall and they're just kill process it's just not just the pill with fentanyl in it and we're seeing more and more people

die from those I did a ride along the other day with the Massachusetts State Police that Amherst so as you mass they had 900 pills 450 of them they were being sold as Adderall 450 of them were methamphetamine 450 of them were fentanyl students people were going to die or the guy so if and look I say this as a person in recovery I would be dead 100% if that was the system if that wasn't the product back then but unless you are picking up a prescription yourself at CVS or Walgreens assume that there is fentanyl that's how that's how dangerous it is right now and that message really needs to be spread here and beyond because the unfortunate reality is that someone is going to take a pill thinking it's something and unfortunately it's not going to be.

- xxxi. Justin Wald: Thanks for coming down. I really appreciate it. At the beginning of the pandemic when everyone was questioning things, I had two family members that were paying themselves through Med school and about to take enough final tests to get there and they were both considering staying in their current job that they've had since they were 16 which was in a restaurant and obviously other issues about the question or how they could get sick possibly die that was more or less the treatment and other stuff like that. Are there any ideas as to how to support nurses and get them to stay in the profession?
- xxxii. Senator Velis: so my meeting right before the president today is we've got 2 to \$400 million that we are tossing around right now for this thing called the behavioral health trust and and what we're essentially doing is we're going out to I don't want to say subject matter expert because I think that people in this room are subject matter experts right like I can get better information here in many instances that I can get from folks who have 150,000 degrees talking to what we're talking a lot of different stakeholders and what I can tell you is you'll probably see roughly \$150 million of that roughly could be a little north could be a little South of that dedicated to things like loan repayments scholarships and stuff like that particularly in the space of behavioral health what I can also tell you is that I have been given wide latitude to do exactly what I did today with the president here to say is there a way that we can at university level and I use myself as an example and I showed up as a freshman at the University of South Florida I had no idea what I wanted to do with my life is there a way that the state in partnership with Westfield State and other state universities can join forces by policies here by resources from us to if someone is undecided you know maybe encourage them because of that shortage and the workforce to go into these fields and what we will do is we will pay some of your tuition we'll give you a scholarship essentially incentivizing people to go into some of these industries where we have these challenges what I will tell you is that across the board euphemistically referred to as the big three in Massachusetts government governor speaker of the house and the Senate President all view this as the biggest challenge in Massachusetts right now with with housing so yeah there's a lot going on there but a lot not just talk there's tangents and stuff like that that behavioral trust behavioral trust financial stuff that's that's a real money that we're going to be making some announcements here soon.
- xxxiii. Kaolin Westcott: so earlier you were talking about you mentioned Russell and some of the other smaller towns in the county I'm from Russell myself so there's in the hill town there is hardly anything there's how many stores most of the time up until recently you had to drive 30 minutes and we get two grocery store here in Westfield so I know growing up in the hill towns it was extremely difficult for young people to get any sort of like counseling or center healthcare II myself have been struggling

with like PTSD for the past 12 years and I still haven't been able to find anybody that's been able to like take me in and I also had one friend that he gave up about 8 years ago and he ran away and he's been missing ever since because he couldn't find anything to help with that so like do you have any plans for the smaller towns because they really don't have the funds to do those things.

xxxiv. Senator Velis: so yeah right so earlier when I talked about kind of the the difference in you know the mental health behavioral health crisis looks very differently depending on where you are and I said Holyoke and I think I said Russell umm what's interesting about like Russell Montgomery and everything we've got this weird model going on where primary care doctors are actually ending up being the behavioral health doctors because there's nothing else so we're part of the conversation that I just referenced is OK we know that there are under so rural mental health is a crisis that's even worse than the mental health crisis that we're facing so one of the things that we're juggling on as part of these discussions and the behavioral health trust fund OK let's get even more creative let's see if there's a way that we can partner with universities and colleges and say alright if you take a job and one of these underserved communities and you can define underserved any number of ways but we'll just say the Russell model right like there's a lack of providers lack of access if you go set up a behavioral health practice and Russell we are going to pay for your college we are going to pay a semester of your college we are going to give you a scholarship some of the details we're working with right now with our friends in Michigan who did some of this stuff is what do you do if you do that and the student I guess the professional at that point in time takes the money and runs gets their education moves to California and starts doing there we're trying to struggle with that a little bit what do you do what do you go after for the money for a professional I mean it's just that although it might be appropriate it doesn't feel right yeah I mean that's a big part of it is tying it to regional areas because I am absolutely aware of the challenges in rural communities right Russell mount Goodman still blanks that's a really big deal right now because that waiting list that several schools several of you have brought up add a year to it for some of the health and then when you have things like that mobile hospital the father unit closing that has really big impact right like one of the biggest benefits of noble hospital Bay State noble yeah Westfield of course Westfield state absolutely but the surrounding hill towns too take that out of the equation and then they little Springfield it's a lot further big deal definitely part of the conversation and look number think about it the issue you just described the chairman of the committee yours truly represents Russell so I can assure you it won't be forgotten.

XXXV. Kaitlyn Egan: I know we've come here for a while so I was fortunate enough to work at the Massachusetts parole board last summer so I saw a lot of prisoners coming up for parole and for their first second times and also for their 7th or 8th time and the vast majority of them have had mental health issues substance abuse issues or combination of both most often is a combination and I know like all the psychiatric hospitals have been closed in Massachusetts at least so like the only place for them to go is prison where it goes untreated they come out that number one health number one mental health provider in the country right now prisons and jails when they're in there for and then 15 years goes by and when they're up for their first full hearing 15 years later with untreated mental illness and substance abuse they can't they can't be released because they're a dangerous society

they can't say with like without a doubt that they're not going to go and do something else again so they're stuck in prison and there's no there's no place for them to go and like I was thinking about this because you said you were the chairperson of the veterans as well and that is like one of the biggest populations that we saw so we're struggling with PTSD or schizophrenia and VA hospitals aren't equipped to have that like 24/7 watch for mental health crises so if that wasn't on your radar already I just wanted to like put it on there and was that something that we saw and we continue to see just that cycle that we can't seem to break.

- xxxvi. Senator Velis: it's an indictment of society it's criminal Massachusetts and beyond well Massachusetts we shut down what I quess would be referred to as mental health hospitals psychiatric hospitals many years ago and it it made a lot of sense at the time right it was for all intensive purposes it wasn't out of sight out of mind you know can't see you we don't know what's going on so it was let's let's immerse folks in the community which makes all the sense in the world my problem is that there wasn't the funding and the investment and investing them in the and the treatment modalities and all that stuff so what's happened by default is that jails and prisons have again become the largest mental health providers and the Commonwealth of Massachusetts and they're providing little to nothing aware of it I want to see the week after next I'm doing a tour of Massachusetts prisons and and that pricing in a roundtable with someone from the federal government my counterpart of the federal government with sheriff Kochi at the jail and for me it's kind of simple it's like what what are you providing what are you doing to ensure that this human being is in a better position when they left when they got there now what you just said to me hence what I said a little while ago you know some of the best information I get is from people that I come across it sounds like you're telling me not much of anything is going on.
- xxxvii. Kaitlyn Egan: yeah they their minds doing violence reduction programs and things like that but a lot of times people are compliant with taking their medication they say well whatever, and they put them in solitary confinement yeah which is the worst thing that yeah but honestly if it's that or having them injure or kill another inmate that's what the are going to
- xxxviii. Senator Velis: it's just a big issue it's a big issue it's a it's a big issue and it's all the way to it hasn't been I think we're all kind of agreeing with what like this mental health we could literally talk until tell you folks graduate and that's if you considering maybe some of you are freshmen too that's how much we could talk on this subject great point thank you for bringing that up.
 - C. Presidents Council:
 - D. Items not listed on Agenda:

IV. BOARD OF TRUSTEES' REPORT: Chloë Sanfaçon

- A. All University Committee:
- B. Student Advisory Council:

V. VICE PRESIDENT'S REPORT-STUDENT LIFE: Jack Guindon

I'm going to try to keep this as brief as possible have you like 7:10 already. Last Thursday I met with John Zocco to bring up everyone's concerns about housing from the previous week's meeting I had a lot of notes so I'm just going to pull them up laptop though alright so I tried to write a to report but I only got halfway through so oh the first thing that got brought up was Coed housing someone brought that up last week and I was told that there won't be any more Coed housing

added the explanation was that some students would be fine with it but others wanted and that right now they like the amount that we have. As for singles people wanted to buy out singles but that will not be an option until summer provided that we still have space left. Welch will not be open which I know was a concern. The explanation was that it was for grad students only. Themed housing is up for debate if there is a lack of interest in it then they will not have it. The last thing that I have is that next year once there is more staffing they want to do a town hall where they can hear complaints and they will tell you how they are going to try to fix it. That's about it.

- i. Levi Ekstrom: Point of information. The question wasn't that. The question was since when do we have a select number of Coed housing. There's no information about that and there is no number set, it is just all of a sudden that we are at max capacity for that. So I think that is something that needs to be readdressed.
- ii. Jack Guindon: Yeah, I might have wrote down the question wrong. The explanation that I got was that they won't add more.
- iii. Levi Ekstrom: I think that they need to be more transparent about the amount that they have to begin with and then go from there.

iv. Jack Guindon: Yeah, I agree. I will bring that up again.

- v. Daniel Currier: hi Jack so I will say yeah I I empathize of course with housing and it's a lot of stuff going on but at the same time my concern from an accounting standpoint from accounting perspective is that this is really costing university money with how things are going the real deficit really with the universities in rest life if you're not able to accommodate students we're not able to move forward they were just losing tons and tons of money out to off campus housing I've noticed plenty of students as a result of the process decides to live off campus it's not a great situation when that's the case is then we're we're without money we still have a debt to pay and then we're gonna meet and people are just gonna blame Steve for it and that's how the person that really is getting should be getting the housing process right now is not really working for revenue stream which should be working for the university and it's not working period so there really needs to be a conversation around how can we get more people in housing rather than just saying yes go be singles available later or we're just gonna grab housing I think maybe 5 grad students probably grab housing I also be marketed that's great but to be honest very few would even use it it's really just honestly a complete mess let's just say it from
- vi. Jack Guindon: I agree I I've been told by many people that the systems been broken for years and it's never been fixed so I brought that off and I was told that it's a software problem which obviously it's not if it's been broken also for the Welch I try to push for them to open it because I feel like more students would like that and it would draw people back on the campus and basically we just told that it won't be open so.

the start so hopefully gonna be wasted to fix this because I don't want to be on the board for trustees next year potentially

and have to see a deficit right in front of me because of

residency.

- Vii. Chris Lannan: two things I just want to know you may not have interest in this but what is the specific number of Coed housing that they're saying is a cap on is of like 100 to like what is it I don't know my question if you can get a number for all of us that would be great as well I think having a town hall with good idea but it might get out of hand. and I'll look into the Coed housing cap because I feel like it should just be if people want that they can have it should be limited to a certain number.
- viii. Justin Wald: I think a lot of these problems wouldn't exist if they didn't have a lack of communication and such a problem with

- transparency I just want to know why transparent communication especially with you know how they completely don't answer questions and just dive away and then give us some fake answer like our legislators trying to cater to voters. They're paid to do their jobs they're not doing it and they're not serving us in the community.
- ix. Jack Guindon: I think that there is a problem communication with students because they were telling me that during housing selection they were doing zooms and answering calls but everyone I've talked to had a problem and they weren't able to get it solved during housing selection so it seems like there's definitely a bridge that needs to be gap between the students and the housing.
- X. Ethan Haynes: Point of information. I have family members who work in residential housing not here other schools the cares act money has run out ever since legislation has been passed through Congress making COVID-19 no longer national emergency that maybe where some of their decisions are coming from that's what I told her decision coming from other universities I'm not saying West Coast specifically but there has been some funding cut off from the federal government to Higher Ed.
- xi. Joseph Bonilla: I was having housing trouble and Maggie answered which is something that no one knew about until like the last day of housing. There needs to be much better marketing for these things so that people on campus actually know about these things. That is definitely an opportunity for improvement for RES life.
- xii. Jack Guindon: I agree, something that they always say is that they are understaffed so if they had more staffing than they may be able to improve on that. I think if that is possible than they should look into that.
- xiii. Katie Egan: Maggie saved a few of my friends as well. So thank you for that. The second thing is that we need to address is the accommodation housing. I am a rising senior so I'm supposed to be the first person to pick my housing and there were so many rising sophomores already in New and University hall and when I knew some of them I asked how they got in to that housing and they told me that they had a gluten intolerance. For serious allergies, I understand but I think that it needs to be something more severe to receive accommodations.
- xiv. Jack Guindon: That actually did get brought up. I was told that housing and Res life has nothing to do with accommodations and they just accommodate the people who are on the list.
- xv. Katie Egan: Even for intolerances? One of my friends has Crohn's disease and she is unable to get accommodations.
- xvi. Jack Guindon: What I was told is that someone signs off on and housing accommodates it. Whoever is in charge of accommodation we should talk about people who do not have allergies and figure out what can be accommodated and it should be saved for more serious stuff.
- xvii. Levi Ekstrom: I'm thinking about the grad housing because grad students can't use a lot of the things on campus and I know that is a conversation that is being had but why would you live on campus when you can't use the things on campus. With the Coed thing again I'm sorry that is sort of being thrown on you and with the accommodations thing as well there really just needs to be more transparency into the process. I'm arguing that there should be no cap at all for Coed housing. With the system you can have a group of people that is Coed and then when it becomes your turn, now all of a sudden there is no more coed housing. If that's the case then don't let them group. You are advertising make your groups and keep your groups and then you are breaking them up.

- xviii. Jack Guindon: So a lot of the concerns that I am getting are about the software because the software doesn't understand the caps and stuff. I've been told that we can't ungrade the software due to cost but I think that if Res life looked into it would stop a lot of problems and more people would enjoy their time with Res life and wouldn't want to move off campus because there is a lot of groups of 5 trying to pick into a 6 person room and they weren't able to because of the software had some thing where you need to fully fill up the place.
- xix. Chris Lannan: One of the big problems was the lack of transparency, I'm a very compassionate person and have a lot of compassion for John for taking all this heat but if he could be just a little nicer and not be so rude. Every time that I go down to Res-life someone in front of me that is getting yelled at and I understand that it is a stressful job but he needs to be a little bit more transparent and nicer.
- xx. Liam Connor: I want to talk for a second about the software because I went to try to get on the waiting-list for the apartments because it was down for maintenance because that day was march 19th which was a Saturday and it was very much not that day so I had to go down to housing and said today is not March, can I get on the waiting list and they said oh that weird, yeah I'll just use my computer and they didn't seem very concerned about that.
 - A. Student Affairs Committee: No Report
 - B. Food Services Committee: No Report
 - C. Substance Advisory Committee: No Report
 - D. Student Athletic Advisory Board: No Report
 - E. Veteran Affairs Report: No Report
 - F. Enrollment Management Committee: No Report

VI. VICE PRESIDENT'S REPORT-ACADEMIC LIFE: Emily Fluet

- A. Academic Policies Committee: No Report
- B. Curriculum Committee: No Report
- C. Special Committee on Reforming General Education (SCORE): No Report
- D. New England Commission of Higher Education (NECHE)Self-Study Committee: No Report
- E. Campus Academic Master Plan (CAMP): No Report
- F. Parking Control Board: No Report
- G. Parking Appeals Board: No Report

VI. VICE PRESIDENT'S REPORT-STUDENT EQUITY: Rodney Duteau

A. Diversity and Inclusion Committee: No Report

VII. VICE PRESIDENT'S REPORT-FINANCE: Daniel Currier

- A. Finance Committee: No Report
- B. Foundation Report: No Report
- C. ITSAC Report: No Report

VIII. VICE PRESIDENT'S REPORT - PUBLICITY: Elizabeth Mercer

- A. Neighborhood Advisory Board: No Report
- B. Community Relations/Fundraising Report: No Report
- C. Owl Ball Committee: No Report
- D. Blue Key Committee:v

IX. EXECUTIVE SECRETARY REPORT: Adam Carpenter

X. PARLIAMENTARIAN REPORT: Liam Connor

- A. Rules and Regulations Committee: No Report
- B. Constitutional Review Committee: No Report
- XI. COMMUTER COUNCIL AND CLASS COUNCIL REPORTS:

- A. Commuter Council: No Report
- B. Senior Class: No Report
- C. Junior Class: No Report
- D. Sophomore Class: No Report
- E. First Year Class: No Report
- F. Apartment Complex: No Report
- G. Courtney Hall: No Report
- H. Davis Hall: No Report
- I. Dickinson Hall: No Report
- J. Lammers Hall: No Report
- K. New Hall: No Report
- L. University Hall: No Report

XII. UNFINISHED BUSINESS:

XIII. NEW BUSINESS: (Requires majority vote to be opened)

XIV. ANNOUNCEMENTS:

Adam Carpenter: I have two quick announcements. The first is that if you have had any problems with elections, please let me know. The second is that if you have any systematic complaints about food services, please let me know after the meeting so that we once again have something that we are able to talk about as we didn't meet this past week.

Elizabeth Mercer: Just a reminder that Blue Key Committee meets tomorrow from 5 to 7pm. Also after the meeting can you come up to be and give me sizes for the apparel that we are getting.

Dan currier: Just so you are aware there is going to be final candidates for the VP of enrollment management and student affairs. That will be announced in your email probably soon. Engage in the opportunities for students to get involved in the process.

Rodney Duteau: I sent out a flyer on our SGA group chat about unity week, we are hosting in collaboration with SAIL and a lot of affinity club leaders that we are going to have each of them hosting an event. This Friday we will have Triple Threat Dance and there will be a concert on Saturday.

Chloë Sanfaçon: I have a board meeting next Tuesday. If you have anything to discuss about it please let me know. Levi Ekstrom: 31 days until commencement.

- XV. <u>ROLL CALL</u>: Mikayla Evans, Haley Kane, Maggie Roberts, Eric Hardy, Loic Black, Alexandria Mallios, and Lukas Apel were absent from the meeting.
- $\frac{\text{ADJOURNMENT}}{\text{April 25}^{\text{th}}}$: The meeting was adjourned at 7:29pm until Tuesday

Please also note that for accurate record keeping purposes, SGA meetings are recorded and kept on file by the SGA Executive Secretary.