

# **Catalyst for Wellness in Community**

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Apprenticeship Program

A stylized graphic featuring three human figures in red, blue, and yellow, arranged in a triangular formation. Each figure is composed of a thick, curved line for the body and a solid circle for the head. The red figure is in the center, the blue figure is on the left, and the yellow figure is on the right. They are all facing towards the center.

**An Apprenticeship Model for  
California's Behavioral Health  
Workforce**



# INTRODUCTION



## BACKGROUND

**1 in 6 Adults**  
**1 in 14 Children**  
EXPERIENCES A SERIOUS  
EMOTIONAL DISTURBANCE

California is facing a serious behavioral and mental health crisis. Roughly one in six adults in California has a mental health condition, and 1 in 14 children experiences a serious emotional disturbance (Coffman et al., 2018). Nearly 11 million people in California live in Mental Health Professional Shortage Areas (HPSAs), where practitioners are scarce and access to services is limited; consequently, only 22% of the California HPSA population's mental health need is met

(Bureau of Health Workforce [BHW], 2025; Paraprofessionals in California's Behavioral Health Workforce, 2023). The state currently faces a 37% gap in the supply of non-prescribing licensed clinicians and a 38% shortfall in psychiatrists, with shortages projected to worsen in the coming years (HCAI, 2024). As a result of historic, systemic inequities related to healthcare, income, education, and other social determinants of health (SDOH), this staggering gap in access to care is disproportionately felt in communities of color, immigrants, low-income families, and rural populations. (Meeting the Demand for Health February 2019).

For example, major depression is undiagnosed and untreated at disproportionately higher rates in majority Black and Hispanic communities than White communities, and 67% of immigrant adults with serious psychological distress (SPD) did not see a health care provider for their mental health needs (Blue Cross Blue Shield, 2022; Padillo-Frausto et al., 2023). Although health insurance availability has increased, the barriers to access services remain. The reach of traditional mental health systems is constrained by the uneven distribution of providers, who may lack training in trauma-informed or community-centered care, making the existing systems even less effective (Coffman et al., 2018).

This problem is exacerbated by a behavioral health workforce who do not adequately reflect the racial, cultural, linguistic, or lived experiences of their clients, which makes it difficult to build trust and engage in effective care. For example, 72% of non-English speaking immigrant adults with SPD had unmet mental health needs, highlighting a huge gap in linguistically relevant services (Blue Cross Blue Shield, 2022). Additionally, recent data suggest that while Latinos make up nearly 40% of California's population, they represent only 17% of licensed behavioral health professionals, and less than 7% of psychiatrists, revealing a significant disparity in representation and cultural alignment between providers and the communities they serve. (HCAI, 2024). Paired with evidence that Hispanic individuals prefer providers who share similar life experiences, and when those options are not available, they are more likely to seek mental health information outside of the health care system (Blue Cross Blue Shield, 2022).

In addition to representation and access concerns, the behavioral health workforce faces a severe shortage of staff, low wages, and limited career development opportunities. Low paying entry-level positions with little chance of advancement contribute to high turnover rates. At the same time, traditional pathways into behavioral health careers typically require advanced degrees, unpaid internships, and expensive credentialing or certifications, which can be difficult to access, especially for individuals in under-resourced communities. Even those agencies that want to grow their workforce often lack the necessary funding to train and retain staff, leaving key positions vacant and limiting their ability to serve clients effectively (Paraprofessionals in California's Behavioral Health Workforce, 2023).

These systemic challenges have created a behavioral health system that not only struggles to meet demand but also fails to effectively serve the communities most impacted by inequities.



# INTRODUCTION



## THE ISSUE

It's clear that we need a more effective solution to support these disproportionately impacted populations who also oftentimes face language barriers, unstable housing, immigration issues, and/or oppression-related trauma. Despite the well-documented relationship between SDOHs and mental well-being, behavioral health services still often work in isolation from/lack integration with other high priority areas like education, housing, and employment, continually failing to address the key factors that affect mental well-being (Mental and Behavioral Health Workforce Needs Assessment - Centers of Excellence for Labor Market Research, 2022).

The typical path to a career in behavioral health is not designed for people who bring valuable cultural understanding and personal experience. Entering this field usually requires expensive and lengthy education, which is out of reach for many, especially those from underrepresented groups or with nontraditional educational paths (Coffman et al., 2023). The disconnect between community needs and available services leaves many without meaningful behavioral health care. Rethinking, redesigning, and rebuilding the behavioral health workforce from the ground up is now more critical than ever.

## THE SOLUTION

The Catalyst for Wellness in Community (CWC) Apprenticeship Program is designed as a hands-on, equity-centered response to the historical gaps in California's behavioral health workforce. At its core, the program builds a more representative, community-centered behavioral health workforce, one that better reflects the cultures, languages, and lived experiences of the people most impacted by service disparities.

By offering an earn-and-learn model, the apprenticeship program helps individuals overcome the financial, academic, and systemic barriers that have made higher education and clinical careers out of reach for many. Most of the CWC apprentices have direct experience with the challenges their future clients face. Their lived experiences, including navigating foster care, mental health systems, housing instability, or immigration issues are not only valid, but they're also a strength.

This program recruits and supports apprentices from underserved communities, including those within HPSA- designated areas. Apprentices are more likely to live in the same communities that they serve, bringing higher levels of trust, cultural humility, and empathy to their work. This model fosters stronger connections between providers and clients, increasing access to care that feels safe, relevant, and effective. In addition to on-the-job training, the CWC Apprenticeship provides personalized academic and professional support to empower apprentices to succeed in their roles and grow into long-term behavioral health careers.

The result is a growing pipeline of diverse individuals with real-world experience and strong community connections, who are better equipped to provide trauma-informed, strengths-based care. This model helps shift the behavioral health system away from a one-size-fits-all approach to one that is more inclusive, sustainable, and community-based.



# PROGRAM OVERVIEW



The Catalyst for Wellness in Community (CWC) Apprenticeship Program is a competency-based, earn-and-learn model designed to develop the next generation of behavioral health professionals in California. CWC is supported by funding from the California Department of Health Care Access and Information (HCAI) through the Health Professions Pathways Program (HPPP). Administered in partnership with Chabot–Las Positas Community College District and The Catalyst Center, the training and research arm of The California Alliance of Child and Family Services, this grant was awarded to expand opportunities for economically disadvantaged and underrepresented individuals to pursue careers in behavioral health, particularly in underserved communities across California. The program blends paid on-the-job training with structured academic coursework and comprehensive support, with a strong focus on equity, access, and community impact. Initially launched as a two-year program, CWC has expanded into a three-year model to better meet the growing complexity of behavioral health needs and align with California’s workforce goals. This shift allows for deeper skill development, greater academic attainment, and increased career mobility for apprentices. The extended program prepares participants for more advanced roles in behavioral health and wellness coaching, including facilitation of group programming, behavioral health screenings, and team-based care coordination.



The updated model also supports apprentices in completing an Associate of Arts for Transfer (AA-T) degree, positioning them for long-term career advancement and transfer opportunities to four-year institutions. Apprentices who complete the three-year program will meet the educational requirements to obtain Certified Wellness Coach I status. California Wellness Coach certification is an emerging credential aimed at building a larger and more diverse workforce to support the growing behavioral health needs of children and youth across the state.

## INCLUSIVE RECRUITMENT AND REGIONAL IMPACT

The Catalyst for Wellness in Community (CWC) Apprenticeship Program is grounded in a belief that workforce diversity is essential to addressing California’s behavioral health crisis. From its inception, the program has taken a proactive approach to recruiting individuals who are not only underrepresented in the field, but who bring lived experience and deep connections to the communities they aim to serve. This intentional focus has allowed the program to strengthen local behavioral health systems by cultivating a more inclusive, community-centered workforce.

Highlighting how the program fosters both personal transformation and community impact.

As one apprentice reflected,  
“I have been able to proudly become the first generation Hmong-American in my family to pursue college. This program is giving me the opportunity to pursue a career where I would be able to serve the Hmong community, break generational trauma and poverty...”  
(see Appendix F)



# PROGRAM OVERVIEW



## TARGETED OUTREACH AND SELECTION

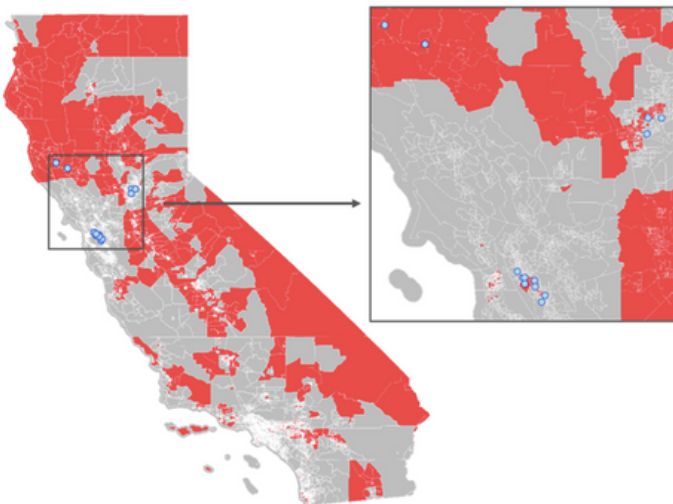
ICWC uses equity-centered recruitment practices to reach candidates who have traditionally faced systemic barriers to behavioral health careers. Instead of relying on conventional pathways that favor those with degrees or prior clinical experience, the program collaborates with community-based organizations, local education agencies, and service providers to identify individuals who may not have formal credentials but have the compassion, motivation, and commitment to serve others and make a difference in their communities.



The application process is designed to be accessible and welcoming to people from a range of backgrounds, including those with experience in foster care, homelessness, incarceration, or immigration-related challenges. Recruitment materials use language that resonates with these groups and clearly convey that lived experience is an asset, not a limitation. This approach ensures that the apprenticeship program is not only inclusive in theory but actively removes common barriers to access in practice. These efforts have expanded access to behavioral health careers and signaled to prospective apprentices that they belong in this space.

## GEOGRAPHIC REACH

The CWC program has established a statewide footprint, with employer sites and apprentices located in both urban and rural counties across California. The program expands access in regions where traditional workforce pipelines have failed to meet local demand.



Many of the counties and neighborhoods where apprentices and employer partners are based fall within federally designated Health Professional Shortage Areas (HPSAs). These include geographic HPSAs, where entire communities lack sufficient behavioral health services, as well as population HPSAs, which highlight service gaps for specific groups such as low-income residents or immigrant populations (see Figure 1).

By working in these high-need areas, the CWC program is expanding the behavioral health safety net where it is most urgently needed. Apprentices are often serving in the same communities they live in, allowing them to offer culturally relevant support and establish meaningful trust with clients. In this way, the program's geographic strategy reinforces its broader equity goals.

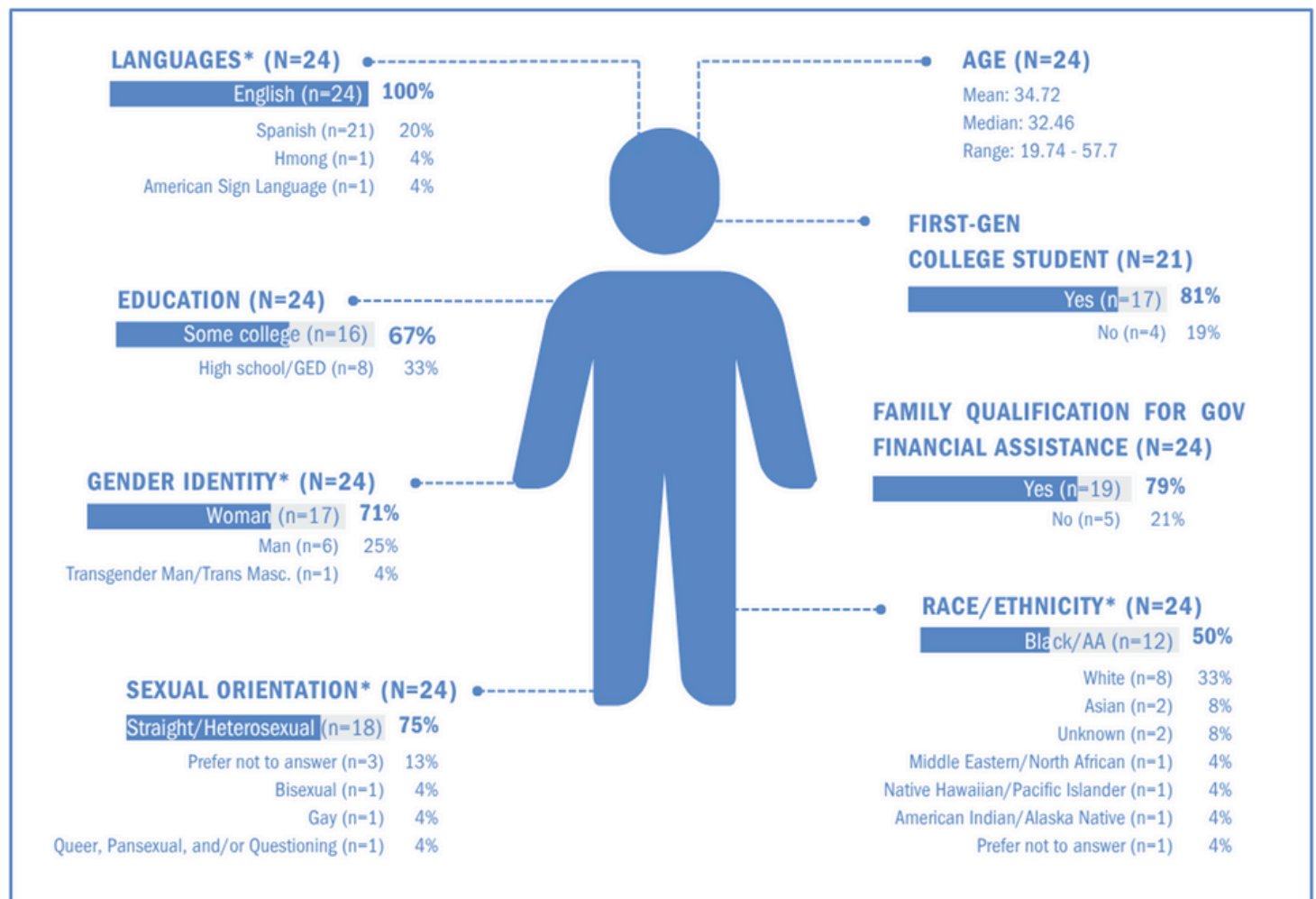


# PROGRAM OVERVIEW

## APPRENTICE DEMOGRAPHICS AND IMPACT

The diversity of CWC's apprentice cohorts reflects the program's success in meeting its inclusion objectives. Among the apprentices, 79 percent have immediate family members who qualified for government financial assistance within the past 2 years (a possible proxy indicator for "low-income"), and 81 percent were the first in their families to attend college. Seventy-one percent identified as women, and one apprentice identified as transgender. Half of all apprentices identified as Black or African American, and the remainder represented a range of racial and ethnic groups, including White, Asian, Middle Eastern, Pacific Islander, American Indian, and multiracial individuals.

Apprentices also brought important linguistic diversity to the field. While all reported fluency in English, 20 percent spoke Spanish, and others reported proficiency in languages such as Hmong and American Sign Language. This linguistic capacity, combined with apprentices' cultural insight and lived experience, strengthens their ability to meet clients where they are and deliver care that feels safe, familiar, and accessible. CWC's recruitment model demonstrates that when systems are redesigned with equity in mind, it is possible to bring in new talent, reach underserved communities, and begin closing longstanding gaps in behavioral health care. See Figure 2 below for a visual summary of the apprentices' demographics.





# ACADEMIC FRAMEWORK



The CWC Apprenticeship Program was designed not only to provide immediate job training, but also to support long-term educational and career advancement. To achieve this, the program includes a clear academic framework that integrates credit-bearing coursework, degree progression, and individualized educational planning. This structure ensures that apprentices can earn college credentials while gaining practical experience, without having to choose between school and employment. All courses are provided by Chabot Community College and are mapped with the Social Work and Human Services, Associate in Arts for Transfer Program.

## COURSEWORK STRUCTURE

Throughout the three-year program, apprentices complete a series of college courses that are aligned with behavioral health competencies and California's public higher education requirements. Courses are virtual and scheduled with flexibility in mind, recognizing that apprentices are working while attending school. Instructors are trained to support adult learners, and content is often tailored to reflect the real-world challenges apprentices encounter in the field.

Each semester, apprentices earn college credit, steadily building toward a degree while also meeting their apprenticeship training milestones. The coursework complements on-the-job learning and prepares apprentices for more advanced roles in community mental health, case coordination, and wellness education. Students gain knowledge of the theories and practices in Social Work, Behavioral Health and other Human Services, engage in experiential coursework and prepare them for a transfer pathway into Social Work and Human Services Degrees.

Core Courses	15 Semester Units	270 Hours
Major Courses	15 Semester Units	270 Hours
General Ed.	30 Semester Units	540 Hours
<b>Total</b>	<b>60 Semester Units</b>	<b>1080 Hours</b>

To satisfy the related instruction requirement as outlined in the Department of Labor registered apprenticeship standards, apprentices must complete a minimum of 60 semester units, or the equivalent, in a combination of degree specific courses and general education courses (See Appendix E). Each of the 60 semester units are on average 18 hours per unit and total a minimum of 1,080 hours. The hours may vary based on educational institutions contact hours per unit ratios.

## DEGREE ALIGNMENT

The academic pathway is intentionally structured to support completion of an Associate of Arts for Transfer (AA-T) degree in Social Work and Human Services at Chabot Community College. The AA-T pathway allows apprentices to transfer to a California State University (CSU) campus with junior standing, should they choose to pursue a Bachelor's degree. This alignment ensures that the credits apprentices earn count toward something meaningful, not only within the apprenticeship, but also beyond it. This pathway reinforces the idea that apprentices can and should have options, including further education, career mobility, or both. The coursework is purposefully grounded in practical theory and comprehensive, skill-based instruction. This design ensures that apprentices build both the conceptual understanding and applied abilities required to contribute meaningfully to their organizations and the communities they serve.

For many apprentices, this is the first time they have seen a college credential as achievable. The structured, supported approach helps remove the guesswork that often makes degree completion so challenging for nontraditional students.



# ACADEMIC FRAMEWORK



## EDUCATION PLAN MAPPING

Early in the program, each apprentice works with an Academic Counselor to develop an individualized student education plan. This plan outlines the courses needed to complete the AA-T degree and helps apprentices balance school, work, and personal responsibilities. As apprentices progress through the program, these plans are revisited and adjusted as needed, ensuring that each participant remains on track and can visualize their academic trajectory.

To help apprentices visualize this academic journey, the program developed a sample Education Map (see below). This map outlines a typical progression of coursework and related instructional hours over the three-year program, aligned with apprenticeship standards and degree requirements. While individual plans may vary based on prior credits or scheduling needs, this framework provides a clear pathway toward degree completion and certification readiness.

The Education Map reinforces one of the program's key design principles: helping apprentices steadily build academic momentum while balancing work and life commitments. It also supports transparency, so apprentices know exactly how each semester contributes to both their apprenticeship milestones and their long-term educational goals.

Fall A	Spring A	Summer A	Fall B	Spring B	Summer B	Fall C	Spring C	Total
9 Sem Units	9 Sem Units	6 Sem Units	9 Sem Units	3 Sem Units	9 Sem Units	9 Sem Units	6 Sem Units	60 Sem Units
162 Hrs	162 Hrs	108 Hrs	162 Hrs	162 Hrs	54 Hrs	162 Hrs	108 Hrs	1080 Hrs

Apprentices consistently report that having a clear academic plan helps them feel more confident and motivated throughout the program. Regular advising and plan adjustments ensure that each apprentice stays on track, even when personal or professional circumstances change. By making degree attainment an integrated and visible part of the apprenticeship, the CWC model removes many of the uncertainties that have historically discouraged underrepresented students from pursuing higher education.

This kind of proactive academic planning is especially critical for first-generation college students, who may not have family members or mentors to guide them through the educational system. By making the academic path transparent and tailored, the CWC program helps ensure that all apprentices have the opportunity to complete a degree and build a strong foundation for future success.

## WORKPLACE INTEGRATION AND PROFESSIONAL DEVELOPMENT

At the heart of the CWC Apprenticeship model is a commitment to learning by doing. The program embeds apprentices within behavioral health organizations across northern California, offering them meaningful paid work experiences that are directly connected to their academic learning. This integrated model not only strengthens apprentice skills and confidence but also meets real workforce needs for behavioral health employers.



# ACADEMIC FRAMEWORK



CWC works closely with employers to ensure that the workplace experience is structured, supportive, and aligned with industry standards and apprenticeship competencies. Apprentices contribute valuable services while also developing core competencies that prepare them for long-term careers in the field.

## EMPLOYER MATCHING AND ONBOARDING

CWC uses a dual-pathway approach to connect apprentices with employers. Some apprentices are internal candidates. These individuals are already employed by behavioral health organizations who show strong potential for growth. Others are new candidates who are recruited through outreach and then matched with an employer through a facilitated interview process. This flexibility allows employers to either develop their existing workforce or bring in new talent that fits their mission and service model. The current employer partners are all community-based organizations with entry-level positions serving children, families and/or youth.

By investing in their current employees and thoughtfully integrating new apprentices, employer partners are helping to build a stronger and more stable behavioral health workforce from within. Apprentices contribute immediate value in frontline roles while also gaining the education and competencies needed for long-term advancement. This combined benefit of meeting present service needs while preparing future behavioral health professionals makes apprenticeship an especially effective strategy for organizations that face persistent workforce shortages and high turnover in entry-level positions. Through ongoing collaboration with the Catalyst Center, employer partners play an active role in shaping program design, refining competency expectations, and strengthening workplace integration practices. This ensures that the apprenticeship continues to align with both current organizational needs and broader workforce goals.

In addition to developing internal candidates, employer partners can choose to add new apprentice positions to build their workforce pipeline. When this occurs, external candidates are recruited through targeted outreach and referred to employers for consideration. Each employer retains full decision-making authority regarding candidate selection and conducts private interviews to ensure alignment with the organization's mission, service model, and staffing needs. This flexible structure allows employers to grow their teams with new talent who are both well-supported through the apprenticeship and committed to serving in high-need behavioral health roles.

Once a match is made, the program provides onboarding guidance for both the apprentice and the employer, ensuring clear expectations, orientation to the apprenticeship structure, and support for integrating the apprentice into their new role. This early investment in relationships helps set the stage for long-term success.

## ON-THE-JOB LEARNING

Over the course of the program, apprentices complete between 2,000 and 3,000 hours of hands-on training. This work includes activities such as client engagement, documentation, care coordination, and participation in wellness programming.

Apprentices are guided by a clearly defined set of core competencies that outline the knowledge, skills, and behaviors required to succeed in their roles and advance in the behavioral health field. These competencies reflect trauma-informed, culturally responsive, and community-centered care practices aligned with California's behavioral health priorities. They were developed in close collaboration with employer partners and the Chabot-Las Positas Community College District to identify critical and emerging practices necessary for new practitioners. The competencies are also aligned with expectations established by the Department of Health Care Access and Information (HCAI) for Wellness Coach certification, ensuring relevance to current workforce standards and future career advancement.



# ACADEMIC FRAMEWORK



Competencies guide both on-the-job learning activities and formal evaluation. Apprentices complete monthly self-assessments tied to the competency framework, fostering reflective practice and continuous growth. Progression through the program, and ultimate completion, requires demonstration of proficiency across all required competencies (see Attachment E: Core Competencies). This structure ensures that graduates are not only academically prepared, but also fully ready to deliver high-quality, community-centered behavioral health services.

Employers gain immediate value from the contributions of apprentices while also investing in their future workforce. Apprentices are trained to serve children, youth, and families with empathy and cultural humility, making them particularly effective in community-based settings. Many are placed in roles that would otherwise be difficult to fill, especially in underserved regions or organizations with limited capacity for recruitment and training.

## MENTOR AND SUPERVISOR SUPPORT

Each apprentice is paired with a workplace mentor who provides regular guidance, skill modeling, and performance feedback. Mentors are trained to support apprentice development and play a critical role in helping them apply classroom learning in real-world settings. They also serve as a vital bridge between the apprentice and the organization, facilitating communication, creating opportunities for observation and shadowing, and contributing to formal evaluation and feedback processes. This relationship is structured, intentional, and built on mutual trust which supports both the personal and professional growth of the apprentice.

In addition to mentorship, direct supervisors are engaged in the formal evaluation process, using competency-based tools to assess apprentice progress at regular intervals. This structured supervision helps ensure accountability while also providing apprentices with opportunities for reflection and growth. Many apprentices report that the feedback and encouragement they receive from their mentors and supervisors are among the most valuable aspects of the program.

## CAREER PLANNING AND ADVANCEMENT



CWC supports apprentices not only in gaining experience, but also in building a long-term career path. As apprentices near program completion, they receive help developing their career plan and identifying next steps.

For employers, the apprenticeship becomes a pipeline for hiring well-prepared, mission-aligned professionals who are already familiar with the organization's culture and clients. The model addresses longstanding recruitment and retention challenges by building a more stable, skilled, and representative workforce from within.

In many ways, the workplace experience is where the promise of the apprenticeship becomes real. Apprentices gain confidence, competence, and clarity about their future, while employers benefit from a more diverse and prepared team. This reciprocal value is one of the clearest demonstrations of the program's impact.



# COMPREHENSIVE SUPPORT FOR EQUITY & SUCCESS



The Catalyst for Wellness in Community Apprenticeship Program was designed with equity at its core. Recognizing that many apprentices come into the program facing barriers that extend far beyond the classroom, CWC offers a robust system of supports that addresses both academic challenges and personal circumstances. These supports are not add-ons, they are essential components that ensure apprentices are able to stay engaged, persist through challenges, and complete the program with the confidence and tools needed to build a meaningful career.

## Academic Supports

While coursework plays a central role in the apprenticeship experience, many CWC apprentices need more than just access to classes. They need guidance, structure, and encouragement to navigate the college system. Early in the program, apprentices receive onboarding and academic “ramp-up” support, including orientation to college life, time management coaching, and help connecting with campus resources. This is particularly critical for the 81 percent of apprentices who are the first in their families to attend college and may be unfamiliar with academic norms or expectations.

Advising continues throughout the program. Each apprentice is paired with an academic counselor who provides ongoing support in course selection, degree planning, and troubleshooting academic challenges. These regular check-ins allow for early intervention when needed and reinforce a sense of direction and accountability. Apprentices are never expected to navigate their educational path alone.

In addition to individualized advising, apprentices participate in supplemental training that complements their work in the field. These sessions are focused on topics like trauma-informed care, motivational interviewing, youth development, and ethics. This supplemental training gives apprentices tools they can immediately apply in real-world settings. The combination of academic advising and practical training helps ensure that each apprentice is developing both the theoretical foundation and the field-specific knowledge needed to succeed.

## Personal and Social Supports

CWC also recognizes that even the most well-supported student will struggle academically if their basic needs are not met. That's why the program offers comprehensive personal and social supports that address the realities many apprentices face.

Technology and financial assistance form the foundation of this support. Each apprentice receives a laptop and transportation assistance, along with help accessing basic needs like food, housing, or public benefits. These supports reduce financial pressure, increase access to resources, and allow apprentices to participate fully in the academic and workplace aspects of the program.



Wellness and mental health are treated as integral to apprentice success, not as afterthoughts. Apprentices have access to mental health resources and wellness check-ins, creating a culture of openness around emotional wellbeing. Many apprentices are balancing jobs, caregiving, and school, and the program ensures they are not doing so without support.



Peer connection is another key element. Apprentices enter the program as part of a cohort, and that sense of community is reinforced through shared trainings, group activities, and informal support spaces. These connections help reduce isolation, especially for apprentices navigating systems that were not designed with their backgrounds or needs in mind.





# COMPREHENSIVE SUPPORT FOR EQUITY & SUCCESS



## Personal and Social Supports (Cont.)

In addition, staff work closely with apprentices to address the challenges that arise outside of school or work. Whether it's finding childcare, navigating immigration paperwork, or handling an unexpected crisis, the CWC team provides personalized guidance and referrals so apprentices don't have to choose between stability and success. One apprentice emphasized this point, stating, "I do feel like as a parent, there's a lot of support and there's a lot of ways for me to be successful" (see Appendix F), highlighting the program's commitment to helping apprentices navigate family responsibilities while pursuing their career goals.

By aligning academic and personal supports with the realities of apprentices' lives, CWC has created an environment where individuals are not just admitted to the program, but positioned to thrive. This is equity in action. It is practical, compassionate, and rooted in the belief that the right support at the right time can transform not just one life, but an entire workforce.

## Program Registration

The Catalyst for Wellness in Community Apprenticeship Program is formally registered with the U.S. Department of Labor (DOL), and registration with California's Division of Apprenticeship Standards (DAS) is currently in process. Federal registration through DOL signifies that the program meets national standards for quality, rigor, and employer involvement. It also makes the program eligible for federal apprenticeship funding, inclusion in national apprenticeship databases, and access to technical assistance and resources through the national workforce system.

Registration with DAS will align the program with California's statewide apprenticeship framework and expand access to additional state funding opportunities and support services. Once approved, this dual registration will enhance the program's visibility and credibility, provide apprentices with recognized credentials that signal job readiness, and reinforce the program's long-term sustainability as a model for behavioral health workforce development.

## Program Data and Early Outcomes

A foundational strength of the Catalyst for Wellness in Community Apprenticeship Program lies in its commitment to data-informed planning and continuous improvement. Through ongoing analysis of apprentice, provider, and program-wide feedback, the Catalyst Center is monitoring implementation progress and identifying areas of success and opportunity.

Across the first two cohorts, the program has successfully recruited a diverse group of apprentices from high-priority regions of California, including underrepresented racial and linguistic backgrounds, first-generation college students, and those from low-income communities (see Figure 2 ). This context is important when interpreting program outcomes and participant feedback, as the program is intentionally serving those historically excluded from behavioral health career pathways.

"This is a Great Program that is giving students great opportunities to be apprentice in their selective major. Hence, Social Work. I'll for sure pass this on to the next wave of students"



# COMPREHENSIVE SUPPORT FOR EQUITY & SUCCESS



## Program Data and Early Outcomes (Cont)

Survey data from apprentices in both cohorts underscore the program's impact on personal and professional growth. In their first year, apprentices reported gaining confidence, a clearer sense of purpose, and stronger community connection (see Appendix A, Attachments A1, A2, and A3 for the surveys and survey analyses of the apprentices' first year). Those in their second year expressed growing autonomy, leadership development, and a deeper commitment to behavioral health careers (see Appendix B, Attachments B1 and B2 for the survey and survey analysis of the apprentices' second year). Many cited the mentorship model, academic guidance, and wraparound support as critical to their persistence and success. "

Feedback from community-based organizations has been similarly encouraging. Supervisors and mentors noted apprentices' eagerness to learn, their ability to relate to clients, and their meaningful contributions to the workplace. Employers emphasized that the apprenticeship offers a promising pipeline for building a stable, representative workforce and easing long-term staffing shortages (see Appendix D, Attachments D1, D2, and D3 for the surveys and survey analyses of the employers' first (2023-2024) and second years (2024-2025)).

As the program expands to include a third cohort and scales to new regions, data will continue to guide decision-making. This includes refining support models, enhancing mentor training, and deepening academic alignment. The early results affirm the program's value as a workforce development solution tailored to California's diverse needs.

## Looking Ahead: Statewide Demonstration and Expansion



Building on the success of the Catalyst for Wellness in Community (CWC) program, the Catalyst Center will serve as a collaborative partner for a newly approved statewide demonstration project to expand apprenticeship opportunities for Certified Wellness Coaches. In partnership with the California Community Colleges Chancellor's Office and funded by the Department of Health Care Access and Information (HCAI), this initiative will support the development and implementation of a standardized apprenticeship model at three pilot colleges: Chabot-Las Positas Community College District in Northern California, Lemoore College in Central California, and West Los Angeles College in Southern California.

This next phase will expand beyond community-based employers to include public sector and government partners, such as county behavioral health departments, school districts, and county offices of education. With statewide reach and a broadened network of employers, this demonstration program is designed to test scalable strategies, align with California's behavioral health workforce priorities, and build a sustainable pipeline of trained, community-rooted wellness professionals ready to serve in high-need settings.



# CONCLUSION



The Catalyst for Wellness in Community (CWC) Apprenticeship Program offers a bold, equity-driven solution to one of California's most pressing challenges: the shortage of behavioral health professionals equipped to serve diverse and underserved communities. By integrating academic preparation, on-the-job training, and comprehensive support, the program not only opens doors for individuals historically excluded from the field, but it also ultimately strengthens the entire behavioral health system.

The CWC model proves that workforce development can be inclusive, rigorous, and responsive to real-world needs. With continued investment, expanded partnerships, and statewide scaling through the Certified Wellness Coach demonstration project, this approach holds promise for transforming how California builds and sustains its behavioral health workforce.

As we look ahead, the CWC program will continue to grow as a replicable model that bridges gaps in care, fosters trust, and empowers a new generation of practitioners to serve with compassion, cultural humility, and clinical excellence. The future of behavioral health in California depends on solutions like this which are community-rooted, data-informed, and centered on equity.

[APPENDIX A](#)  
[APPENDIX B](#)

[APPENDIX C](#)  
[APPENDIX D](#)

[APPENDIX E](#)  
[APPENDIX F](#)

## RESOURCES

[Blue Cross Blue Shield. \(2022, May 31\). Racial disparities in diagnosis and treatment of major depression.](#)

[Bureau of Health Workforce. \(2025, March 31\). Designated health professional shortage areas statistics: Second quarter of fiscal year 2025 designated hpsa quarterly summary.](#)

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## THANK YOU TO OUR PARTNERS



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