

1 SENATE JOINT RESOLUTION NO. 49

2 INTRODUCED BY M. YAKAWICH, D. FERN, D. LENZ

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4 A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF
5 MONTANA REQUESTING AN INTERIM STUDY OF YOUTH AND FAMILY PREVENTION PROGRAMS
6 FOCUSED ON BEHAVIORAL HEALTH IN MONTANA; AND REQUIRING THAT THE FINAL RESULTS OF
7 THE STUDY BE REPORTED TO THE 70TH LEGISLATURE.8
9 WHEREAS, the Substance Abuse and Mental Health Services Administration and other federal
10 agencies historically have awarded competitive prevention grants to Montana behavioral health programs, but
11 national prevention funding is in decline, and the long-term sustainability and coordination to those programs
12 remain unclear; and13 WHEREAS, the rapid pace and evolving nature of changes in Montana's publicly funded behavioral
14 health prevention efforts in recent years warrant a close examination of the state's behavioral health care
15 system by its policymakers; and16 WHEREAS, the availability and coordination of prevention programs serving youth and families have
17 changed over time without a clear statewide strategy or unified oversight body; and18 WHEREAS, youth and families at risk of substance use and behavioral health challenges encounter
19 multiple, often uncoordinated systems, including schools, child welfare, emergency rooms, law enforcement,
20 and juvenile justice, before receiving appropriate interventions or treatment; and21 WHEREAS, all stakeholders have a strong interest in preventing substance use, mental health
22 conditions, and family crises before they occur through early intervention and coordinated community support;
23 and24 WHEREAS, prevention refers to proactive, research-proven programs that reduce the likelihood of
25 Montanans' experiencing symptoms or negative effects related to behavioral health conditions; and26 WHEREAS, schools, tribal communities, public health departments, and nonprofits provide youth
27 prevention programming to address both mental health and substance use; and

28 WHEREAS, the use of technology and virtual platforms to deliver prevention programs has expanded

1 in recent years; and

2 WHEREAS, as a citizen legislature, the Montana Legislature and its members are particularly attuned
3 to the unique needs of our state and its dynamic composition of urban, rural, and tribal communities; and

4 WHEREAS, the Montana Legislature routinely invests in prevention efforts for youth, including school-
5 based mental health programs, suicide prevention initiatives, mental health screening tools, public awareness
6 campaigns, and evidence-based programs, such as the PAX Good Behavior Game and Youth Awareness of
7 Mental Health, and by expanding access to youth support services and fostering partnerships among agencies,
8 schools, and communities.

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10 NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSE OF REPRESENTATIVES OF
11 THE STATE OF MONTANA:

12 That the Legislative Council be requested to designate an appropriate interim committee or statutory
13 committee, pursuant to section 5-5-217, MCA, to undertake a comprehensive review of the elements of
14 Montana's behavioral health prevention programs, including systems serving youth and families, to:

15 (1) outline current and projected funding of prevention efforts, detailing the federal, state, local,
16 and private funding streams;

17 (2) study how the prevention system helps divert youth and families from substance abuse
18 treatment, mental health crises, emergency room visits, school dropouts, and involvement with the criminal
19 justice system;

20 (3) assess the adequacy of the state's system of higher education to appropriately train and
21 educate prevention specialists and other necessary behavioral health and community service providers to meet
22 the prevention needs of Montanans;

23 (4) identify where gaps exist in the state's behavioral health system; and

24 (5) determine whether the Legislature or the Executive Branch is best poised to bridge system
25 gaps.

26 BE IT FURTHER RESOLVED, that the interim committee or statutory committee:

27 (1) collaborate with the Department of Public Health and Human Services, the Office of Public
28 Instruction, the Montana University System, including its state universities and community and tribal colleges,

1 tribal governments, nonprofit organizations, faith-based institutions, and other relevant stakeholders in
2 examining primary prevention efforts for youth in Montana;

3 (2) conduct a statewide inventory to gather information about primary prevention programs
4 currently implemented at the state, local, and tribal levels that serve youth under 18 years of age, including
5 school-based, health-based, community-based, faith-based, and mentorship initiatives;

6 (3) identify all existing funding streams for primary prevention efforts for youth in Montana,
7 including federal, state, local, and private sources, and evaluate how these funds are utilized, coordinated, or
8 siloed;

9 (4) map the current prevention workforce involved in youth-serving systems, including
10 professionals from education, behavioral health, child welfare, mentoring programs, health care, and
11 community coalitions;

12 (5) examine the various settings in which prevention efforts are delivered, such as schools, health
13 care systems, community-based organizations, tribal nations, and faith-based groups, to assess integration,
14 reach, and areas for potential alignment;

15 (6) provide an overview of evidence-based, culturally responsive, and promising primary
16 prevention practices that have demonstrated effectiveness in addressing substance use, mental health, and
17 adverse childhood experiences for youth;

18 (7) utilize available data, including the Youth Risk Behavior Survey, Prevention Needs
19 Assessment, data on adverse childhood experiences, and any other available data sets and information, to
20 assess risk and protective factors affecting Montana youth and to identify trends over time;

21 (8) determine whether capturing a snapshot view or conducting a longitudinal analysis would serve
22 as the best tool to track outcomes and measure the long-term effectiveness and return on investment of
23 prevention strategies;

24 (9) examine how other states and jurisdictions have implemented coordinated prevention
25 infrastructures or strategic frameworks, and determine whether aspects of those models should be adapted for
26 Montana;

27 (10) evaluate the efficacy and efficiency of Montana's current prevention efforts, including both
28 duplication of and gaps in services, and opportunities for innovation and streamlined implementation; and

1 (11) provide recommendations for developing a unified, data-driven strategic plan for Montana's
2 prevention infrastructure, including estimated costs, implementation timelines, and proposed mechanisms for
3 oversight, coordination, and accountability.

4 BE IT FURTHER RESOLVED, that all aspects of the study, including presentation and review
5 requirements, be concluded prior to September 15, 2026.

6 BE IT FURTHER RESOLVED, that the final results of the study, including any findings, conclusions,
7 comments, or recommendations of the appropriate committee, be reported to the 70th Legislature.

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