
SENATE COMMITTEE ON EDUCATION

Senator Connie Leyva, Chair
2021 - 2022 Regular

Bill No:	AB 58	Hearing Date:	June 8, 2022
Author:	Salas		
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Urgency:	No	Fiscal:	Yes
Consultant:	Kordell Hampton		

Subject: Pupil health: suicide prevention policies and training

SUMMARY

This bill would require a local educational agency (LEA), on or before June 1, 2024, to review and update its policy on pupil suicide prevention, and encourages LEAs commencing with the 2024–25 school year, to provide suicide awareness and prevention training to teachers of pupils in all of the grades served by the local educational agency.

BACKGROUND

Existing law:

- 1) Requires the governing board of an LEA that serve pupils in grades 7 to 12 to adopt, before the 2017-18 school year, procedures relating to suicide prevention, intervention, and postvention in consultation with school and community stakeholders, school-employed mental health professionals, and suicide prevention experts. (Education Code § 215(a))
- 2) Requires the governing board of an LEA that serve pupils in Kindergarten and grades 1 to 6 to adopt, before the 2020-21 school year, a policy on pupil suicide prevention in kindergarten in consultation with school and community stakeholders, school-employed mental health professionals, and suicide prevention experts. (EC § 215 (a)(2)(A))
- 3) Requires, beginning July 1, 2019, a public school, including a charter school, or a private school, that issue identification cards to pupils grades 7 to 12 to include information to the National Suicide Prevention Lifeline, Crisis Text Line, and local suicide prevention hotline. (EC § 215.5)
- 4) Require the California Department of Education (CDE) to identify one or more evidence-based online training programs that a local educational agency can use to train school staff and pupils as part of the LEAs policy on pupil suicide prevention adopted (EC § 216)

ANALYSIS

This bill would require a LEA, on or before June 1, 2024, to review and update its policy on pupil suicide prevention, and encourages LEAs commencing with the 2024–25

school year, to provide suicide awareness and prevention training to teachers of pupils in all of the grades served by the local educational agency. Specifically, this bill:

- 1) Requires an LEA, on or before June 1, 2024, to revise its training materials to incorporate best practices identified by CDE.
- 2) Encourages an LEA, commencing the 2024–25 school year to provide suicide awareness and prevention training to teachers of pupils in all of the grades served by the LEA.
- 3) Requires CDE, on or before June 1, 2024, to complete the development of, and issue to local educational agencies, resources and guidance on how to conduct suicide awareness and prevention training remotely.
- 4) Requires, on or before June 1, 2024, the governing board or body of a local educational agency that serves pupils in kindergarten and grades 1 to 12 to adopt best practices identified by CDE on pupil suicide prevention.

STAFF COMMENTS

- 1) ***Need for the bill.*** According to the author “Youth suicide and self-harm have continued to rise alarmingly in California and across the country. In California, the rate of suicide among those aged 10 to 24 increased 38 percent between 2007 and 2018, according to the a report released by the CDC in 2020. Instances of youth committing acts of self-harm increased by 50 percent during the same period from 2009 to 2018. Suicide is the second leading causes of death among youth ages 10 to 24 and one out of every 15 high school students reports attempting suicide each year.

“A 2019 United Health Foundation report found that the teen suicide rate increased by 25 percent nationwide from 2016 to 2019 and that California was one of seven state with the most significant increases in teen suicide rates during that same period.

“With regard to this bill’s importance during the pandemic, emergency room visits for youth suicide attempts soared – especially among girls – during the pandemic, according to a CDC report. There was a 22.3 percent increase in ER trips for potential suicides by children aged 12 to 17 in summer 2020 compared to 2019, according to findings published in the CDC’s “Morbidity and Mortality Weekly Report” and visits were up by 39.1 percent when comparing winter of 2020 to winter of 2019.

“An article in the New York Times from January of 2021 also highlighted the importance of addressing youth suicide during COVID-19, stating: “The reminders of pandemic-driven suffering among students in Clark County, Nev., have come in droves. Since schools shut their doors in March, an early-warning system that monitors students’ mental health episodes has sent more than 3,100 alerts to district officials, raising alarms about suicidal thoughts, possible self-harm or cries for care. By December, 18 students had taken their own lives.” In another article by NPR entitled “Child Psychiatrists Warn That The Pandemic May Be Driving Up

Kids' Suicide Risk," it was noted that "the number of kids with suicide attempts coming to the emergency room at UCSF Benioff Children's Hospital Oakland, in California, in the fall of 2020 was double the number in the fall of 2019, says Marisol Cruz Romero, a psychologist and the coordinator for the hospital's behavioral emergency response team." With the onset of remote learning, it has made it much more difficult for teachers and school counselors to identify and help students that are at-risk, thus underscoring the important role that teachers and school staff play in addressing youth suicide.

"While the importance of improving youth suicide prevention and student mental health treatment has been brought to the forefront by COVID-19, it is an issue that also goes beyond the pandemic as youth suicides have increased alarmingly over the past few decades. A U.S. Public Health Service study in 1999 found that there was a nearly 200 percent increase in the rate of suicide attempts among 11-14 year olds between 1980 and 1999, a trend that has tragically continued to increase over the last decade. Utilizing best practices and ensuring schools have training in place for suicide prevention is critical to addressing the serious health crisis posed by the increase of youth suicide and self-harm. School personnel are well positioned to provide much-needed suicide prevention and to address the mental health needs of students."

- 2) ***Increasing occurrences of pupil mental health issues.*** According to a Pew Research Center analysis of data from the 2017 National Survey on Drug Use and Health, in 2017, 3.2 million teens aged 12-17 said they had at least one depressive episode within the past 12 months. This is up by 1.2 million from the same survey conducted by the National Survey on Drug Use and Health in 2007. One-in-five (2.4 million) teenage girls reported experiencing one depressive episode in 2017, compared to 845,000 teenage boys. According to data from the Centers for Disease Control and Prevention, 13 percent of students in grades 9-12 in California in 2017 reported experiencing at least one depressive episode within the last 12 months. 32 percent felt sad or hopeless almost every day for 2 or more weeks in a row so they stopped doing some usual activities within the past year, compared to 31 percent for the United States. 17 percent of pupils in grades 9-12 reported considering suicide attempts, while 9 percent reported they attempted suicide at least once within the past 12 months.

This trend is confirmed by data from the Office of Statewide Health Planning and Development. In 2019, emergency rooms throughout California treated 84,584 young patients ages 13 to 21 who had a primary diagnosis involving mental health. That is up from 59,705 in 2012, a 42 percent increase.

- 3) ***COVID-19 has had an exacerbating effect on mental health issues.*** According to the 2020 report, "Roadmap for Resilience: The California Surgeon General's Report on Adverse Childhood Experiences, Toxic Stress, and Health," COVID-19 has only furthered the mental health issues children face. As the report notes, "For many children, the school is a bedrock of community belonging. The pandemic has not only disrupted children's academic opportunities and connections with their peers and educators, it has also surfaced new and difficult experiences in the home: fear, anxiety, financial distress, food and housing insecurity, and countless other challenges. Economic uncertainty is associated with increases in harsh

parenting, which increases risk for child abuse and neglect, and the loss of friends and family through illness and isolation can also increase the total dose of acute stress and adversity and reduce the dose of buffering supports available from caregivers, educators, and other adults.”

- 4) ***Recently adopted health framework includes mental health.*** While health is not a specifically required topic or course in middle school or high school, the SBE has adopted both content standards and a curriculum framework for health. On May 8, 2019, the SBE *adopted the 2019 Health Education Curriculum Framework for California Public Schools, Transitional Kindergarten Through Grade Twelve*. The revised framework includes additional instructional strategies relating to mental health. In addition to the recently adopted framework, this bill ensures that schools district acquired best practices as identified by CDE. The health framework will not be revised again until 2027.
- 5) ***State Auditor Report: Youth Suicide Prevention.*** In September 2020, the State Auditor released a report titled *Youth Suicide Prevention: Local Educational Agencies Lack the Resources and Policies Necessary to Effectively Address Rising Rates of Youth Suicide and Self-Harm* which found that “schools can more effectively assist students if they have appropriate suicide prevention policies in place if they train their faculty and staff to recognize and respond to youth who are at risk of suicide or self-harm” and “the deficiencies we found in these areas during our review suggest LEAs could do more to address youth suicide and self-harm.”

Pursuant to AB 2639 (Berman; 2018), the California Department of Education published a model policy in May 2017 for the LEAs’ to adopt - highlighting best practices suicide prevention organizations recommend. This included identifying primary and secondary liaisons to whom staff report known or suspected suicidal intentions and providing students with education about mental health challenges. The Auditor Report notes that “Although the State does not mandate training for school personnel, state law does outline which elements such training must include if LEAs provide it. The Audit Report found that out of the six schools that were analyzed, “all six of the LEAs we reviewed lacked suicide prevention policy elements that either state law or the model policy identify. The Audit report believes, “Without these elements, the LEAs may be unprepared to identify warning signs or provide resources for students at risk.”

- 6) ***Argument in Support.*** According to the California Association for Health, Physical Education, Recreation and Dance (CAHPERD) “supports AB 58, which would encourage Local Education Agencies (LEAs) to provide suicide awareness and prevention training at the beginning of each school year to teachers. The bill also requires LEAs to review and update their policies on pupil suicide prevention and revise their training materials to incorporate best practices identified by the California Department of Education.

“CAHPERD recognizes that teachers are often among the first to notice when a student is struggling with mental health issues such as depression and/or suicidal thoughts. Unfortunately, many teachers lack adequate training regarding mental health topics. Training based on known best and appropriate practices would be critical and valuable to assist all the parties involved.”

- 7) **Related legislation. AB 552 (Quirk-Silva)** of this Session authorizes a county behavioral health agency (CHBA) and the governing board or governing body of a local educational agency (LEA) to enter into an Integrated School-Based Behavioral Health Partnership Program (Partnership Program), as established by this bill, to provide prevention and early intervention, and access to, behavioral health and substance use disorder services for pupils at schoolsites. *AB 552 is pending in the Senate Health Committee.*

AB 748 (Carrillo) of this Session this bill requires each schoolsite in a school district, county office of education (COE), or charter school serving pupils in any of grades 6 to 12, on or before the start of the 2023–24 school year, to create a poster that identifies approaches and shares resources regarding pupil mental health. This bill also requires the California Department of Education (CDE) to develop a model poster. *AB 748 is pending in the Senate Judiciary Committee.*

AB 309 (Gabriel) Chapter 662, Statue of 2021, requires the CDE to develop model pupil mental health referral protocols, in consultation with relevant stakeholders, subject to the availability of funding for this purpose.

SB 229 (Dahle) of this Session requires DHCS, in consultation with CDE, to provide up to \$500 million in grants annually to LEAs and private schools, to provide mental health services for pupils affected by school closures and distance learning requirements resulting from the COVID-19 pandemic, subject to an appropriation by the Legislature for this purpose. *This bill was held on suspense in Senate Appropriations Committee.*

AB 2639 (Berman) Chapter 437, Statutes of 2018 requires the CDE to identify and make available an online training program in suicide prevention that an LEA can use to train school staff and pupils, consistent with the LEA’s policy on suicide prevention.

AB 2246 (O’Donnell) Chapter 642, Statutes of 2016 requires LEAs to adopt policies for the prevention of student suicides, and requires the CDE to develop and maintain a model suicide prevention policy.

SUPPORT

American Academy of Pediatrics, California, Chapter 2
 Association of California School Administrators (ACSA)
 Association of Regional Center Agencies
 CA Council of Community Behavioral Health Agencies
 California Alliance of Child and Family Services
 California Association For Health, Physical Education, Recreation and Dance
 California Catholic Conference
 California State Association of Psychiatrists (CASP)
 California Teachers Association
 National Association of Social Workers, California Chapter
 Peace Officers of California (PORAC)

OPPOSITION

None on file.

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