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THIRD READING

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Bill No: AB 2460

Author: Celeste Rodriguez (D)

Amended: 8/20/26 in Senate

Vote: 21

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SENATE EDUCATION COMMITTEE: 5-0, 7/1/26

AYES: Pérez, Cabaldon, Cortese, Gonzalez, Reyes

NO VOTE RECORDED: Ochoa Bogh, Choi

SENATE APPROPRIATIONS COMMITTEE: Senate Rule 28.8

ASSEMBLY FLOOR: 65-9, 5/27/26 - See last page for vote

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**SUBJECT:** Pupil health: mental health: model referral protocols

**SOURCE:** Author

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**DIGEST:** This bill 1) requires the California Department of Education (CDE), on or before July 1, 2027, to review, and as necessary, update existing model referral protocols for addressing pupil behavioral health concerns to ensure that it includes guidance on providing equity-centered mental health supports in case of a local emergency related to immigration enforcement activities or deportations of pupils or their family members; and 2) requires a local educational agency (LEA), on or before July 1, 2028, to review, and as necessary, update its governing board or body's adopted policy on referral protocols for addressing behavioral health concerns to ensure that it includes specified guidance.

*Senate Floor Amendments of 8/20/26:* (1) specify that CDE must review, and as necessary, update the existing model referral protocols to ensure that it includes guidance on providing mental health supports in case of a local emergency related to immigration enforcement activities or deportations of pupils or their family members; (2) recasts the responsibility of the governing board of a LEA to update its policy on referral protocols on or before July 1, 2028, to instead require the LEA to review, and as necessary, update the policy on referral protocols to be

adopted by the governing board or body, on or before July 1, 2028; (3) removes the requirement for the updated referral policy to be adopted at a regularly scheduled public meeting; and (4) makes other technical changes.

**ANALYSIS:**

Existing law:

- 1) Requires the CDE, by June 1, 2025, to develop model referral protocols for addressing student mental health concerns, in consultation with specified agencies and stakeholders, and authorizes these protocols to be used on a voluntary basis by schools. (Education Code (EC) § 49428.1)
- 2) Requires the governing boards or bodies of LEAs, by January 31, 2026, to adopt at a regularly scheduled meeting, a policy on referral protocols for addressing student behavioral health concerns of students in grades 7 to 12. (EC § 49428.2)
- 3) Requires the CDE, by January 1, 2023, to recommend best practices and identify evidence-based and evidence-informed training programs for schools to address youth behavioral health, including staff and student training, contingent upon an appropriation for this purpose. (EC § 49428.15)
- 4) Requires LEAs to certify to the CDE by July 1, 2029, that 100% of certificated employees and 40% of classified employees who have direct contact with students in grades 7 to 12 have received youth behavioral health training at least once, as specified. (EC § 49428.2)
- 5) Requires LEAs by November 1, 2024 to coordinate agreements between school districts and charter schools within a county in order to develop a system through which qualified mental health professionals and other key school personnel employed by individual school districts and charter schools throughout the county could be rapidly deployed on a short- or long-term basis to an area of the county that has experienced a natural disaster or other traumatic event, in order to provide support to pupils and staff. (EC § 49429.5)
- 6) Requires LEAs to provide information to parents and guardians regarding their children's right to a free public education, regardless of immigration status or religious beliefs. (EC § 234.7)
- 7) Requires LEAs to educate pupils about the negative impact of bullying other pupils based on their actual or perceived immigration status or their religious beliefs and customs. (EC § 234.7)

- 8) Requires the Attorney General (AG), in consultation with stakeholders, to publish model policies limiting assistance with immigration enforcement at public schools to the fullest extent possible, consistent with federal and state law, by April 1, 2018. (EC § 234.7)
- 9) Requires the superintendent of a school district or county office of education (COE) and the principal of a charter school to report to the respective governing board or body of the LEA any requests for information or access to a schoolsite by a law enforcement official for the purpose of enforcing the immigration laws in a manner that ensures the confidentiality and privacy of any potentially identifying information. (EC § 234.7)

This bill:

- 1) Requires the CDE, on or before July 1, 2027, in consultation with appropriate stakeholders, to review, and as necessary, update the existing model referral protocols for addressing pupil behavioral health concerns to ensure that they include guidance on providing equity-centered mental health supports in case of a local emergency related to immigration enforcement activities or deportations of pupils or their family members.
- 2) Requires an LEA, on or before July 1, 2028, to review, and as necessary, update its adopted policy on referral protocols for addressing behavioral health concerns to ensure that it includes guidance on providing equity-centered mental health supports in case of a local emergency related to immigration enforcement activities or deportations of pupils or their family members.
- 3) States that an updated policy adopted pursuant to the provisions of this bill may be based on the updated model referral protocols developed by the CDE or developed in consultation with school and community stakeholders and school-linked behavioral health professionals.
- 4) Provides that policies adopted by the governing board or body of an LEA may be considered to meet the requirements of this bill if they include guidance on providing equity-centered mental health supports in case of a local emergency related to immigration enforcement activities or deportations of pupils or their family members.
- 5) Makes a series of findings and declarations about the fear of deportation and its effect on pupil mental health.
- 6) States the intent of the Legislature to ensure that schools are better prepared to respond when pupils are affected by trauma, fear, and instability by requiring

the update of the model referral protocols to include guidance for pupils impacted by immigration enforcement that strengthens early identification, culturally responsive and multilingual support, family and community partnerships, and continuity of care.

## Comments

- 1) *Need for the bill.* According to the author, “Students cannot succeed in school when fear and trauma keep them from the classroom. In many immigrant communities, aggressive immigration enforcement has created deep anxiety for children who fear family separation, parental detention, or sudden disruption at home. That fear does not stay outside the school gates — it affects attendance, concentration, emotional well-being, and a student’s ability to learn.

“AB 2460 recognizes that schools need a clearer mental health framework to respond when students are experiencing this kind of community-wide trauma. California’s children deserve learning environments that are prepared to support them with stability, compassion, and continuity during times of crisis.”

- 2) *Impacts of increasing immigration enforcement on student mental health.* According to a 2025 survey of 1,036 adults in immigrant families conducted by the Urban Institute, over 1 in 7 adults in immigrant families with children reported their children experienced increased emotional distress because of immigration-related worries. 15% of adults in immigrant families with children reported that their children experienced increased stress, anxiety, or sadness because of worries about immigration status in the previous year. Such effects were higher for those in mixed-status families (27%) but were also felt in families with all citizens (8%) and a mix of green card holders and citizens (15%).

A 2025 article in *Psychiatric News*, a publication of the American Psychiatric Association, examined the mental health consequences of contemporary U.S. immigration enforcement on immigrant children and families, drawing from clinical vignettes, epidemiological data, and community-based research (Fortuna et al., 2025). The article highlights the following:

- Forced family separations, particularly those resulting from immigration enforcement (e.g., detention, deportation), introduce acute psychological risks. A national study of 547 U.S.-born adolescents ages 11 to 16 found that having a detained or deported family member was associated with elevated risk for suicidal ideation, externalizing behaviors, and alcohol use (Roche et al., 2020).

- In young children, abrupt caregiver loss has been linked to sleep and appetite disturbances, emotional dysregulation, and developmental regression (MacLean et al., 2019).
- Forcible separation from a caregiver is recognized as an adverse childhood experience (ACE) that contributes to toxic stress, ambiguous loss, and long-term risk for psychiatric disorders (Roberts et al., 2014; Lu et al., 2020).
- Even the threat of separation can generate profound emotional harm. Children in mixed-status families often live with chronic anticipatory anxiety that a loved one could be detained or deported. These fears have been shown to lead to school absenteeism, academic disengagement, and heightened emotional distress (Ramos-Sánchez & Llamas, 2024).

3) *Students' right to public education.* As noted in the AG's December 2025 updated guidance on promoting safe and secure learning environments, the U.S. Constitution provides all students with the right to receive an education without discrimination based on immigration status. In *Plyler v. Doe*, the U.S. Supreme Court recognized that undocumented immigrants are guaranteed due process and equal protection rights under the U.S. Constitution, and that children cannot be denied equal access to a public education because of their immigration status. Therefore, schools must provide free public education to all students, regardless of their immigration status and regardless of the citizenship status of the students' parents or guardians.

Similarly, California law affirms the equal educational rights of immigrant students. Under the California Constitution, all students and staff, regardless of immigration status, have the inalienable right to attend campuses that are safe, secure, and peaceful. State statute further prohibits discrimination based on a student's immigration status.

4) *Model referral protocols for addressing pupil behavioral health concerns.* The Model Referral Protocols for Addressing Pupil Behavioral Health Concerns ("the Protocols") are designed by the CDE, in consultation with the Department of Health Care Services (DHCS), members of the Student Mental Health Policy Workgroup, and pupil behavioral health stakeholders to assist schools in creating or refining timely referral systems that support students' behavioral health needs. The Protocols provide guidance for identifying, referring, and supporting students experiencing behavioral health challenges.

The Protocols promote best practices to enhance collaboration between schools, families, and external service providers. They are grounded in multi-tiered

systems of support, trauma-informed care, and culturally responsive approaches. The goal is to establish consistent, effective, and accessible referral systems that contribute to positive outcomes for all students.

The Protocols are structured around five key components:

- a) Needs Assessment: Understand behavioral health trends, gaps, and available supports.
- b) Building Capacity: Strengthen internal and community-based systems.
- c) Planning: Develop coordinated strategies based on assessed needs.
- d) Implementation: Execute referral protocols through a collaborative model.
- e) Evaluation: Assess system impact and make continuous improvements.

Existing law requires the governing board or body of an LEA to adopt a policy on referral protocols for addressing pupil behavioral health concerns in grades 7 to 12 by January 31, 2026. These policies must be developed in consultation with school and community stakeholders and school-linked behavioral health professionals, and be based on the CDE's model referral protocol.

The adopted policies must also specifically address the needs of high-risk groups, including but not limited to the following:

- a) Pupils bereaved by death or loss of a close family member or friend.
- b) Pupils for whom there is concern due to behavioral health disorders, including common psychiatric conditions and substance use disorders such as opioid and alcohol abuse.
- c) Pupils with disabilities, mental illness, or substance use disorders.
- d) Pupils experiencing homelessness or placed in out-of-home settings, such as foster care.
- e) Lesbian, gay, bisexual, transgender, or questioning pupils.

This bill requires the CDE, on or before July 1, 2027, to review, and as necessary, update its model referral protocols to ensure that it includes guidance on providing equity-centered mental health supports in case of a local emergency related to immigration enforcement activities or deportations of pupils or their family members. It further requires the LEAs to review, and as

necessary, update their policies on behavioral health referral protocols to ensure that they include corresponding guidance. The guidance may be based either on the updated guidance developed by the CDE, or be developed in consultation with school and community stakeholders and school-linked behavioral health professionals, so long as it, at a minimum, addresses procedures relating to referrals to behavioral health professionals and support services.

While recent amendments shift the responsibility for reviewing and updating the policy to the LEA and its staff, the ultimate adoption of the updated policy before July 1, 2028, remains the responsibility of the governing board or body of the LEA.

**FISCAL EFFECT:** Appropriation: No Fiscal Com.:Yes Local:Yes

**SUPPORT:** (Verified 8/19/26)

Association of California School Administrators  
 California Academy of Child and Adolescent Psychiatry  
 California Association of Student Councils  
 California Behavioral Health Planning Council  
 California Catholic Conference  
 California Community Foundation  
 Central American Resource Center of California  
 CleanEarth4Kids.org  
 EdTrust-West  
 Fresno Unified School District  
 La Cooperativa Campesina de California  
 Los Amigos de la Comunidad  
 National Association of Social Workers- California  
 Para Los Ninos  
 Santa Clara County Office of Education

**OPPOSITION:** (Verified 8/19/26)

None received

**ASSEMBLY FLOOR:** 65-9, 5/27/26

**AYES:** Addis, Aguiar-Curry, Ahrens, Alanis, Alvarez, Arambula, Ávila Fariás, Bains, Bauer-Kahan, Bennett, Berman, Boerner, Bonta, Bryan, Calderon, Caloza, Carrillo, Castillo, Connolly, Davies, Elhawary, Fong, Gabriel, Garcia, Gipson, Jeff Gonzalez, Mark González, Haney, Harabedian, Hart, Hoover, Irwin, Jackson, Kalra, Krell, Lee, Lowenthal, McKinnor, Muratsuchi, Nguyen,

Ortega, Pacheco, Papan, Patel, Pellerin, Petrie-Norris, Quirk-Silva, Ramos, Ransom, Michelle Rodriguez, Rogers, Blanca Rubio, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Valencia, Wallis, Ward, Wicks, Wilson, Zbur, Rivas

NOES: DeMaio, Ellis, Flora, Hadwick, Johnson, Macedo, Patterson, Sanchez, Tangipa

NO VOTE RECORDED: Chen, Dixon, Gallagher, Lackey, Celeste Rodriguez, Ta

Prepared by: Therresa Austin / ED. / (916) 651-4105

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\*\*\*\* END \*\*\*\*