

SUBJECT: Including mental health concerns in coordinated school health efforts

COMMITTEE: Public Education — favorable, without amendment

VOTE: 11 ayes — Aycock, Allen, J. Davis, Deshotel, Dutton, Farney, Huberty, K. King, Ratliff, J. Rodriguez, Villarreal

0 nays

SENATE VOTE: On final passage, April 11 — 31-0, on Local and Uncontested Calendar

WITNESSES: For — Josette Saxton, Texans Care for Children; Andrea Usanga, Mental Health America of Greater Houston; (*Registered, but did not testify*: Roy Allen; Jamaica Chapple; Melissa Davis, National Association of Social Workers - Texas Chapter; Monty Exter, Association of Texas Professional Educators; Jan Friese, Texas Counseling Association; Erin Hall; Greg Hansch, National Alliance on Mental Illness - Texas; Dwight Harris, Texas AFT; Marilyn Hartman, National Alliance on Mental Illness - Austin Affiliate; Patricia V Hayes, Stand for Children Texas; Darla Holmberg-Abel; Katharine Ligon, Center for Public Policy Priorities; Janna Lilly, Texas Council of Administrators of Special Education; Pamela Love-White; LaShondra Manning; Diana Martinez, TexProtects, The Texas Association for the Protection of Children; Sandra Martinez, Methodist Healthcare Ministries of South Texas; Cyndi Matthews; Jeff Miller, Disability Rights Texas; Reuben Ndomahina; Courtney Nicholson; Shannon Noble, Texas Counseling Association; Laura Ortiz; Dawn Shuman; Rona Statman, The ARC of Texas; Gyl Switzer, Mental Health America of Texas; Vanessa Tanguma; Cathy Weaver; Kenitres Wiley)

Against — Lelia Culpepper; Lauren DeWitt and Lee Spiller, Citizens Commission on Human Rights Texas; Anna Poulin; Judy Powell, Parent Guidance Center; Juli Wood; (*Registered, but did not testify*: Candace Fischer; Jeff Fischer; MerryLynn Gerstenschlager, Texas Eagle Forum; Catherine Norman; Christy Peterson; Deborah Scouras; Michael Sullivan; Michelle Watts)

BACKGROUND: Education Code, sec. 28.004 requires the board of trustees of each school

district to establish a local school health advisory council (SHAC) to assist the district in ensuring that local community values are reflected in the district's health education curriculum. The board shall appoint at least five members to the SHAC, a majority of whom are parents of students enrolled in the district and not district employees. The board may appoint other SHAC members from 10 specified groups of people listed in the section.

DIGEST:

SB 1352 would add preventing mental health concerns to the types of curriculum each local SHAC was required to recommend. Each SHAC would have to review the adopted health education curriculum for accuracy and content related to mental health and consider including recognition of mental illness symptoms, mental health stigmas, substance abuse, and stress management in the curriculum. Each SHAC would be required to make recommendations on professional development for mental health issues and the integration of social and emotional learning into the academic curriculum.

The bill would add local community mental health providers and local substance abuse services providers to the list of groups of people that could be appointed to the SHAC by the board of trustees. It would also add mental health concerns to a list of illnesses that coordinated programs, made available by the Texas Education Agency, were designed to prevent.

This bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect September 1, 2013.

**SUPPORTERS
SAY:**

SB 1352 would improve child health and academic outcomes by including mental health in coordinated school health programs available to school districts. Mental illnesses can hinder a student's academic development, leading to school problems, disciplinary placements, and, in extreme cases, suicide. Including curriculum on mental health and requiring local SHACs to make recommendations for mental health would help prevent mental illnesses in students and foster a healthier and more productive learning environment. This bill would not allow schools to diagnose or treat mental illness or take away parental control. It would maintain local control by allowing each school district to decide whether to employ recommended programs. SB 1352 would help school districts prevent mental illnesses and improve academic outcomes because a healthy child

is better able to learn.

**OPPONENTS
SAY:**

SB 1352 would create a conflict of interest by allowing mental health and substance abuse providers to be appointed to local SHACs. These providers would have financial incentive to encourage diagnosis of mental illnesses and this could lead to marketing of mental illness remedies in schools. Additionally, professional development regarding mental health would commit time and resources to issues outside the scope of the school's core academic functions. It is not the government's role or responsibility to identify and intervene with personal matters that should be left to the family and its physician.