

SUBJECT: Including suicide prevention in school curricula, requiring teacher training

COMMITTEE: Public Education — committee substitute recommended

VOTE: 13 ayes — Huberty, Bernal, Allen, Allison, Ashby, K. Bell, Dutton, M. González, K. King, Meyer, Sanford, Talarico, VanDeaver

0 nays

SENATE VOTE: On final passage, April 30 — 31-0

WITNESSES: For — Josette Saxton, Texans Care for Children; (*Registered, but did not testify*: Cynthia Humphrey, Association of Substance Abuse Programs; Chris Masey, Coalition of Texans with Disabilities; Christine Yanas, Methodist Healthcare Ministries of South Texas, Inc.; Greg Hansch, National Alliance on Mental Illness Texas; Eric Kunish, National Alliance on Mental Illness Austin; Andrea Usanga, Network of Behavioral Health Providers; Jan Friese, Texas Counseling Association; Emma Thomson, Texas Gun Sense; Kyle Ward, Texas PTA; Merily Keller, Texas Suicide Prevention Council; Nataly Saucedo, United Ways of Texas; Qunisha Johnson; Irene Perez; Biju Simon)

Against — Monica Ayres, Citizens Commission on Human Rights Texas

On — (*Registered, but did not testify*: Holly Eaton, Texas Classroom Teachers Association; Christopher Jones and Monica Martinez, Texas Education Agency)

DIGEST: CSSB 1390 would require teachers to be provided training on suicide prevention at least once every five years and would add certain curriculum requirements relating to mental health, substance abuse, and suicide risk. The bill also would require local school health advisory councils to make policy recommendations to districts to prevent suicide and require school districts to develop practices and procedures on suicide prevention, intervention, and postvention.

Training. The bill would require that the staff development training provided to educators by a school district included suicide prevention training for existing school district and open-enrollment charter school educators at least once every five years.

Curriculum. The bill would require each school district that offered kindergarten through grade 12 to offer as part of a required curriculum an enrichment curriculum that included health, with emphasis on physical health, mental health, and suicide prevention, including recognizing suicide-related risk factors and warning signs. The mental health curriculum would have to include instruction on mental health conditions, substance abuse, skills to manage emotions, establishing and maintaining positive relationships, and responsible decision-making.

The State Board of Education would have to adopt essential knowledge and skills for this health curriculum that addressed the relationship between drug and alcohol use and suicide, recognizing signs of suicidal tendencies and other warning signs of suicide, and help-seeking behaviors and available community suicide prevention services.

Local school health advisory councils. The bill would include in the duties of local school health advisory councils the recommendation of policies, procedures, strategies, and curriculum appropriate for specific grade levels designed to prevent suicide through the coordination of health and physical education, parent involvement, school health services, counseling and guidance services, a safe and healthy school environment, and school employee wellness.

The local school health advisory council would have to make policy recommendations to the district to increase parental awareness of suicide-related risk factors and warning signs and available community suicide prevention services.

TEA program list. The bill would require the Department of State Health Services in coordination with the Texas Education Agency (TEA) to add programs and practices in early mental health prevention, substance abuse

intervention, suicide intervention and postvention, and positive school climate into the annually updated list of recommended best practice-based programs and research-based practices for implementation in public schools.

The bill would define "postvention" to include activities that promoted healing necessary to reduce the risk of suicide by a person affected by the suicide of another.

The suicide prevention programs on the list would have to include components that provided for training counselors, teachers, nurses, administrators, and other staff, as well as law enforcement officers and social workers who regularly interacted with students to assist students in returning to school following treatment of a mental health concern or suicide attempt.

School districts would be required to develop practices and procedures concerning mental health promotion and intervention, substance abuse prevention and intervention, and suicide prevention that included procedures to support the return of a student to school following hospitalization or residential treatment for a mental health condition or substance abuse, and for suicide prevention, intervention, and postvention.

Effective date. The bill would take effect September 1, 2019.

**SUPPORTERS
SAY:**

CSSB 1390 would help Texas schools to prevent and address suicide and ensure the safety and health of students. The bill would accomplish this by requiring regular training on suicide prevention for all teachers, requiring school districts to develop a plan for suicide prevention, intervention, and postvention, adding mental health, substance abuse prevention, and emotional skills to the required curriculum, and requiring local school health advisory councils to make recommendations to districts to increase parental awareness of suicide warning signs and community resources.

According to data from the Centers for Disease Control and Prevention, one in eight Texas students attempted suicide in 2017, a rate higher than

the national average. Schools need to have plans in place to address this acute problem, particularly in the wake of a suicide. By requiring regular training on suicide prevention for teachers and ensuring that school districts integrated suicide prevention, intervention, and postvention into existing mental health efforts, Texas schools would be better equipped to reduce suicides and attempted suicides.

It would not be appropriate to include psychotropic medication warnings in the required information provided by the State Board of Education because teachers by law cannot make recommendations to students or their families regarding the use of these drugs.

OPPONENTS
SAY:

CSSB 1390 would not include requirements for the state to provide information on the use and side effects of psychotropic medications, including increased risk of suicide and psychosis.