

## **SB 387 (Portantino) Behavioral Health: Training**

### **PROBLEM**

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COVID-19 has increased feelings of isolation, loneliness and exacerbated California’s youth mental health crisis. In order to successfully address this issue, we must ensure members of our schools and communities are equipped with the skills and knowledge to recognize and respond to the signs of mental health challenges and substance use. Under existing law, the California Department of Education is required to identify an evidence-based mental health training program for local educational agencies to use to train teachers and other school personnel who have direct, daily contact with pupils. However, schools are not mandated to include such a training for their staff. This differs from other mandated trainings including CPR or Mandated Reporting.

### **BACKGROUND**

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The Centers for Disease Control believes that the percentage of children aged 3-17 who suffer from depression and anxiety has steadily risen this century, while also estimating that approximately 4.5 million children in that age range have been diagnosed with a mental health or substance use disorder.

The CA Mental Health Services Oversight and Accountability Commission released a report in October, that details what one educator described as the “crisis filled lives” of children and youth. The report found that one in three California high school students report feeling chronically sad and hopeless – and more than half of lesbian, gay, bisexual, transgender, and queer (LGBTQ) students have reported su

suicidal thoughts.

The report also found that racial, ethnic, and cultural disparities concrete the risk factors, prevalence rates, and service gaps in low-income communities of color. COVID-19 has increased these gaps and disparities as our students struggle to transition to hybrid learning environments.

The report synthesizes the experience, the collective wisdom, and the emerging evidence and insight about how the mental health needs of children and youth can be met, and the essential role of schools as means for responding to these needs.

This analysis yielded the Commission’s overarching conclusion that the State should respond to this imperative by establishing a leadership structure, investing the resources, and helping communities build the capacities required to provide effective and sustainable supports to students and school communities.

Mandating an evidence-based training program will provide essential instruction on how students, teachers, school staff can best provide referrals to mental health services, substance use disorder services, or other support to individuals in the early stages of developing a mental illness or substance use disorder.

Between 2007 and 2017, suicide rates for people aged 10-24 increased by 56 percent, increasing from 6.8 suicides per 100,000 to 10.6 per 100,000. Suicide is now the second leading cause of death for teenagers in the US after accidents. In response, the New York Legislature enacted, and its governor signed

Senate Bill 6046 (Marcellino) in September 2016, which requires all schools under the jurisdiction of the department shall ensure that their health

education programs recognize the multiple dimensions of health by including mental health and the relation of physical and mental health to enhance student understanding, attitudes and behaviors that promote health, well-being, and human dignity.

In Virginia, the State Legislature enacted, and its Governor signed Senate Bill 953 in March 2018 that added the following to law: “Such health instruction shall incorporate standards that recognize the multiple dimensions of health by including mental health and the relationship of physical and mental health to enhance student understanding, attitudes, and behavior that promote health, wellbeing, and human dignity.”

### **SUMMARY**

SB 387 will require the California Department of Education to ensure that 75 percent of classified and certificated employees on school campuses complete an evidence-based behavioral health training program. This instruction will guide school staff on how to provide referrals to mental health services, substance use disorder services, or other support to individuals in the early stages of developing a mental illness or substance use disorder.

### **EXISTING LAW**

Existing law, through SB 14 (Portantino), requires the California Department of Education (CDE) to identify evidence-based and evidence-informed training programs for local educational agencies (LEAs) to address youth behavioral health, including staff and pupil training. While existing law calls upon CDE to identify training, it does not indicate who should receive the training and does not mandate that schools establish a training program.

### **SUPPORT**

1. California Council of Community Behavioral Health Agencies (Lead Sponsor)
2. California Student Board Member Association (Co-sponsor)
3. Disability Rights California (Co-sponsor)
4. Generation Up, Inc. (Co-sponsor)
5. Inseparable (Co-sponsor)

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