

STORAGE NAME: h0675b.cf

DATE: April 13, 2000

**HOUSE OF REPRESENTATIVES
AS REVISED BY THE COMMITTEE ON
Children & Families
ANALYSIS**

BILL #: HB 675

RELATING TO: Required Instruction (Mental & Emotional Health)

SPONSOR(S): Representative Crady

TIED BILL(S): None

ORIGINATING COMMITTEE(S)/COMMITTEE(S) OF REFERENCE:

- (1) EDUCATION K-12 YEAS 8 NAYS 2
 - (2) CHILDREN & FAMILIES YEAS 7 NAYS 1
 - (3) EDUCATION APPROPRIATIONS
 - (4)
 - (5)
-

I. SUMMARY:

Section 233.061(2)(m), F.S., specifies that school districts are required to provide comprehensive health education instruction to students in grades kindergarten through 12. School districts are authorized to make local determinations regarding an appropriate health education curriculum which reflects local values and concerns.

HB 675 expands the curriculum requirements for health education in grades kindergarten through 12 to include specific, age appropriate instruction regarding mental and emotional health. The bill requires that such instruction characterize mental and emotional conditions as common, inherited, and treatable by including information regarding the frequency of occurrence in the population, the common ages of onset, the common recognizable symptoms, and the effectiveness of, and the need for, proper medical treatment. The bill also establishes that instruction provide correlations between mental illness and undesirable social behaviors and that the curriculum help remove stereotypes, stigma, and discrimination.

Mental health education can be funded with existing resources; however, local funds may need to be redirected from other areas of emphasis. No state funds are required.

The effective date of the bill is July 1, 2000.

There are three amendments adopted by the Education K-12 Committee that are traveling with the bill. The amendments do the following:

- make a technical correction in the title of the bill,
- clarify that parents can request in writing that their children be exempted from disease education, including mental and emotional health education, and
- change the effective date from July 1, 2000 to July 1, 2001.

II. SUBSTANTIVE ANALYSIS:

A. DOES THE BILL SUPPORT THE FOLLOWING PRINCIPLES:

- | | | | |
|-----------------------------------|------------------------------|-----------------------------|-----------------------------------------|
| 1. <u>Less Government</u> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 2. <u>Lower Taxes</u> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 3. <u>Individual Freedom</u> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 4. <u>Personal Responsibility</u> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 5. <u>Family Empowerment</u> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |

For any principle that received a "no" above, please explain:

B. PRESENT SITUATION:

Section 233.061(2)(m), F.S., specifies that school districts are required to provide comprehensive health education instruction to students in grades kindergarten through 12 in the following areas:

- community health
- environmental health
- *mental and emotional health*
- nutrition
- prevention and control of disease
- consumer health
- family life (benefits of sexual abstinence)
- injury prevention and safety
- personal health
- substance use and abuse

Section 233.061(3), F.S., authorizes school districts to make local determinations regarding an appropriate health education curriculum that reflects local values and concerns. According to the Department of Education, the Florida Curriculum Frameworks are benchmarks that school districts must use to guide development of curriculum and instruction. In the area of required comprehensive health education, the following benchmarks apply:

- ▶ knows indicators of physical, mental, emotional and social health during childhood;
- ▶ knows how physical, mental, emotional and social health interrelate during childhood; and
- ▶ understands relationship among physical, mental, emotional and social health throughout adulthood.

C. EFFECT OF PROPOSED CHANGES:

HB 675 expands the curriculum requirements for comprehensive health education in grades kindergarten through 12 to include specific, age appropriate instruction regarding mental and emotional health. Such mental and emotional health education must address the following mental conditions:

- ▶ depression,
- ▶ manic depression (bi-polar disorder),
- ▶ schizophrenia, and

- ▶ anxiety disorders (including obsessive-compulsive disorder).

The bill requires that instruction regarding the aforementioned mental conditions be characterized as common, inherited, and treatable. The instruction about such conditions must include information regarding the frequency of occurrence in the population, the common ages of onset, the common recognizable symptoms, and the effectiveness of, and the need for, proper medical treatment. The bill also requires mental and emotional health instruction to address:

- ▶ The correlation between mental illness and addiction and substance abuse due to “self-medication.”
- ▶ Prevention of suicide, aggressive behavior, criminal activities, and underachievement through prompt and faithful medical treatment.
- ▶ The progressive deterioration of the brain, the increase in severity of symptoms and accompanying problematic behaviors, without proper medical treatment.

HB 675 requires that positive examples of highly successful people with mental illness be included in the mental and emotional health instruction curriculum to help remove stereotypes, stigma, and discrimination.

D. SECTION-BY-SECTION ANALYSIS:

Section 1: Amends s. 233.061, F.S., to require specified, age appropriate instruction in mental and emotional health to address various types of disorders, their causes and effects, and successful treatment outcomes to remove stigma and discrimination.

Section 2: Provides an effective date of July 1, 2000.

III. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT:

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

None.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

Mental health education can be funded with existing resources; however, local funds may need to be redirected from other areas of emphasis.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

See above.

IV. CONSEQUENCES OF ARTICLE VII, SECTION 18 OF THE FLORIDA CONSTITUTION:

A. APPLICABILITY OF THE MANDATES PROVISION:

This bill does not require counties or municipalities to spend funds or to take an action requiring the expenditure of funds.

B. REDUCTION OF REVENUE RAISING AUTHORITY:

This bill does not reduce the authority that counties or municipalities have to raise revenues in the aggregate.

C. REDUCTION OF STATE TAX SHARED WITH COUNTIES AND MUNICIPALITIES:

This bill does not reduce the percentage of a state tax shared with counties or municipalities.

V. COMMENTS:

A. CONSTITUTIONAL ISSUES:

None.

B. RULE-MAKING AUTHORITY:

None.

C. OTHER COMMENTS:

None.

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VI. AMENDMENTS OR COMMITTEE SUBSTITUTE CHANGES:

On April 3, 2000, the Committee on Education K-12 passed HB 675 with three amendments that do the following:

- make a technical correction in the title of the bill,
- clarify that parents can request in writing that their children be exempted from disease education, including mental and emotional health education, and
- change the effective date from July 1, 2000 to July 1, 2001.

VII. SIGNATURES:

COMMITTEE ON EDUCATION K-12:

Prepared by:

Staff Director:

Raylene H. Strickler

Patricia W. Levesque

AS REVISED BY THE COMMITTEE ON CHILDREN & FAMILIES:

Prepared by:

Staff Director:

Bob Barrios

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