HB 1777 2004 A bill to be entitled

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An act relating to adolescent health; creating s. 381.0058, F.S.; creating the Florida's Future: Adolescent Health Initiatives Task Force; providing a purpose for the task force; providing definitions; providing legislative findings and intent; providing for membership of the task force; providing guiding principles; providing responsibilities and scope of activity; providing for coordination with additional entities; providing an appropriation; providing for repeal of the task force; providing an effective date.

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WHEREAS, adolescence is a critical period in child development characterized by distinctive physical, emotional, and intellectual changes and accompanied by changes in social roles, relationships, and expectations, all of which are important for the development of the individual youth and to build the foundation necessary for functioning as an adult, and

WHEREAS, the development of healthy adolescents is a complex and evolving process that requires the care and support of families, peers, schools, and communities; access to highquality health, educational, social, and other faith-based and community-based services; and opportunities to engage in and be successful in the developmental tasks of adolescence, and

WHEREAS, it has also been shown that parents and families, schools, health care providers, the media, and community-based, faith-based, and government agencies exert a remarkable influence on the behavior and health of adolescents, and

WHEREAS, adolescents make up 15 percent of Florida's

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population, and they practice or engage in health risk behaviors which may put them at risk for serious health problems such as sexually transmitted diseases, HIV infection, AIDS, obesity, unintentional injury, suicide, asthma, tobacco use, unintended pregnancy, bullying, and other behavioral health issues, and

WHEREAS, children with developmental disabilities may face additional challenges as they transition into adolescence and young adulthood, and

WHEREAS, long-term experience has shown that including a programmatic focal point for a specific demographic group within the public health and public education frameworks leads to enhanced policies, programs, services, and supports for the designated group, and

WHEREAS, the Legislature intends to build upon existing knowledge and experience in the area of adolescent health, youth development, and promotion of healthy behaviors, NOW, THEREFORE,

Be It Enacted by the Legislature of the State of Florida:

Section 1. Section 381.0058, Florida Statutes, is created to read:

381.0058 Florida's Future: Adolescent Health Initiatives
Task Force. -- The purpose of the Florida's Future: Adolescent
Health Initiatives Task Force is to raise awareness of the
leading health indicators which impact adolescent health,
including asthma, obesity, tobacco use, unintended pregnancy,
unintentional injury, suicide, developmental disabilities, HIV
infection, AIDS, sexually transmitted diseases, and bullying; to
address the challenge of improving the health of the state's

adolescents; to identify obstacles that impede or prevent
adolescents from accessing health care or behavioral health
care; and to identify strategies that are successful in
encouraging optimal physical health and behavioral health in
becoming healthy adults.

(1) DEFINITIONS. -- As used in this section:

- (a) "Adolescence" means the period of life between 10 and 21 years of age, during which individuals make the developmental transition from childhood to adulthood.
- (b) "Adolescent health" means the state of optimal physical, emotional, cognitive, social, and spiritual well-being in young persons between the ages of 10 and 21.
- (c) "Bullying" means the act of a person who verbally or physically has power or perceived power over another person.
 - (d) "Youth" means people in the state of adolescence.
 - (2) LEGISLATIVE FINDINGS AND INTENT. --
- (a) The Legislature finds that adolescence is a period during which many lifelong patterns of behavior are formed and that youth who succeed in the developmental tasks of adolescence lay the foundation for health and well-being in their adult lives.
- (b) The Legislature finds that while the health and development of all age groups is important, the critical developmental tasks of adolescence lead to special considerations and needs for this particular population.
- (c) The Legislature further finds that adolescent health and healthy behaviors go hand in hand and that healthy adolescents have the ability to form caring, supportive relationships with family and other adults and peers, to engage

HB 1777 2004 88 in a positive way in their communities, to demonstrate 89 resiliency when confronted with life stressors, to demonstrate 90 physical, cognitive, emotional, social, and moral competencies, 91 to demonstrate increasingly responsible and independent 92 decisionmaking, to experience a sense of self-confidence, hopefulness, and well-being, to engage in behaviors that 93 94 optimize wellness and contribute to a healthy lifestyle, and to avoid behaviors and activities that can lead to negative health 95 96 and life outcomes. 97 (d) It is therefore the intent of the Legislature to 98 increase public awareness of the importance of healthy 99 adolescent development both to individuals and the state, to 100 address adolescent health from a resiliency and asset-based 101 approach, and to build a strong foundation for becoming 102 independent and economically self-sufficient in order to 103 transition to future healthy relationships, marriages, and 104 families through the work of the Florida's Future: Adolescent 105 Health Initiatives Task Force. 106 107 To the extent practicable, the laws of this state should do all 108 that is possible to provide support for children as they grow 109 into and through adolescence and to encourage, promote, and 110 value strong, safe, long-term marriages and family life that 111 includes grandparents, family members, community support, and 112 all that youth need to thrive and grow up healthy. 113 (3) ESTABLISHMENT OF TASK FORCE. --114 (a) There is created within the Department of Health, for 115 administrative and staffing purposes, a task force, as defined 116 in s. 20.03(8), called Florida's Future: Adolescent Health

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117 <u>Initiatives Task Force. The task force shall otherwise function</u>
118 <u>independently of the control, supervision, and direction of the</u>
119 department.

(b) The Secretary of Health shall designate a State

Adolescent Health Consultant to work closely with the task force.

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- (c) The task force shall consist of 20 members, including members from the Department of Juvenile Justice, Agency for Health Care Administration, Department of Children and Family Services, Department of Education, Department of Health, Developmental Disabilities Council, Workforce Florida, Inc., the private sector, including community and faith-based organizations, youth advocacy, and community-based service organizations, an adolescent medicine specialist, and a minimum of two adolescents and two parents or caregivers. At least 50 percent of the members shall be from the private sector. Members of the task force should have experience in one or more of the following areas: public health, workforce development, education, adolescent health care, treatment of substance abuse, adolescent development, juvenile justice, prevention, child abuse and neglect, developmental disabilities, adolescent behavioral health, law enforcement, faith-based social service delivery, and youth advocacy.
- (d) The Secretary of Health shall make recommendations to the Governor, the President of the Senate, and the Speaker of the House of Representatives for appointments to the task force.

 The Governor shall appoint 8 members, and the President of the Senate and the Speaker of the House of Representatives shall each appoint 6 members. Initial appointments shall be made by

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October 1, 2004. Each member of the task force shall serve for
the time the task force is in existence. A vacancy shall be
filled by appointment by the original appointing authority for

149 the unexpired portion of the term.

- (e) The first meeting of the task force shall be within 30 days after the appointments are made. Members of the task force shall elect a chair at the first meeting by a majority vote of the members present, a quorum being present. A majority of the membership constitutes a quorum.
- (f) A quorum shall be required for the task force to meet and to conduct business. The task force shall meet no fewer than four times and more frequently upon call of the chair and as resources permit. The task force may conduct its meetings through teleconferences or other similar means.
- (g) Members of the task force are not entitled to compensation for their service as members but may be reimbursed for per diem and travel expenses as provided in s. 112.061.
- (h) The task force is encouraged to create subcommittees that include members who are knowledgeable in a subject area but who are not members of the task force and who may not vote on the final report and recommendations of the task force but may submit reports and recommendations for review by the task force and may be invited to testify to the task force.
- (i) The task force may seek and accept grants or funds from any public source, federal, state, or local, to supplement its operation and defray the expenses incurred in the operation and implementation of this section.
- (4) PRINCIPLES.--The following principles shall guide the work of the task force:

175 <u>(a)</u> Adolescents should be viewed as a valued and respected asset to society.

- (b) Programs and policies that serve adolescents should be focused on the developmental needs and tasks of adolescents, reduce racial disparities affecting adolescents, and consider those young individuals as partners rather than clients.
- (c) Families, schools, and communities should be engaged in developing environments that support adolescents.
- (d) Adolescents should be involved in activities that enhance their competence, capacity, caring, character, and civic engagement and promote self-understanding, self-worth, a sense of belonging, and resiliency.
- (e) Services for adolescents should support their abilities and skills to become independent, self-supporting, and law-abiding citizens.
- (5) RESPONSIBILITIES AND SCOPE OF ACTIVITY.--In order to carry out the purposes of this section, the task force shall, subject to the availability of funds, develop a plan for the task force to accomplish the following:
- (a) Develop a community awareness campaign to promote community collaboration and coordinated grassroots programs to promote healthy lifestyle choices for adolescents in the state.
- (b) Establish a committee structure that involves interested partners who are not task force members in providing research, testimony, and support for an adolescent health strategic plan.
- (c) Develop recommendations to promote supportive environments to enhance healthy families and strengthen families.

(d) Develop a strategic plan for improving the health and safety of the state's adolescents and youth and submit the plan to the Governor, the President of the Senate, the Speaker of the House of Representatives, and the chairpersons of the Senate and House of Representatives substantive committees no later than April 1, 2006.

- (e) Formulate recommendations for workplace, school, community, and family strategies to support environments that promote the health and safety of adolescents and youth.
- (f) Develop an adolescent-friendly Internet website that focuses on adolescent issues and has a parent component with links to appropriate adolescent resource documents, adolescent hotlines, state and local mental health agencies, local community health centers, and appropriate national organizations.
- (g) Make recommendations that encourage the development of programs that foster daily living skill development and promote educational and vocational opportunities that help adolescents transition to adulthood and allow them to support themselves economically.
- (6) COORDINATION. -- The task force may coordinate its work with schools, community-based organizations, including those that are faith-based, the Department of Health, the Department of Children and Family Services, the Department of Education, Workforce Florida, Inc., the Department of Juvenile Justice, the Developmental Disabilities Council, state and local associations that provide services to adolescents, Child Protection Teams, private-sector agencies that serve adolescents, youth boards, and any appropriate research and policy development centers,

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233	including, but not limited to, those within universities that
234	focus on issues related to adolescents, families, poverty, and
235	child and adolescent development.
236	(7) APPROPRIATION There is hereby appropriated from the
237	General Revenue Fund to the Department of Health the sum of
238	\$200,000 for implementation of this section.
239	(8) REPEAL This section is repealed on June 30, 2006,
240	unless reviewed and saved from repeal through reenactment by the
241	Legislature.
242	Section 2. This act shall take effect July 1, 2004.