

# SENATE STAFF ANALYSIS AND ECONOMIC IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

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Prepared By: Children and Families Committee

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BILL: CS/SB 1876

INTRODUCER: Education Committee and Senators Webster and Fasano

SUBJECT: Suicide Prevention

DATE: April 4, 2006

REVISED: 4/18/06

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Harkey</u>	<u>Matthews</u>	<u>ED</u>	<u>Fav/CS</u>
2.	<u>Goltry</u>	<u>Whiddon</u>	<u>CF</u>	<u>Fav/1 amendment</u>
3.	<u>                    </u>	<u>                    </u>	<u>EA</u>	<u>                    </u>
4.	<u>                    </u>	<u>                    </u>	<u>                    </u>	<u>                    </u>
5.	<u>                    </u>	<u>                    </u>	<u>                    </u>	<u>                    </u>
6.	<u>                    </u>	<u>                    </u>	<u>                    </u>	<u>                    </u>

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**Please see last section for Summary of Amendments**

- Technical amendments were recommended
- Amendments were recommended
- Significant amendments were recommended

**I. Summary:**

Committee Substitute for Senate Bill 1876 establishes a pilot program for suicide and depression prevention to be conducted by the Signs of Suicide Prevention (SOS) Program in secondary schools in Brevard, Orange, Osceola, and Seminole counties. The pilot programs must submit proposals to the Department of Education in order to receive funding. Parents must be provided with a screening form and information about the program. The pilot program must provide a report to legislative leaders by January 1, 2007.

The bill appropriates \$600,000 from the General Revenue Fund to the Department of Education to be distributed to the Michael Buonauro Foundation for the pilot program and requires the Foundation to provide \$600,000 in matching funds in order to receive the appropriation made in the bill.

This bill creates two undesignated sections of law.

## II. Present Situation:

### Incidence of Suicide

According to the U.S. Centers for Disease Control and Prevention, suicide is the 13<sup>th</sup> leading cause of death worldwide and the 11<sup>th</sup> in the United States.<sup>1</sup> Over the last 100 years suicides have out-numbered homicides by at least 3 to 2. Almost four times as many Americans died by suicide than in the Vietnam War during the same time period. The rates of suicide are exceptionally high among certain populations: white males over 75 years of age, Native Americans, and certain professions (e.g., health professionals and police). The rates among youth are rising.<sup>2</sup> In 2001, suicide was the third leading cause of death among persons aged 10 to 19 years in the United States.<sup>3</sup> More teenagers and young adults die from suicide than from cancer, heart disease, AIDS, birth defects, stroke, pneumonia, influenza, and chronic lung disease combined. More than 90 percent of children and adolescents who commit suicide have a mental disorder.<sup>4</sup>

Suicide is often associated with isolation, depression, or anxiety, and it is also associated with violence against oneself or others. "Certain students who engage in extreme forms of violence, such as school shootings, exhibit suicidal ideation or behavior before or during the attack."<sup>5</sup> Recent studies indicate that the incidence of suicide attempts among adolescents may exceed 10 percent annually, although it is difficult to obtain reliable estimates because of the stigma associated with attempting suicide.<sup>6</sup>

There are a number of efforts nationwide to address the issue of youth and adolescent suicide such as Columbia University TeenScreen, Lifelines, C-Care/CAST, and Reconnecting Youth to name a few. Signs of Suicide (SOS) is a school-based prevention program. The Suicide Prevention Resource Center has a registry of evidence-based practices and provides a rating for the fourteen programs listed. There are four programs rated effective, eight rated promising and two unrated. The SOS program is listed as a promising program.<sup>7</sup>

### Signs of Suicide Prevention

Signs of Suicide Prevention (SOS) is a school-based suicide prevention and depression screening program that combines curricula to raise awareness of suicide and a brief screening for depression and other risk factors associated with suicidal behavior. Signs of Suicide Prevention

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<sup>1</sup> Centers for Disease Control and Prevention, U.S. Department of Health and Human Services, "Suicide and Attempted Suicide," *Morbidity and Mortality Weekly Report*. Vol. 53, No. 22. June 11, 2004. p. 471.

<sup>2</sup> SK Goldsmith, TC Pellmar, AM Kleinman, WE Bunney, editors, *Reducing Suicide, A NATIONAL IMPERATIVE*, Committee on Pathophysiology and Prevention of Adolescent and Adult Suicide, Board on Neuroscience and Behavioral Health, Institute Of Medicine Of The National Academies, The National Academies Press, Washington, D.C. www.nap.edu

<sup>3</sup> Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. "Methods of Suicide Among Persons Aged 10-19 Years—United States, 1992-2001," *Morbidity and Mortality Weekly Report*. Vol. 53, No. 22. June 11, 2004. p. 471.

<sup>4</sup> *National Strategy for Suicide Prevention: Goals and Objectives for Action*, U.S. Dept. of Health and Human Services, Public Health Service, Rockville, MD, 2001.

<sup>5</sup> Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. "Suicide Attempts and Physical Fighting Among High School Students—United States, 2001," *Morbidity and Mortality Weekly Report*. Vol. 53, No. 22. June 11, 2004. p. 474.

<sup>6</sup> Robert H. Aseltine Jr, Ph.D., and Robert DeMartino, M.D., An Outcome Evaluation of the SOS Suicide Prevention Program, *American Journal of Public Health*, March 2004, Vol. 94, No. 3, at 446.

<sup>7</sup> [http://www.sprc.org/featured\\_resources/ebpp/ebpp\\_factsheets.asp](http://www.sprc.org/featured_resources/ebpp/ebpp_factsheets.asp)

teaches students how to identify symptoms of depression and suicidal tendencies in themselves and friends while educating students about the relationship between depression and suicide and encouraging them to seek help. Components of the SOS program are (1) a student video, “Friends for Life: Preventing Teen Suicide,” (2) a teacher training video; and (3) a teacher discussion guide. Schools should be prepared to appropriately handle an increased number of referrals for depression and suicide. Other components include a brief student self-report for depression and a parent version of the same instrument that can be used by parents to evaluate possible depression in their children.<sup>8</sup> Secondary schools participating in the SOS program may choose from program materials including a video and discussion guide and screening forms. The SOS program is an action-oriented approach instructing students how to “ACT” (Acknowledge, Care, and Tell) in the face of a mental health emergency.

In a randomized controlled study with a population of 2,100 students in five high schools in Hartford, Connecticut and Columbus, Georgia, youth in the SOS treatment group were 40 percent less likely to report that they had attempted suicide within the past three months compared with youth in a control group.<sup>9</sup> A separate pre-post study reported increases in the number of school-wide referrals for suicidality/depression.<sup>10</sup>

According to the Substance Abuse and Mental Health Services Administration, the average amount of time to implement the program across 376 schools was approximately 2.5 days, although almost 40 percent of schools reported that they completed the program in one day. Results of a multi-site evaluation revealed:

- The average number of youth seeking counseling for depression/suicidality in the 30 days following the program (9.59) was significantly higher when compared with the average number of youth seeking help per month over the past year (3.93). This was an increase of almost 150 percent.
- There was a 70 percent increase in the average number of youth seeking counseling for depression/suicidality on behalf of a friend in the 30 days following the program (3.79) when compared with the average number of youth seeking help for a friend per month over the past year (2.25).
- The average number of youth seeking counseling for depression/suicidality remained high in the three months following the program (9.74) per month, and was significantly higher than the previous school year (3.93). There was also a 25 percent increase in the number of youth seeking help for a friend three months after implementation (2.78) when compared to the past year (2.25).<sup>11</sup>

### **The Michael Buonauro Foundation**

Michael A. Buonauro, born in Fort Lauderdale, Florida, was an American webcomic artist and author. His most well known work was “Marvelous Bob,” a web-published story based on the

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<sup>8</sup> Registry of Evidence-Based Suicide Prevention Programs, Suicide Prevention Resource Center, Education Development Center, Inc., at: <http://www.sprc.org/index.asp>

<sup>9</sup> Aseltine, R.H., Jr., and DeMartino, R. “An Outcome Evaluation of the SOS Suicide Prevention Program,” *American Journal of Public Health*, Vol. 94, No. 3. March 2004. pp.447-448.

<sup>10</sup> Aseltine, R. H. Jr., An evaluation of a school based suicide prevention program. *Adolescent & Family Health*, 3(2), 81-88, (2002).

<sup>11</sup> [http://modelprograms.samhsa.gov/template\\_cf.cfm?page=promising&pkProgramID=429](http://modelprograms.samhsa.gov/template_cf.cfm?page=promising&pkProgramID=429)

conventions of comic book superheroes but with a distinctively realist, postmodern style. He took his life the day after his 25th birthday, not long after a break-up with his girlfriend.

Mr. Buonauro's parents have established the Michael Buonauro Foundation which has funded the SOS program. Through the foundation, they work to share the cost of therapeutic services for young people identified through the program who might otherwise have difficulty finding and affording care. The SOS program has been presented to more than 55,000 students in high schools in Orange County.

### **III. Effect of Proposed Changes:**

This bill establishes a pilot program for suicide and depression prevention in secondary schools in Brevard, Orange, Osceola, and Seminole counties during FY 2006-2007 and provides funding for the program. The SOS Program will provide the pilot program which must encourage collaboration with local mental health facilities and professionals.

In order to receive funding, by September 1, 2006, an SOS entity for a county authorized to participate in the pilot program must submit a proposal for suicide and depression prevention for secondary school students in that county to the Department of Education. The pilot program must provide local school personnel in each participating county with the materials necessary for implementation. The parent of each student in a participating school must be provided with program information and a copy of a screening form to assist the parent in the identification of depression and suicidal tendencies and to help initiate family discussions.

By January 1, 2007, the district school board of each participating county must provide to the President of the Senate and the Speaker of the House of Representatives a report that includes:

- An itemized list of program costs;
- An evaluation of participating schools;
- An assessment of the quality of the program components;
- An assessment of the safety of program implementation;
- An assessment of the burden on school support staff after implementation of the program;
- An assessment of the efficacy of the program; and
- Recommendations regarding program effects and outcomes.

The information must be reported for the pilot program in the aggregate, for each participating county, and for each participating school in each participating county.

The bill appropriates \$600,000 from the General Revenue Fund to DOE for Fiscal Year 2006-2007 to be distributed to the Michael Buonauro Foundation to implement the SOS Program as a pilot program for secondary schools in Brevard, Orange, Osceola, and Seminole counties. The Michael Buonauro Foundation must provide \$600,000 in matching funds in order to receive the appropriation in the bill.

The bill would take effect July 1, 2006.

**IV. Constitutional Issues:****A. Municipality/County Mandates Restrictions:**

None.

**B. Public Records/Open Meetings Issues:**

None.

**C. Trust Funds Restrictions:**

None.

**V. Economic Impact and Fiscal Note:****A. Tax/Fee Issues:**

None.

**B. Private Sector Impact:**

Private secondary schools in the four-county pilot program area would have the opportunity to participate in this suicide prevention program at no cost to the schools.

The Michael Buonauro Foundation must provide \$600,000 in matching funds in order to receive the appropriation in the bill.

**C. Government Sector Impact:**

The bill appropriates \$600,000 from the General Revenue Fund to the Department of Education for Fiscal Year 2006-2007 to be distributed to the Michael Buonauro Foundation for a pilot program to be conducted by the Signs of Suicide Prevention Program in Brevard, Orange, Osceola, and Seminole counties.

Teachers implementing the program will require 1-2 hours of training and a site coordinator (usually a counselor). The following program materials are supplied by the developer for a cost of \$200:

- Procedure manual (40 pages);
- Teacher training video (28 minutes);
- Student video (25 minutes);
- Teacher discussion Guide;
- Student self-screening form and administrator protocols;
- Parent version of the student screening form and directions for parent use; and
- Support Materials (such as anti-suicide posters, hand-outs, and cards).

According to the DOE, school districts could incur costs for coordination of implementation procedures for screening and training of students participating in the SOS

program. However, while the SOS program must provide school personnel with the materials necessary to implement the program, the bill does not require schools to participate. Any cost incurred by a school participating in the program likely would be incurred voluntarily.

**VI. Technical Deficiencies:**

None.

**VII. Related Issues:**

In its analysis, DOE noted that the bill does not provide guidelines or rule authority to DOE for the utilization of the funds that are to be distributed to the Foundation or the districts. Procedural requirements for implementation of the screening and training of students are also not included in the bill.

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This Senate staff analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

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## **VIII. Summary of Amendments:**

### **Barcode 091474 by Children and Families**

This amendment prohibits screening without the written consent of a parent or guardian.

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