### HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: Suicide Prevention HB 999 CS

SPONSOR(S): Adams

TIED BILLS: None. **IDEN./SIM. BILLS:** SB 1876

REFERENCE DIRECTOR	ACTION	ANALYST	STAFF
1) PreK-12 Committee	8 Y, 0 N, w/CS	Hatfield	Mizereck
2) Future of Florida's Families Committee	7 Y, 0 N	Preston	Collins
3) Education Appropriations Committee	15 Y, 1 N, w/CS	Hammock	Hamon
4) Education Council	9 Y, 0 N, w/CS	Beagle	Cobb
5)			

### **SUMMARY ANALYSIS**

House bill 999 establishes a pilot program on suicide and depression prevention to be conducted by the Signs of Suicide Prevention Program (SOS) for secondary schools in Brevard, Orange, Osceola, and Seminole counties during the 2006-2007 fiscal year.

In order for a county included in the pilot to receive funding, a proposal must be submitted to the Department of Education (DOE) by September 1, 2006.

The bill requires that local school personnel in each participating county receive materials necessary for program implementation. The parent of each student must be provided with a copy of a screening form and program information to assist the parent in the identification of depression and suicidal tendencies and to help initiate family discussions.

The bill requires a report to the President of the Senate and Speaker of the House of Representatives by January 1, 2007.

The bill states that the pilot program is contingent upon funding in the 2006-2007 fiscal year General Appropriations Act. The bill requires that funds appropriated to the Department of Education for the pilot program shall be distributed to the Michael Buonauro Foundation to implement the pilot program. The foundation must provide matching funds to receive this appropriation. See FISCAL ANALYSIS for further details.

DATE:

### **FULL ANALYSIS**

#### I. SUBSTANTIVE ANALYSIS

### A. HOUSE PRINCIPLES ANALYSIS:

**Provides Limited Government--** The bill establishes a pilot program for secondary schools in selected counties on suicide and depression prevention.

**Empower Families--** The bill requires parents of each student in a participating school to be provided with information and requires written consent before any student may be screened.

## B. EFFECT OF PROPOSED CHANGES:

# **Background**

According to the National Center for Health Statistics, the suicide rate for youths and young adults aged 15-24 years has tripled since 1950, and suicide is now the third leading cause of death in this age group. Recent studies indicate that the incidence of suicide attempts among adolescents may exceed 10% annually, although it is difficult to obtain reliable estimates because of the accompanying stigma with attempting suicide.<sup>1</sup>

A relatively new approach to reducing the incidence of suicide among adolescents is found in Signs of Suicide (SOS), a school-based prevention program.<sup>2</sup> According to Screening for Mental Health, Inc., (SMH), the SOS Program is a nationally recognized, easily implemented, cost-effective program of suicide prevention for secondary school students. It is the only school-based program to:

- Show a reduction in suicide attempts (by 40%) in a randomized controlled study (American Journal of Public Health, March, 2004).
- Be selected by the Substance Abuse and Mental Health Services Administration (SAMHSA) for its National Registry of Evidence-based Programs and Practices (NREPP).

The SOS Program has also documented a dramatic increase in help-seeking. (Adolescent and Family Health, 2003).<sup>3</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's primary objectives are to educate teens that depression is a treatable illness and to equip them to respond to a potential suicide involving a friend or family member using the SOS technique. SOS is an action-oriented approach instructing students how to **ACT** (**A**cknowledge, **C**are, and **T**ell) in the face of this mental health emergency.<sup>4</sup>

4 Id.

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<sup>&</sup>lt;sup>1</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.

www.mentalhealthscreening.org/highschool/

According to SAMHSA, the average amount of time to implement the program across 376 schools was approximately 2.5 days, although almost 40% 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%.
- There was a 70% 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 3 months following the program (9.74) per month, and was significantly higher than the previous school year (3.93). There was also a 25% increase in the number of youths seeking help for a friend 3 months after implementation (2.78) when compared to the past year (2.25).5

# The Michael Buonauro Foundation

Judy and Frank Buonauro, whose son Michael died by suicide May 28, 2004, created the Michael Buonauro Foundation. The Foundation secured the SOS program for all public high school students in Orange County, Florida, for the 2005-2006 school year. Private schools were also invited to participate in the program.

# **Effects of Proposed Changes**

House bill 999 establishes a pilot program on suicide and depression prevention for secondary schools in Brevard, Orange, Osceola, and Seminole counties during the 2006-2007 fiscal year. The bill states the pilot program shall encourage collaboration with local mental health facilities and individual professionals. In order for one of the counties authorized to participate in this pilot program to receive funding, the bill requires an SOS entity to submit a program proposal to the DOE by September 1, 2006.

The bill requires the pilot program to 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. The bill requires written consent by a parent or guardian prior to screening a student.

The bill requires the SOS pilot program to provide a report to the President of the Senate and Speaker of the House of Representatives by January 1, 2007. The report must include the following:

- An itemized list of program costs;
- An evaluation of participating schools;

<sup>6</sup> http://www.southwestorlandobulletin.com STORAGE NAME:

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<sup>&</sup>lt;sup>5</sup> http://modelprograms.samhsa.gov/

- 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;
- 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 provides an effective date of July 1, 2006.

### C. SECTION DIRECTORY:

**Section 1:** Provides for a pilot program to be conducted by the Signs of Suicide Prevention Program for secondary schools in specified counties.

**Section 2:** Provides conditions for program funding.

**Section 3:** Provides an effective date of July 1, 2006.

### II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

## A. FISCAL IMPACT ON STATE GOVERNMENT:

# 1. Revenues:

The bill does not appear to have a fiscal impact on state government revenues.

# 2. Expenditures:

The bill requires implementation of the Signs of Suicide Prevention pilot program for secondary schools in Brevard, Orange, Osceola, and Seminole counties contingent upon funding in the 2006-2007 General Appropriations Act. Release of funds to the Michael Buonauro Foundation is contingent upon the Foundation providing equivalent matching funds. The Foundation has indicated that the maximum match it is willing to make for the 2006-2007 fiscal year is \$600,000.

### B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

### 1. Revenues:

This bill does not appear to have a fiscal impact on local government revenues.

# 2. Expenditures:

This bill does not appear to have a fiscal impact on local government expenditures.

## C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

This bill does not appear to have a fiscal impact on the private sector.

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### D. FISCAL COMMENTS:

None.

# **III. COMMENTS**

## A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

This bill does not appear to require counties or municipalities to take an action requiring the expenditure of funds, reduce the authority that counties or municipalities have to raise revenue in the aggregate, nor reduce the percentage of state tax shared with counties or municipalities.

2. Other:

None.

## **B. RULE-MAKING AUTHORITY:**

None.

## C. DRAFTING ISSUES OR OTHER COMMENTS:

In order for one of the counties authorized to participate in this pilot program to receive funding, the bill requires an SOS entity to submit a program proposal to the DOE by September 1, 2006. The bill also requires the SOS pilot program to provide a report to the President of the Senate and Speaker of the House of Representatives by January 1, 2007, containing the following:

- 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;
- An assessment of the efficacy of the program; and
- Recommendations regarding program effects and outcomes.

The amount of time between September 1, 2006 and January 1, 2007 may not allow enough time for the information required in the report to be obtained.

## IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES

On March 21, 2006, the PreK-12 Committee adopted a strike-all amendment.

On April 11, 2006, the Education Appropriations Committee adopted two amendments removing legislative intent for support and funding of the pilot program and requiring implementation of the pilot program contingent upon funding in the 2006-2007 fiscal vear General Appropriations Act.

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On April 18, 2006, the Education Council adopted one amendment and reported the bill favorably. The amendment requires written consent by a parent or guardian prior to screening a student.

This bill analysis is written reflect the bill as amended.

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