HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 999 SPONSOR(S): Adams TIED BILLS: Suicide Prevention

IDEN./SIM. BILLS: SB 1876

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) PreK-12 Committee		Hatfield	Mizereck
2) Future of Florida's Families Committee			
3) Education Appropriations Committee			
4) Education Council			
5)			

SUMMARY ANALYSIS

House bill 999 establishes a pilot program on suicide prevention and depression for secondary schools in Brevard, Orange, Osceola, and Seminole counties during the 2006-2007 fiscal year.

In order for one of the authorized counties 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; either the entire student body or a select portion of the student body of a participating school must be screened; and prior to the screening, the parent of each student must be provided with a copy of the screening form and additional information that will assist the parent in the identification of depression and suicidal tendencies along with helping initiate family discussions. The bill provides that a parent may refuse to allow his or her child to participate in the program.

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

The bill appropriates \$600,000 from the General Revenue Fund to the DOE for the 2006-2007 fiscal year for distribution to the Michael Buonauro Foundation. See FISCAL ANALYSIS for further details.

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 prevention and depression. The bill requires parents in participating schools to opt out of the program. The bill requires student screening.

Empower Families-- The bill requires parents of each student in a participating school to be provided with information that may assist the parent in the identification of depression and suicidal tendencies and to help initiate family discussions.

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.¹

A relatively new approach to reducing the incidence of suicide among adolescents is found in Signs of Suicide (SOS), a school-based prevention program.² According to Screening for Mental Health, Inc., (SMH), the SOS Signs of Suicide 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).³

Secondary schools participating in the SOS program can choose from the following materials:

Video and Discussion Guide

The educational video helps students recognize the signs and symptoms of depression and potential suicidality in themselves or their friends and encourages help-seeking. Using real-life stories and dramatic vignettes, the video illustrates the right and wrong way for them to help friends displaying those signs. The Discussion Guide that accompanies the video helps teachers to focus classroom discussion, making sure that students understand the program's message of action and empowerment.

Screening Forms

The Brief Screen for Adolescent Depression (BSAD) is a 7-question screening tool that reinforces the information students receive regarding depression through the video and educational materials.

² Id.

¹ Robert H. Aseltine Jr, PhD, and Robert DeMartino, MD, *An Outcome Evaluation of the SOS Suicide Prevention Program*, American Journal of Public Health , March 2004, Vol. 94, No. 3, at 446.

Screenings can be administered anonymously. Forms are available in English and Spanish.⁴ The screening form is scored by the students themselves; a score of 16 or higher on the CDS is considered a strong indicator of clinical depression, and the scoring and interpretation sheet that accompanies the screening form encourages students with such scores to seek help immediately.⁵

Following the video and/or screening, schools are encouraged to provide an opportunity for students to talk further with a school professional.⁶

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 in 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.⁷

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 then 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).⁸

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.⁹

Effects of Proposed Changes

The bill establishes a pilot program on suicide prevention and depression for secondary schools in Brevard, Orange, Osceola, and Seminole counties during the 2006-2007 fiscal year.

The bill provides legislative intent that includes the support and funding of a pilot program that is conducted by the Signs of Suicide Prevention Program, known as "SOS." It is also the intent of the Legislature for the pilot program to encourage collaboration with local mental health facilities and individual professionals in order to facilitate access to treatment.

⁴ www.mentalhealthscreening.org/highschool/sos_materials.aspx

⁵ Robert H. Aseltine Jr, PhD, and Robert DeMartino, MD, *An Outcome Evaluation of the SOS Suicide Prevention Program*, American Journal of Public Health , March 2004, Vol. 94, No. 3, at 446.

⁶ www.mentalhealthscreening.org/highschool/sos_materials.aspx

⁷ www.mentalhealthscreening.org/highschool/

⁸ http://modelprograms.samhsa.gov/

⁹ http://www.southwestorlandobulletin.com

STORAGE NAME: h0999.PKT.doc **DATE**: 3/17/2006

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 to the DOE a proposal for suicide prevention and depression screening for secondary school students who attend school in that county. The proposal must be submitted 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. Dependent on the school's resources, either the entire student body or a select portion of the student body of a participating school must be screened. Students participating in the screening are not required to present identification in order to be screened. Prior to the screening, the parent of each student in a participating school must be provided with a copy of the screening form and additional information that will assist the parent in the identification of depression and suicidal tendencies along with helping initiate family discussions. The bill provides that a parent may refuse to allow his or her child to participate in the program.

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.
- 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.

The report must also include recommendations for further legislation, which may include an assessment of the feasibility of extending the program to secondary schools throughout the state. 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 the DOE for the 2006-2007 fiscal year. The funds are then distributed to the Michael Buonauro Foundation to implement the SOS as a pilot program for secondary schools in the selected counties.

The bill provides an effective date of July 1, 2006.

C. SECTION DIRECTORY:

Section 1: Providing for a pilot program to be conducted by the Signs of Suicide Prevention Program for secondary schools in specified counties; providing legislative intent; requiring the submission of proposals to the Department of Education; providing for student participation in the pilot program and for the provision of certain information to parents; and requiring a report to the Legislature.

Section 2: Provides a \$600,000 appropriation from the General Revenue Fund.

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

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

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

2. Expenditures:

This bill appropriates \$600,000 from the General Revenue Fund to the DOE for the 2006-2007 fiscal year. The DOE is required to distribute the funds to the Michael Buonauro Foundation to implement the Signs of Suicide Prevention Program as a pilot program for secondary schools in Brevard, Orange, Osceola, and Seminole counties.

- 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.

D. FISCAL COMMENTS:

None.

III. COMMENTS

- A. CONSTITUTIONAL ISSUES:
 - 1. Applicability of Municipality/County Mandates Provision:

The bill does not require a city or county to spend funds or to take any action requiring the expenditure of funds.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

None.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES