

May 11, 2023

## **Ohio Children's Alliance Proponent Testimony Sub HB 33**

Chairman Brenner, Vice Chair O'Brien, Ranking Member Ingram, and members of the Senate Education Committee, thank you for the opportunity to offer testimony on Substitute House Bill 33, the proposed state budget bill for fiscal years 2024-2025.

My name is Kate Rossman and I am the Manager of Policy at the Ohio Children's Alliance. For 50 years, our organization has contributed to improvements to Ohio's system of care for children and families, with a particular focus on child welfare and behavioral health. We pursue our advocacy and best practice work through partnerships with community-based organizations.

Today, we are supported in our work through numerous collaborations and partnerships; first and foremost, through membership of over 85 community-based provider organizations serving children and families. In addition, we administer numerous statewide programs through contracts with state government, health insurance companies, and philanthropic foundations. All of our work aims to improve efficiency, accountability, and access within Ohio's system of care for children and families.

We are grateful for the opportunity to testify on Sub HB 33, and want to focus our testimony today on the Student Wellness and Success Fund.

A crisis is erupting in children's mental health. State and federal data confirm that Ohio's youngest residents are exhibiting unprecedented mental health needs at unprecedented rates:

- The number of children in Ohio diagnosed with anxiety or depression jumped 42% in 2020, representing the 10<sup>th</sup> highest increase nationwide.<sup>1</sup>
- Ohio ranks 13th highest in the nation for the percent of children who have been exposed to two or more adverse childhood experiences, known as ACES.<sup>2</sup>
- Between 2020 and 2021, the number of children hospitalized for a mental health reason increased 163% nationally.<sup>3</sup>

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<sup>&</sup>lt;sup>1</sup> https://assets.aecf.org/m/databook/aecf-2022kidscountdatabook-embargoed.pdf

<sup>&</sup>lt;sup>2</sup> https://wraparoundohio.org/wp-content/uploads/2022/03/KidsBehavioralHealthFinal.pdf

<sup>&</sup>lt;sup>3</sup> https://governor.ohio.gov/media/news-and-media/Governor-DeWine-Announces-Pediatric-Behavioral-Health-Initiative-05162022

- In 2021, The American Academy of Pediatrics declared a **national emergency in** children's mental health.<sup>4</sup>
- In 2020, suicide was the second leading cause of death for youth ages 10-14 and the third leading cause of death for youth ages of 15-24.<sup>5</sup>

What's more: the misalignment of services is also growing. **Nationwide, 59.8% of youth with major depression do not receive any mental health treatment.**<sup>6</sup> Understaffed and fragmented care<sup>7</sup> as well as lack of information and stigma<sup>8</sup> all play a role.

Children spend the majority of their lives in school, which plays an essential role in supporting them and their families. There is well-documented long-term value in developing comprehensive school mental health programs. Benefits include academic success, strong interpersonal skills, relationship building, self-regulation, and perseverance.<sup>9</sup>

Mental health resources, training, and increased prevention & intervention are becoming necessary components to thriving classrooms and schools. In 2019, Governor DeWine and the Ohio Legislature made history with the creation of the Student Wellness and Success Fund (SWSF) which was designed to provide wraparound services for kids and resources for teachers and staff.

This fund was written into law prior to the start of the COVID-19 pandemic and shelter-in-place requirements, which had a profound impact on children. The mental health impacts as a result of COVID-19 have been recognized by the last two presidential administrations.

In fact, seventy percent of public schools reported an increase in the percentage of their students seeking mental health services at school since the start of the COVID-19 pandemic, and over three-quarters of schools reported an increase in staff voicing concerns about their students exhibiting symptoms such as depression, anxiety, and trauma.<sup>10</sup>

When children and youth struggle with their mental health, it impedes their ability to learn as well as the entire classroom ecosystem. When one child struggles, a cohort of children, teachers, and staff struggle, causing chronic stress and learning disruption. Teachers are crying out for help;

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<sup>&</sup>lt;sup>4</sup> <u>https://www.health.harvard.edu/blog/the-mental-health-crisis-among-children-and-teens-how-parents-can-help-202203082700</u>

<sup>&</sup>lt;sup>5</sup> <u>https://www.nimh.nih.gov/health/statistics/suicide</u>

<sup>&</sup>lt;sup>6</sup> https://mhanational.org/issues/state-mental-health-america

<sup>&</sup>lt;sup>7</sup> https://data.ohio.gov/wps/portal/gov/data/projects/03-mhas-workforce

<sup>&</sup>lt;sup>8</sup> https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-health

<sup>&</sup>lt;sup>9</sup> <u>https://www.education.nh.gov/sites/g/files/ehbemt326/files/inline-documents/mental\_health\_and\_academic\_achievement.pdf</u>

<sup>&</sup>lt;sup>10</sup> Ibid.

only half of public schools nationwide report that they can effectively provide mental health services to all students in need.<sup>11</sup>

The SWSF is a more important tool than ever in providing kids, teachers, and schools with the means to meet the mental health needs of the kids in their classrooms. Sub HB 33 provides a critical opportunity to infuse targeted funding for these purposes into schools and secure the resources they would not otherwise have had.

Additionally, the bill includes several important safeguards that ensure enhanced accountability, transparency, and collaboration with parents and providers. Here are a few of these guardrails:

- A portion of the funds must be spent in conjunction with two community partners, one of which being an ADAMH Board or community mental health provider. Fifty percent of this portion must also be spent on mental and/or physical health services.
- Within thirty days of the creation or amendment of a services plan, school districts and schools must share the plan at a public meeting of the board of education or governing authority and post the plan on the district or school's web site.<sup>12</sup>
- ODE, in consultation with OhioMHAS, must conduct an evaluation of the impact of student wellness and success funds on student measures such as school climate, attendance, discipline, and academic achievement.<sup>1314</sup>

Through prioritization of narrowly-tailored funds, increased behavioral health partner participation, and enhanced fidelity, the SWSF can make the most significant impact on what matters most: the wellbeing of our kids. We are grateful for the continued support and increased accountability of the SWSF included in Sub HB 33 and ask that the Senate protect these provisions. Thank you for your consideration. Please feel free to reach out with any questions.

Thank you,

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- <sup>12</sup> Ibid.
- <sup>13</sup> Ibid.
- <sup>14</sup> Ibid.

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<sup>&</sup>lt;sup>11</sup> <u>https://nces.ed.gov/whatsnew/press\_releases/05\_31\_2022\_2.asp</u>