



May 16, 2022

Chair Gayle Manning  
Primary and Secondary Education Committee  
Ohio House of Representatives

RE: Support for HB 492

Chair Manning, Vice Chair Bird, Ranking Member Robinson and members of the committee:

Thank you for allowing me to submit proponent testimony for HB 492, which would require athletic coaches to receive a student mental health training course approved and certified by the Ohio Department of Mental Health and Addiction Services. One in 5 children living with a mental health concern and youth suicide is the second leading cause of death in Ohio among 10–19-year-olds and has been steadily increasing for nearly two decades. Now is the time to educate and empower more adults to help identify children who may be in need of additional care.

My name is John Ackerman and I am a psychologist, researcher, and clinical manager of suicide prevention efforts at the Center for Suicide Prevention and Research (CSPR) at Nationwide Children's Hospital. We work with hundreds of schools in central and southeastern Ohio with the goal of educating both students and adults about how to identify and respond to the warning signs of suicide. The CSPR leads hospital's efforts at Nationwide Children's Hospital to improve care for suicidal youth and to reduce preventable harm. We also work with youth-serving organizations such as the Boys & Girls Clubs of Ohio, camps, and clubs to prepare adults to support at-risk youth in a trauma-informed manner. The CSPR focuses on upstream prevention and develops programs to meet youth where they are so that we are not waiting until a young person engages in suicidal behavior before we first intervene.

The CSPR supports training, education, and advocacy efforts across a wide range of stakeholders including coaches because building a broad safety net is necessary to drive down youth suicide rates. We know that young people share highly personal information with adults they can trust and when it comes to disclosing thoughts of suicide, it isn't always the folks we typically think of such as counselors, physicians, and parents. Coaches repeatedly share with us that student athletes disclose suicide risk to them because they have an established trusting relationship and serve as mentors. Sports can be a break from difficult home or academic circumstances and coaches spend a lot of time with youth. Coaches can recognize changes and warning signs that other adults may not see. We know from experience at the CSPR that coaches are well positioned to notice the kind of mood and behavioral changes that can indicate increased suicide risk. Personally, I have witnessed coaches use the tools taught in suicide prevention trainings like the ones proposed to save the lives of student athletes and to link them with healthcare options moving forward. I have also reviewed circumstances where signs were missed and an entire community grieved the loss of a student athlete to suicide. We must do more to avoid such preventable tragedies.

HB492 would allow coaches to be better equipped to meet the urgent needs of youth in sports. Student athletes face unique pressures at a time when they are still developing physically and emotionally. Helping them find hope and connection during vulnerable times will ensure that these young people can go on to meet their potential and contribute to their families and communities. I strongly encourage a response commensurate with the demands of this current public health crisis.

Thank you for allowing me to write in support of HB 492 and urge its passage.

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