

HOUSE BILL REPORT

HB 1138

As Reported by House Committee On: Higher Education

Title: An act relating to creating a task force on mental health and suicide prevention in higher education.

Brief Description: Creating a task force on mental health and suicide prevention in higher education.

Sponsors: Representatives Orwall, Haler, Blake, Carlyle, Kochmar, Reykdal, Appleton, S. Hunt, Pollet, Tarleton, Ortiz-Self, Gregerson, Bergquist, Ormsby, Senn, Riccelli, Ryu, Tharinger, Walkinshaw and Fey.

Brief History:

Committee Activity:

Higher Education: 1/28/15, 2/4/15 [DPS].

Brief Summary of Substitute Bill

- Creates a Task Force on Mental Health and Suicide Prevention at the Higher Education Institutions (Task Force) to determine what policies, resources, and technical assistance are needed to support the institutions in improving access to mental health services, and improving suicide prevention responses.
- Requires the Task Force to report its findings and recommendations to the Governor and Legislature by November 1, 2016, including a summary of the data reviewed, best practices and policies for providing mental health services and preventing suicide at the institutions, and recommendations on resources and technical assistance required to increase awareness of behavioral health needs.

HOUSE COMMITTEE ON HIGHER EDUCATION

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 13 members: Representatives Hansen, Chair; Pollet, Vice Chair; Zeiger, Ranking Minority Member; Haler, Assistant Ranking Minority Member; Bergquist, Gregory, Hargrove, Holy, Reykdal, Sells, Stambaugh, Tarleton and Van Werven.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Staff: Megan Wargacki (786-7194).

Background:

Suicide Statistics.

According to the Department of Health, suicide is the second leading cause of death for Washington youth between the ages of 10 and 24. Suicide rates among Washington youth are higher than the national average. In 2012 and 2013, over 200 youth between the ages of 18 and 24 died by suicide. In those same years, over 1,000 youth ages 18 to 24 required hospitalization due to a self-inflicted nonfatal injury. For each youth between the ages of 10 and 24 who dies by suicide, the average cost is nearly \$2,000,000 in future work loss and \$5,000 in medical costs. The estimated cost for each nonfatal suicide attempt that results in hospitalization is about \$11,000 in medical costs and \$24,000 in work loss costs.

According to the National Center for Veterans Studies at the University of Utah, veterans face an elevated risk of suicide as compared to the general population; nearly half of college students who are United States military veterans have had thoughts of suicide. Nearly 8 percent of veteran college students reported a suicide attempt compared to a little over 1 percent of other college students.

According to the National College Health Assessment Survey, sponsored by the American College Health Association, almost 10 percent of college students reported that they had seriously considered attempting suicide and 1.5 percent of students reported that they had attempted suicide within the last school year.

Forefront.

Forefront at the University of Washington focuses on introducing changes to suicide prevention by:

- educating and empowering individuals and communities to advocate for and to implement suicide prevention strategies;
- training health professionals to develop and sharpen skills in the assessment, management, and treatment of suicide risk;
- supporting secondary schools and colleges implementing comprehensive plans to promote mental health services; and
- guiding news media in responsible reporting on mental health and suicide that accurately portrays the reality of hope and recovery.

Summary of Substitute Bill:

A Task Force on Mental Health and Suicide Prevention at the Higher Education Institutions (Task Force) is created to determine what policies, resources, and technical assistance are needed to support the institutions in improving access to mental health services and improving suicide prevention responses. Certain agencies and experts must be members of the Task Force. Forefront at the University of Washington must staff the Task Force and convene the initial meeting.

The Task Force, in cooperation with the public and private institutions, must obtain data related to mental health services, suicide prevention and response, and deaths by suicide at the public and private institutions, including:

- protocols for responding to students in distress that cover intervention, treatment, reentry, and post-crisis intervention;
- data on on-campus use of student behavioral health services over the past five years; and
- information on the relationship between emotional distress and student withdrawal.

The Task Force must report its findings and recommendations to the Governor and Legislature by November 1, 2016, including a summary of:

- the data reviewed;
- the best practices and policies for providing mental health services and preventing suicide at the institutions;
- recommendations on resources and technical assistance required to increase awareness of behavioral health needs on campus; and
- recommendation to support the institutions in preventing suicide on campus.

The act expires July 1, 2017.

Substitute Bill Compared to Original Bill:

The substitute bill makes technical corrections to some statistics in the intent section and changes the term "completed suicide" to "death by suicide."

Appropriation: None.

Fiscal Note: Available.

Effective Date of Substitute Bill: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) Colleges have two populations at risk of suicide: youth in transition and veterans. This bill looks at what needs to be done, as well as what can be done, using the expertise of Forefront, which is a champion at moving lots of the implementation forward. There is much that can be done on college campuses to ensure that students get a quality education and have good mental health. Suicide prevention is the tip of the mental health iceberg; there are lots of other issues that are never seen until they emerge as attempted suicide or mental breakdown. When institutions start asking the critical questions and start thinking systematically about how faculty, students, and staff can be more ready and what role everyone plays in preventing suicide, big changes start to happen. The death of students affects the entire campus, particularly the friends of the student—mentally, socially, and emotionally. Teachers and administrators do not know what to do to help friends of students who die by suicide; they often tell these students that focusing on course work and exams is a

good way to get through. Through programs such as Forefront, parents and students will be encouraged to be open to facing the pain that is the natural part of being human, to be more proactive in helping others, and seeking help themselves. The institutions often are not prepared to recognize the problems that come after a student dies by suicide, and so are not ready to deal with them. Faculty attend many trainings and workshops, but rarely do they receive training about how to identify students at risk for suicide, or what to do when you identify such a student, and where to refer them. Faculty and administrators should not assume that students' mental health problems are not their concern or responsibility and should take students' concerns about stress seriously. The counseling staff are often unprepared to provide the comprehensive support needed in the aftermath of a suicide on campus. Often the most obvious resources do not know who to refer students to after a death or attempt by suicide. If higher education institutions had plans to prevent suicide, and could identify students struggling with depression, they could help these students deal with their difficulties, which could really save lives. Veterans need to be considered in all the processes and policies that will be developed as a result of this bill.

(Opposed) None.

Persons Testifying: Representative Orwall, prime sponsor; Jennifer Suber, Pat McCullough, and Juliana Borges, Forefront; Ethan Hansman and Eric Hansman, University of Washington; Stephanie Stein; Donn Marshall, University of Puget Sound; Lori Miller, Seattle Central College; Joe Holiday, State Board for Community Technical Colleges; Alfie Alvarado, Washington State Department of Veteran Affairs; and Ted Wicorek and Dick Marcelynas, Veteran Legislative Coalition.

Persons Signed In To Testify But Not Testifying: None.