

SENATE BILL REPORT

SSB 6191

As Amended by House, March 4, 2020

Title: An act relating to assessing the prevalence of adverse childhood experiences in middle and high school students to inform decision making and improve services.

Brief Description: Assessing the prevalence of adverse childhood experiences in middle and high school students to inform decision making and improve services.

Sponsors: Senate Committee on Early Learning & K-12 Education (originally sponsored by Senators Braun, Darneille, Hasegawa, O'Ban, Rolfes, Short and Wilson, C.).

Brief History:

Committee Activity: Early Learning & K-12 Education: 1/15/20, 1/31/20 [DPS, w/oRec].

Floor Activity:

Passed Senate: 2/12/20, 43-3.

Passed House: 3/04/20, 96-1.

Brief Summary of First Substitute Bill

- Directs the Health Care Authority and other state agencies to incorporate questions related to adverse childhood experiences (ACEs) into the Healthy Youth Survey.
- Encourages school districts to use the information about ACEs in their decision making and to help improve services for students.

SENATE COMMITTEE ON EARLY LEARNING & K-12 EDUCATION

Majority Report: That Substitute Senate Bill No. 6191 be substituted therefor, and the substitute bill do pass.

Signed by Senators Wellman, Chair; Wilson, C., Vice Chair; Hawkins, Ranking Member; Hunt, Mullet, Pedersen and Salomon.

Minority Report: That it be referred without recommendation.

Signed by Senators Padden and Wagoner.

Staff: Ailey Kato (786-7434)

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.

Background: ACEs. In 2011, the Legislature defined ACEs to mean the following indicators of severe childhood stressors and family dysfunction, when experienced in the first 18 years of life and taken together, are provided by public health research to be powerful determinants of physical, mental, social, and behavioral health across the lifespan:

- child physical, sexual, and emotional abuse;
- child emotional or physical neglect;
- alcohol or other substance abuse in the home;
- mental illness, depression, or suicidal behaviors in the home;
- incarceration of a family member;
- witnessing intimate partner violence; and
- parental divorce or separation.

The definition states that ACEs have been demonstrated to affect the development of the brain and other major body systems. The definition applies to a nongovernmental private-public initiative.

Healthy Youth Survey. The Healthy Youth Survey is a collaborative effort of the Health Care Authority (HCA), the Office of the Superintendent of Public Instruction (OSPI), and other state agencies. According to the survey's website, it is an effort to measure health risk behaviors contributing to morbidity, mortality, and social problems among youth in Washington State.

The voluntary survey is administered every two years to students in sixth, eighth, tenth, and twelfth grades, and responses are anonymous. According to OSPI, over 230,000 students in over 1000 schools, from 236 school districts, in all 39 counties took part in the survey in 2018.

Summary of First Substitute Bill: HCA, in collaboration with OSPI, Department of Health, and the Liquor and Cannabis Board, must incorporate questions related to ACEs into the Healthy Youth Survey. The questions must be validated for children and would allow reporting of ACEs during childhood to be included in frequency reports. The questions must be administered for two cycles and then evaluated by the state agencies for any needed changes. Student responses to the survey are voluntary and must remain anonymous.

The aggregated student responses must be published by state, educational service district, county, and school district if the district has more than 20 students. The aggregated student responses must be available to school buildings and school districts with 20 or fewer students.

School districts are encouraged to use this information in their decision making and to help improve services for students.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill: *The committee recommended a different version of the bill than what was heard.* PRO: Research has connected toxic childhood stress to long-term impacts and a variety of health issues. When children have ACEs, there are effective interventions such as resiliency training and social emotional learning. The ACE questions can give educators important information about the well-being of their students while still protecting their privacy. This data can identify hot spots where resources and support are needed. The Healthy Youth Survey appropriately words questions for the age of the students.

CON: The Healthy Youth Survey already asks intrusive questions and questions related to ACEs. Adding additional ACE questions is more intrusive and could cause more trauma. Families need to help their children with this trauma not schools. The ACE questions were developed by health professionals and should not be given to all children. Not all children are victims of trauma.

Persons Testifying: PRO: Senator John Braun, Prime Sponsor; Tennille Jeffries-Simmons, Office of the Superintendent of Public Instruction; Melanie Smith, Committee For Children.

CON: Dawn Land, citizen; Sharon Hanek, citizen.

Persons Signed In To Testify But Not Testifying: No one.

EFFECT OF HOUSE AMENDMENT(S):

- Removes the requirement that aggregated student responses be published for school districts with more than 20 students.
- Requires aggregated student responses to be provided to all school districts in addition to school buildings.
- Requires student response data to comply with state and federal privacy laws.