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Testimony of

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Connecticut Education Association

Before a joint meeting of the

Public Health Committee

&

Committee on Children

HB 5001 AAC CHILDREN'S MENTAL HEALTH

February 25, 2022

Esteemed members of the Committees on Public Health and Children, my name is Kate Field, and I am the Teacher Development Specialist at the Connecticut Education Association (CEA) and a former public school teacher and administrator. CEA represents educators in over 150 school districts across the state. Thank you for the opportunity to provide testimony in support of specific sections of HB 5001 AN ACT CONCERNING CHILDREN'S MENTAL HEALTH.

I joined CEA in 2015 to advocate for teachers after a twenty-year career as a public school teacher and administrator. Over my seven years with CEA, I have worked with teachers across the state. What was already evident in 2015 has only worsened. Mental health challenges among children have been rising at an alarming rate, educators are increasingly stressed and overextended, child to support staff ratios remain woefully insufficient, and mental health programs serving children continue to be vastly under-resourced.

The underlying issues observed by educators for the past decade have only worsened with the pandemic. The pandemic, like an accelerant poured onto a fire, has exacerbated the crisis to the point it can no longer be minimized or addressed in a piecemeal fashion.

In response, CEA invested in developing professional learning opportunities for educators on restorative practices, trauma-informed pedagogy, and certified mental health first aid. We have even begun offering workshops on self-care and strategies to address the secondary trauma experienced by educators working with students whose needs go unmet. The strength of the demand is troubling and speaks to the need for us to take coordinated action.

Despite the magnitude of these challenges, CEA is optimistic about the future. The level of concern and attention to childhood mental health is growing and recognized by the governor and legislators regardless of party. We all agree that it is time to take urgent and collective action to support children and the educators who serve them.

Today, CEA members and staff are testifying on various aspects of this comprehensive bill. My testimony will focus on the following sections of House Bill 5001:

Sec. 19: SDE School Based Mental Health Service Grant

CEA supports the creation of a grant to help expand the availability of school-based mental health services. Nationwide, one in every five youths suffer from a diagnosable emotional, mental, or behavioral disorder, but 80% of youth in need of mental health services do not receive services in their communities because existing mental health services are inadequate, or they lack insurance.

Students are 21 times more likely to visit school-based health centers for treatment than anywhere else. Schools that employ more school-based mental health providers see improved attendance rates, lower rates of suspension and other disciplinary incidents, expulsion, improved academic achievement and career preparation, and improved graduation rates. Data analyses show that school staff who provide health and mental health services to our children not only improve the health outcomes for those students, but also improve school safety.¹

Sections 21-25: Truancy Intervention Models

Truancy is documented as one of the earliest and most predictive warning signs of a student at-risk of dropping out of school. Truant youth are twenty-five times more likely to drop out before high school graduation than their non-truant counterparts.² Therefore, CEA strongly supports measures that would require schools with high truancy rates to evaluate truant children for additional behavioral health services. We also support requiring training for Student Resource Officers (SROs) in topics like Mental Health First Aid, so that they are able to help determine if truant students are in need of mental health services or resources. These measures may help reduce the truancy rate, which increased substantially during the pandemic.

Sec. 53: Restorative Practices and SEL

CEA is a provider of professional development in restorative practices and SEL for educators and strongly believes such learning opportunities can be transformative. Therefore, CEA supports requiring all mental health service providers working in a school-based mental health clinic in partnership with a board of education be knowledgeable in social emotional learning and restorative practices. CEA feels professional development in these topics should be required of all mental health service providers working in a school setting.

However, we also point out that strategies promoting restorative practices and SEL are most effective when adopted school wide and when there is consistent adherence to their principles. We urge lawmakers to recognize that additional supports and strategies will be necessary for schools to address students' needs while the school community builds capacity to be truly restorative and emotionally "intelligent."

¹ https://www.aclu.org/sites/default/files/field_document/030419-acluschooldisciplinereport.pdf

² <https://cca-ct.org/wp-content/uploads/2012/06/rKM-Truancy-Programs-book-2015-R.pdf>

Sec. 27: Trauma Needs Assessment

CEA supports requiring districts to include the results of a trauma needs assessment in their annual strategic school profile report and that the report also identify resources needed to address the level of trauma impacting students and staff in each school in the district. Ideally, this assessment will focus resources where they are most needed and can provide the greatest positive impact on student learning.

Sec. 41-42: Peer-to-Peer Mental Health Support Program

CEA supports making peer-to-peer mental health support programs available to districts; however, we suggest that lawmakers consider the many reputable programs that exist when requiring CSDE to create one. Time and resources may be better utilized ensuring every district has access to recognized programs of their choice and the resources needed to implement and sustain them.

In closing, over the last few years, CEA has offered several proposals providing many of the same supports found in HB 5001, such as: funding robust mental health support programs for students, increasing the number of support staff available in schools, including teachers in decisions about resources provided to students in need, and offering meaningful professional learning opportunities. We see many commonalities in HB 5001. CEA is supportive of the ambitious provisions in this bill and believes that, with certain enhancements, they will begin to help alleviate the mental health crisis afflicting children and enhance the effectiveness of Connecticut's public schools.