

Delegate Shane E. Pendergrass, Chair Delegate Joseline A. Pena-Melnyk, Vice Chair Health and Government Operations Committee Room 241, House Office Building Annapolis, MD 21401

Bill: House Bill 783 - Workgroup on Screening Related to Adverse Childhood Experiences

Position: Support

Dear Chair Pendergrass, Vice Chair Pena-Melnyk, and Members of the Committee:

I am writing on behalf of the Maryland School Psychologists' Association (MSPA), a professional organization representing about 500 school psychologists in Maryland. We advocate for the social-emotional, behavioral, and academic wellbeing of students and families across the state.

The purpose of this letter is to provide support for House Bill 783, which would establish a workgroup that will focus on screening for Adverse Childhood Experiences (ACEs). The workgroup will be charged with identifying screening tools in collaboration with the Maryland Department of Health, and make recommendations on creating strong links between screening and related services.

The Centers for Disease Control and Prevention define ACEs simply as potentially traumatic events that occur in childhood. Examples of ACEs include experiencing violence or abuse, witnessing violence in the home or community, having a family member attempt or die by suicide, exposure to substance abuse, and many. More. Exposure to ACEs is strongly correlated with many negative outcomes including chronic health problems, mental illness, and substance abuse in adulthood. Exposure can also negatively impact educational success and job opportunities. Importantly, early treatment for children related to ACEs can guard against many of these negative outcomes.

School psychologists are charged with providing frontline mental health support and treatment to Maryland's students. Unfortunately, we often know little about those students' past experiences, especially as they relate to trauma and ACEs. Unfortunately, it is often the case that when student work with their school psychologist, it is the first mental health treatment they have ever received. Improving ACEs screening as well as ensuring access to early intervention can begin the process of mitigating potential negative outcomes for our students.

For these reasons, we urge a favorable report on HB 783. If we can provide any additional information or be of any assistance, please contact us at legislative@mspaonline.org, or Rachael Faulkner@policypartners.net or (410) 693-4000.

Respectfully submitted,

Kyle Potter, Ph.D., NCSP

Chair, Legislative Committee

Maryland School Psychologists' Association