



Informational Testimony regarding Senate Bill 388 Public Schools - Standardized Behavioral Health Screenings for Students -Development and Implementation

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The Maryland State Education Association offers this informational testimony on Senate Bill 388, which would require the Maryland Consortium on Coordinated Community Supports to develop guidelines for developing a standardized behavioral health screening for students, require that the screening be given to a student's parent or guardian each year they are enrolled in school, and require each behavioral health services coordinator to develop and implement a standardized behavioral health screening.

MSEA represents 75,000 educators and school employees who work in Maryland's public schools, teaching and preparing our almost 900,000 students for the careers and jobs of the future. MSEA also represents 39 local affiliates in every county across the state of Maryland, and our parent affiliate is the 3-million-member National Education Association (NEA).

MSEA believes that every child is a whole child who needs adequate social, emotional, and behavioral support to thrive in and out of the classroom. To that end, behavioral health counseling services should be integrated into the educational system beginning at the pre-kindergarten level. This legislation rightly acknowledges the importance of providing consistent, responsive behavioral health services in schools using up-to-date tools.

To effectively support students' growth, behavioral health and counseling services must be implemented with appropriate student-to-provider ratios and with adequate time for any screening or service provided. As our schools face ongoing

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staffing shortages and increased mental health concerns in the wake of the Covid-19 pandemic, it more important than ever that we increase the pipeline of qualified behavioral health professionals and approach additional mandates with caution.

We therefore must ensure that annual behavioral health screenings would be implemented mindfully as to not result in unintended negative consequences, including stigma and stereotypes about students' health, capabilities, and future outcomes.^{1 2} The screening assessment must be rigorously reviewed for bias to prevent misdiagnosis of students of color.^{3 4 5} It is crucial that all service providers have manageable caseloads and the resources to equip families, staff, and students with training around the meaning of and appropriate care for any diagnosis given, and that schools provide educators with the tools to meaningfully support students' behavioral health on an ongoing basis.

Students will benefit most when schools are provided with adequate staffing, appropriate screening tools that account for cultural and social context, and thorough training on addressing behavioral health needs.

¹ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2904965/

² https://journals.lww.com/co-

psychiatry/Abstract/2020/11000/The_role_of_stigma_in_children_and_adolescents.10.aspx

³ https://link.springer.com/article/10.1007/s40596-019-01127-6

⁴ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4916917/

⁵ https://tpcjournal.nbcc.org/the-process-and-implications-of-diagnosing-oppositional-defiant-disorder-in-african-american-males/