

ASSEMBLY COMMITTEE SUBSTITUTE FOR
ASSEMBLY, No. 970

STATE OF NEW JERSEY

Sponsored by Assemblyman CONAWAY and Assemblywomen LAMPITT and
MURPHY

AN ACT concerning student mental health and supplementing chapter
40 of Title 18A of the New Jersey Statutes.

*BE IT ENACTED by the Senate and General Assembly of the State
of New Jersey:*

1. The Legislature finds and declares that:

a. Depression is the most common mental health disorder among American teens and adults, with over 2.8 million young people between the ages of 12 and 17 experiencing at least one major depressive episode each year, approximately 10 to 15 percent of teenagers exhibiting at least one symptom of depression at any time, and roughly five percent of teenagers suffering from major depression at any time. Teenage depression is two to three times more common in females than in males.

b. Various biological, psychological, and environmental risk factors may contribute to teenage depression, which can lead to substance and alcohol abuse, social isolation, poor academic and workplace performance, unnecessary risk taking, early pregnancy, and suicide, which is the third leading cause of death among teenagers. Approximately 20 percent of teens with depression seriously consider suicide and one in 12 attempt suicide. Untreated teenage depression can also result in adverse consequences throughout adulthood.

c. Most teens who experience depression suffer from more than one episode. It is estimated that, although teenage depression is highly treatable through combinations of therapy, individual and group counseling, and certain medications, fewer than one-third of teenagers experiencing depression seek help or treatment.

d. The proper detection and diagnosis of depression is a key element in reducing the risk of teenage suicide and improving physical and mental health outcomes for young people. It is therefore fitting and appropriate to establish school-based depression

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screenings to help identify the symptoms of depression and facilitate access to appropriate treatment.

2. a. A board of education shall ensure that each student in grades seven through 12 annually receives a health screening for depression. The screening shall be proctored and conducted electronically via a computer and shall utilize a screening tool that has been validated to screen depression in adolescents, as determined by the Commissioners of Education and Children and Families. The Commissioner of Children and Families shall select one electronic screening tool to be utilized by all school districts. The screenings shall be conducted in a manner that accommodates students with developmental disabilities, intellectual disabilities, or low reading proficiency, and that ensures the privacy of the student during the screening process and the confidentiality of the results consistent with State and federal laws applicable to the confidentiality of student records. The Department of Education and the Department of Children and Families shall jointly establish standards on the procedures to be implemented to conduct the screenings for depression and may provide for other screening tools, including, but not limited to, screening tools for anxiety, substance use disorder, and suicidal ideation and behavior, as determined by the Commissioners of Education and Children and Families. The Commissioners of Education and Children and Families shall make recommendations for conducting screenings in a manner that accommodates students with developmental disabilities, intellectual disabilities, or low reading proficiency.

b. A superintendent, or the superintendent's designee, shall notify the parent or guardian of a student whose screening for depression detects an abnormality and advise the parent or guardian to seek the care of a health care professional in order to obtain further evaluation and diagnosis.

c. As determined by the Department of Education and the Department of Children and Families, boards of education shall forward data collected from screenings administered pursuant to this section to the Department of Education and the Department of Children and Families, provided that any data forwarded shall be aggregated and shall not contain any identifying or confidential information with regard to any individual. Data collected by the departments pursuant to this subsection shall be used by the departments to identify trends concerning teenage depression and to develop school and community based initiatives to address teenage depression. The Department of Education and the Department of Children and Families shall annually publish on their Internet websites findings and recommendations that are based on collected data as to additional resources that may be necessary to screen adolescents for depression and further evaluate adolescents who have exhibited abnormalities in depression screenings.

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d. A school district shall obtain written consent from a student's parent or guardian, upon enrollment or at the beginning of each school year, prior to screening the student for depression pursuant to this section.

3. The State Board of Education, in consultation with the Commissioner of Children and Families, shall promulgate regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), necessary to effectuate the provisions of this act.

4. This act shall take effect in the first full school year following the date of enactment.

Requires public schools to administer written screenings for depression for students in certain grades.

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