



ALPHA 2021 Resolution 2021-04

Support for Mandatory Mental and Emotional Health Education in Public Schools in Alaska

WHEREAS, knowing that mental health education will include age-appropriate instructional practices aimed at reducing stigma and teaching students how to maintain mental wellness, understand various mental health disorders, recognize early symptoms in themselves and others, and encourage to seek help before a crisis develops (Hood, 2019).

WHEREAS, aware that the Child Mind Institute states that 50 percent of all mental illnesses begin before age 14 and 75% occur by age 24 making it imperative that schools are prepared to provide a learning environment that supports health and development instead of helping to contribute to the oncoming mental health crisis (Walker, 2018).

WHEREAS, knowing that research has indicated that many young people worldwide are not well-informed about mental health and schools have great potential in the promotion and prevention practice because of the amount of time young people spend in the environment (O'Reilly et. al., 2018).

WHEREAS, believing that New York and Virginia are the only states that have required schools to add mental health education in their curriculums and Alaska does not currently have a state-wide standard for mental health education in public schools (Ross, 2018).

WHEREAS, according to the 2019 Alaska High School Youth Risk Behavior Survey, 38.1% of the students reported feeling sad or hopeless (Alaska Department of Health and Social Services).

WHEREAS, knowing that in Alaska, only 37.1% of all adults with any mental illness from 2011 to 2015 received mental health services with 62.9% who did not receive proper treatment. In addition, an annual average of about 3,000 adolescents aged 12–17 with past year major depressive episodes from 2011 to 2015 did not receive treatment for their depression (Substance Abuse and Mental Health Services Administration, 2017).

WHEREAS, in 2018 suicide was the first leading cause of death among 10-24 year olds in Alaska (Centers for Disease Control and Prevention, 2020)

WHEREAS, knowing that in 2019, 25.3% of high school students in Alaska reported that they seriously considered attempting suicide in the past year (Alaska Department of Health and Social

Services).

WHEREAS, in a study conducted, teachers reported numerous changes in student behaviors post-curricular implementation of mental health; the curriculum elicited high student participation, improved student willingness to speak about mental health, and more openness in sharing first/second-hand experiences (Yang et. al., 2018).

WHEREAS, believing that among young adults aged 18–25 in Alaska, the annual average percentage with a serious mental illness (SMI) increased between 2008–2012 and 2013–2017; during 2013–2017, the annual average was 7.5% (or 6,000) which is higher than the national average (5.5%) (Substance Abuse and Mental Health Services Administration, 2019).

WHEREAS, recalling that the Child Mind Institute reveals that more than 90% of parents think mental health should be taught in schools (Blaeser, 2018).

WHEREAS, believing that 1 in 5 youth have a mental health condition and require professional help, but fewer than half receive any mental health services (National Alliance on Mental Health, 2020).

WHEREAS, knowing that early mental health awareness and treatment can help keep youth in school and on track to achieving their life goals (National Alliance on Mental Health, 2020).

WHEREAS, childhood trauma remains a relevant issue in Alaska and in a 2013 Behavioral Risk Factor Surveillance System, Alaska has the highest percentage of reports with an Adverse Childhood Experience (ACE) of 5+ compared to the other states involved (Arkansas, Louisiana, New Mexico, Tennessee, and Washington) (Sidmore, 2013).

WHEREAS, considering that there are striking correlations between childhood trauma and a wide range of long-term health and economic outcomes as studies found that the higher the ACEs scores are, the higher the incidence of disease, risky behaviors, and negative social outcomes (State of Alaska Department of Health and Social Services ABADA/AMHB, 2015).

WHEREAS, believing that young people must be able to gain access to high-quality mental and emotional health education that is evidence-based and medically supported without being shamed and judged.

THEREFORE BE IT RESOLVED that the Alaska Public Health Association:

- Supports the State of Alaska in adopting health education standards for mental and emotional health education that align with national health education standards (Centers

for Disease Control and Prevention, 2004) and requiring public schools to implement mental health education as part of a comprehensive health education curriculum in grades K-12. (Centers for Disease Control and Prevention, 2012)

- Encourages that mental health curriculum content align with student outcomes identified by the Centers of Disease Control and Prevention, Health Education Analysis Tool: 1) Express feelings in a healthy way. 2) Engage in activities that are mentally and emotionally healthy. 3) Prevent and manage interpersonal conflict in healthy ways. 4) Prevent and manage emotional stress and anxiety in healthy ways. 5) Use self-control and impulse-control strategies to promote health. 6) Get help for troublesome thoughts, feelings, or actions for oneself and others. 7) Show tolerance and acceptance of differences in others. And 8) Establish and maintain healthy relationships (Centers for Disease Control and Prevention, 2012).
- Advocates for funding in order to support teachers with training, curricula, and materials in order to effectively instruct the importance of mental health and its various aspects to students.
- Encourages connections with various mental health programs and organizations in the state in order to provide supplemental materials and support to schools in order to improve instruction.
- Supports legislation that requires mental health education to be taught to students K-12 in public schools while ensuring that the content being presented is age and developmentally appropriate, research-based and theory driven, medically accurate, and consistent with the characteristics of an effective health education curriculum (Centers for Disease Control and Prevention, 2019).

Be it further resolved that ALPHA supports:

- Training for school districts on Trauma-informed Schools
- School-based or school-linked mental health services for students
- Positive school climate and social and emotional learning
- School-based suicide prevention programs
- The hiring of more school mental health counselors

BE IT FURTHER RESOLVED that the Alaska Public Health Association stands by this position to support mandatory mental health education and seeks for opportunities to let it be discussed and considered until abolished or modified by a subsequent resolution.

FISCAL AND PUBLIC HEALTH IMPACT STATEMENT:

It will take minor costs to fulfill the positive, life-changing aims of this resolution that encourage young people to advocate for their well-being and goals in life. Sending this

resolution to key political leaders, the State Departments of Health and Education, the State Board of Education, the Association of Alaska School Boards, and ALPHA's federal, state, tribal, and local partners will tremendously help in requiring mental health education as part of the curriculum in public schools in Alaska.

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