From: Amy Kennedy

Sent: Friday, March 28, 2025 9:13 AM

To: House Education

Subject: HB105

My name is Amy Kennedy and I am an Alaskan living in Juneau, Alaska. My family members have struggled with mental health for most of their lives, to include my mother who suffers from bipolar disorder, my father and brothers who suffer from medication and treatment resistant depression, and I have had struggles throughout my life with depression and anxiety. I had to sever my relationship with my mother to keep myself safe because she is not getting the therapy she needs to live successfully due to the lack of resources and the economic hardship her diagnosis has placed on obtaining services, it is painful to not have a mother in your life to love you, care for you, and be there as a mother should, and over the years I have identified the lack of appropriation toward mental health as a direct contributor to this situation.

In 2015 my oldest brother, James, committed suicide by placing a gun to his temple and pulling the trigger; I was the one who found him and had to take care of cleaning the space where he had done it, cleaning out his apartment, transporting his body, and arranging for him to be laid to rest - my father had a complete breakdown. My younger brother has had to be institutionalized three times since the age of 22, I have intermittently helped raise my nieces over the past 10 years, and have power of attorney over him to help keep him safe - he is now 36 and doing well, but it is always going to be day-by-day for him. In 2013 I became engaged to a man named Pete, nicknamed "Sweet Pete". He had suffered from depression and PTSD after losing a close friend very violently and suddenly, and committed suicide after we hung up from a loving, forward-planning, good phone call just 2 months after I buried my oldest brother.

Last year I received the call that no parent wants to receive, and given my familiarity with mental health challenges I did not ever expect to find myself in this space - I received a call from the school principal telling me that my 14-year-old son had been seen in the boys bathroom taking an unknown quantity of an unknown substance of pills. A student had reported it and they were able to get to him quickly, where he was rushed to the hospital.

I am writing to you today regarding HB105, which enhances health education in Alaska, providing students with essential mental health knowledge and resources for a healthier future. These services are vital to the youth and future of Alaska given that Alaska has the highest substance (drug and alcohol) abuse rates and physical/person-to-person (assault/rape) crime rates in the country in addition to a homeless problem that has exploded out of control. These issues that Alaska is struggling to get a grasp on are all related to the withholding of mental health education from public schools at every level, and the education starts with children in primary school. The latest research [from the National Education Association] shows that many students are still living in a state of mental health crisis and this data isn't at all surprising to educators and parents. The kids are not alright. The pandemic, coupled with decades of inaction by school boards and state legislators, has only made things worse.

In an 2024 poll, nearly three-quarters of U.S. parents said their child would benefit from mental health counseling—up from 68 percent in 2021. Additionally, about a third said their child has recently shown symptoms of mental health issues, including anxiety (19 percent) and depression (13

percent). Among parents of students with disabilities—including learning, developmental, and physical challenges—almost a third said their child has anxiety, and rates of depression are higher as well. In 2023, 15 percent of teens suffered at least one major depressive episode—that's an additional 306,000 teens over the previous 12 months, according to the 2022 data from Mental Health America. On top of that, nearly two-thirds of teens with major depression say they haven't gotten any help. Maybe the most alarming figure in recent mental health data is this: Nearly half of young LGBTQ+ people have considered ending their lives in the past 12 months (2024), according to a survey of 234,000 young people by the Trevor Project. Among those young people with suicidal ideas, more than half are transgender and nonbinary youth and nearly half are Black. This data is directly representative of the current crisis Alaskans and their families are facing, and within a state that is currently under-resourced and under-funded to address the crisis.

We as parents, community members, professionals, educators, and humans are now <u>demanding</u> that the state of Alaska address this crisis with our youth and secure a sustainable future for Alaska. This includes using local and state tax revenues to hire mental wellness coaches throughout each school district and using emergency relief funds to hire additional interventionists to serve across the state, in addition to funding community programs that support mental wellness for youth (up to 21). My son is now 15-years-old and he is the very best version of himself, confident, funny, caring, and proud of himself, because he was able to finally get the help and attention he needed to diagnose his mental health condition so that we could find a path to wellness. My son stayed at the Aurora House (now gone) to unpack a lot from my divorce, some bullying he was experiencing, and normal adolescent worries with a neutral third-person who helped him understand his emotions, let him know that he is supported by the community, and help us by-pass the 2-year wait list we were on at that time for a neuropsychological examination (required by most health insurance carriers and state programs for diagnosis of mental health disorders). I worry for Alaskans though, our children, teens, and young adults should not be reaching a stage of crisis and/or self-harm before help is offered or made available.

Studies conducted by the Harvard School of Psychology, the American Psychological Association, NAMI on the national level shows that early intervention mental health education improved student well-being, resulted in better academic performance, and reduced stigma surrounding mental health issues, ultimately promoting a healthier and more successful future through avoiding use of substances to cope with problems, using emotional regulation skills to keep themselves and others safe, and turning to mental health intervention modalities such as therapy, counseling, or group meetings. These skills have been proven to lay foundations for skills and behaviors that last a lifetime, reduce crime and contributors to homelessness, and benefits communities as a whole.

Early Intervention and Prevention:

Mental health problems often emerge during childhood, so early intervention and education can help prevent or mitigate these challenges.

Improved Academic Performance:

A calm and centered mind can focus better, leading to improved concentration and academic performance.

Enhanced Social-Emotional Skills:

Mental health education can equip students with vital coping skills, foster emotional intelligence, and support their overall well-being.

Reduced Stigma:

By normalizing conversations around mental health, education can help reduce stigma and encourage open dialogue among students, teachers, and parents.

Increased Self-Awareness:

Mental health education can help students understand their emotions, thoughts, and behaviors, which is essential for recognizing and managing mental health needs.

Support for Teachers and Educators:

Mental health education can also empower teachers and educators to better support students' mental health needs, as they are often the first point of contact for students struggling with mental health issues.

Long-Term Improvements:

Implementing mental health interventions in a school setting can lead to long-term improvements in reducing anxiety and behavioral problems, and increases in positive attitudes, prosocial behavior, and academic outcomes.

Early Identification:

Educational environments often serve as primary sites for early identification of mental health issues, enabling timely intervention.

Improved Mental Health Outcomes:

Research suggests that higher educational attainment often correlates with improved mental health outcomes.

Reduced Barriers to Help-Seeking:

School-based mental health services can reduce barriers to youth and families getting needed treatment and supports, especially for communities of color and other underserved communities.

The bottom line on student learning and guiding the trajectory of the youth of Alaska today is this: **You can't teach if you're not addressing mental health.**

I thank you for your consideration as you prepare to vote on HB105 and hope that you make the right choice to vote in favor of Alaska's youth and future. I am available for questions or further comments if requested, please use the contact information below. Have a wonderful day.

Best Regards,

Amy Kennedy

Court Visitor, Guardian ad Litem, Paralegal, Investigator
Alaska | Washington | Oregon



From: Mary Denoncour

Sent: Wednesday, March 26, 2025 8:13 AM

To: House Education

Subject: HB105

Please support HB105 to protect our youth, Alaska has a high rate of self harm among youth and we have a responsibility to do something pro-active.

thank you

Mary Denoncour

From: AOLMail Support < judithinalaska@aol.com>

Sent: Thursday, March 27, 2025 1:34 PM

To: House Education

Subject: HB 105

This bill is essential. Please pass it.

From: Bill Herman

Sent: Thursday, March 27, 2025 10:51 AM

To: House Education

Subject: I support Mental Health in schools (HB105)

I support HB105. Here is just one of the reasons:

ACES: Public schools are one of the few public interfaces with families, some of them very needy. Anyone that knows anything about <u>Adverse Childhood Experiences (ACES)</u> knows that early recognition and and acknowledgement of ACES by mental health professionals in schools is very helpful. They can intervene early in the life of our youth can prevent future poor physical and mental health outcomes throughout their adult life. These are extremely costly in our society: medical system, criminal justice, corrections, spreading intergenerational trauma, etc.

Early intervention saves us all MONEY.

Bill Herman

From: John Meyn

Sent: Wednesday, March 26, 2025 9:03 PM

To: House Education Subject: Mental health

I firmly support mental health education. I had mental health challenges when I was in high school and that was a long time ago. I'm 78 now and awareness that one needs mental health is essential to getting better. I was helped because I came from a very rich environment in a strong family, but that's not the case with everyone please support this bill. It'll help those who need help and it'll help everyone because those that are helped will be stronger for the help they get. Thank you for your support house Bill 105.

Sent from my iPhone