Assembly Bill No. 624

Passed the Assembly  September 5, 2019

Chief Clerk of the Assembly

Passed the Senate  September 3, 2019

Secretary of the Senate

This bill was received by the Governor this _____ day of _____________, 2019, at _____ o’clock ____м.

Private Secretary of the Governor
CHAPTER

An act to amend the heading of Article 2.5 (commencing with Section 215) of Chapter 2 of Part 1 of Division 1 of Title 1 of, and to add Sections 216.5 and 217 to, the Education Code, relating to pupil and student health.

LEGISLATIVE COUNSEL'S DIGEST

AB 624, Gabriel. Pupil and student health: identification cards: sexual assault hotline and reproductive health care telephone numbers.

Existing law requires public and private postsecondary educational institutions and private vocational educational institutions to each adopt, and implement at each of their respective campuses or other facilities, a written procedure or protocols to ensure, to the fullest extent possible, that students, faculty, and staff who are victims of sexual assault receive treatment and information, as provided. Existing law requires the governing board of each community college district, the Trustees of the California State University, the Regents of the University of California, and the governing boards of independent postsecondary institutions, in order to receive state funds for student financial assistance, to adopt a policy concerning sexual assault, domestic violence, dating violence, and stalking involving a student both on and off campus.

Existing law requires a public school, including a charter school, or a private school, that serves pupils in any of grades 7 to 12, inclusive, and that issues pupil identification cards to have printed on either side of the pupil identification cards the telephone number for the National Suicide Prevention Lifeline, and authorizes those schools to have printed on either side of the pupil identification cards the Crisis Text Line and a local suicide prevention hotline telephone number. Existing law requires a public or private institution of higher education that issues student identification cards to have printed on either side of the student identification cards the telephone number for the National Suicide Prevention Lifeline, and authorizes the institution to have printed on either side of the student identification cards the Crisis Text Line, the
campus police or security telephone number, or the local nonemergency telephone number, as provided, and a local suicide prevention hotline telephone number.

This bill would require public schools, including charter schools, if they issue pupil identification cards, to have printed on either side of those identification cards the telephone numbers for the National Sexual Assault Hotline and a local resource that provides sexual and reproductive health care information that meets certain requirements. The bill would require a private school, if it issues pupil identification cards, to have printed on either side of those identification cards the telephone number for the National Sexual Assault Hotline. The bill would require public and private institutions of higher education, if they issue student identification cards, to have printed on either side of those identification cards the telephone number for a local sexual assault hotline or the National Sexual Assault Hotline. The bill would additionally require public and nonsectarian private institutions of higher education, if they issue student identification cards, to have printed on those identification cards the telephone number for a local resource that provides sexual and reproductive health care information that is medically accurate. The bill would make these provisions operative on July 1, 2020. The bill would authorize schools and institutions subject to these requirements that have a supply of unissued, noncompliant identification cards as of January 1, 2020, to issue the noncompliant identification cards until that supply is depleted.

The people of the State of California do enact as follows:

SECTION 1. The heading of Article 2.5 (commencing with Section 215) of Chapter 2 of Part 1 of Division 1 of Title 1 of the Education Code is amended to read:

Article 2.5. Pupil and Student Health Resources

SEC. 2. Section 216.5 is added to the Education Code, to read:

216.5. (a) The Legislature finds and declares all of the following:

(1) Sexual assault is a widespread public health epidemic.
An average of 237,868 people 12 years of age or older are raped or sexually assaulted every year in America, which amounts to about one person every two seconds.

In 2016 alone, Child Protective Services agencies substantiated, or found strong evidence to indicate that, 57,329 children were victims of sexual abuse.

One in four girls and one in seven boys will be sexually assaulted before 18 years of age.

The effects of child sexual abuse can be long-lasting and can affect the victim’s mental health.

Child sexual abuse victims are about four times more likely to develop symptoms of drug abuse, four times more likely to experience post-traumatic stress disorder as adults, and three times more likely to experience a major depressive episode as adults.

In 80 percent of the child sexual abuse cases substantiated, or for which strong evidence was found, by Child Protective Services, the perpetrator was a parent.

Additionally, sexual violence on college campuses is pervasive.

Nineteen percent of women report experiencing completed or attempted sexual assault since entering college.

Ninety-four percent of women who are raped experience symptoms of post-traumatic stress disorder during the two weeks following the rape, 30 percent of women report symptoms of post-traumatic stress disorder nine months after the rape, 33 percent of women who are raped contemplate suicide, and 13 percent of women who are raped attempt suicide.

Students are at an increased risk during the first few months of their first and second semesters in college, as more than 50 percent of college sexual assaults occur in August, September, October, or November.

Additionally, domestic violence is widespread and affects individuals in every community regardless of age, economic status, sexual orientation, gender, race, religion, or nationality.

One in three women and one in four men in the United States have experienced some form of physical violence by an intimate partner.

In California, 32.9 percent of women and 27.3 percent of men experience intimate partner physical violence, intimate partner sexual violence, or intimate partner stalking in their lifetimes.
(15) A forcible rape occurs every 56 minutes in California.
(16) Domestic violence homicides comprise 11.8 percent of all California homicides.
(17) Domestic violence affects teenagers as well as adults.
(18) Nearly one in 11 female, and approximately one in 15 male, high school pupils report having experienced physical dating violence in the last year.
(19) About one in 9 female, and one in 36 male, high school pupils report having experienced sexual dating violence in the last year.
(20) Twenty-six percent of women and 15 percent of men who were victims of contact sexual violence, physical violence, or stalking by an intimate partner in their lifetime first experienced these or other forms of violence by that partner before 18 years of age.
(21) Youth who are victims of teen dating violence are more likely to think about suicide, experience symptoms of depression and anxiety, engage in unhealthy behaviors, like using tobacco, drugs, and alcohol, and exhibit antisocial behaviors, like lying, theft, bullying, or hitting.
(22) Additionally, the state is seeing a rise in sexually transmitted infections (STIs), especially among young people 15 to 24 years of age.
(23) California’s teen birth rate remains higher than that of other industrialized countries, and over 80 percent of births to teens are unintended.
(24) In 2016, the rate of chlamydia in the United States reached its highest level since 1985.
(25) Rates of chlamydia were highest among women 20 to 24 years of age in 2016.
(26) Chlamydia, if untreated, can cause serious complications, such as pelvic inflammatory disease and infertility in women.
(27) This recent rise in STIs indicates that young people are not aware of how these diseases spread, how infection can be treated to avoid infecting others, or how infection can be avoided altogether.
(28) Comprehensive sexual health education has been shown to be effective in both delaying sexual activity and increasing condom and contraceptive use among youth who are already sexually active.
(29) Providing young people with effective access to information, treatment, and counseling related to their reproductive well-being can help prevent STIs and unplanned teen pregnancies.

(30) These statistics illustrate the severe public health effects associated with sexual assault, domestic violence, and lack of information about reproductive health.

(31) California has a compelling interest in providing effective education and in intervention programs that help schools reduce barriers to pupils’ and students’ ability to learn.

(32) Because sexual assault, domestic violence, and reproductive health problems have been shown to affect the ability of pupils and students to learn resulting in long standing negative repercussions, the state has a compelling interest in providing resources that can provide information and aid relating to these issues.

(33) California also has a legitimate and compelling interest in protecting the public health of the entire population.

(34) By providing resources directly to pupils and students through a medium that is easily and readily accessible, victims and potential victims can access information and help, without interference from their abuser, who may live in their home or monitor their internet or telephone activity.

(35) Additionally, a more directed delivery approach for this information is necessary to ensure that victims and potential victims actually receive and have access to these resources.

(36) Information provided through broader methods, such as through general public information campaigns, has proven ineffective in curbing these epidemics.

(37) Providing this information on pupil and student identification cards would ensure that pupils and students have hotline telephone numbers readily available that they can call in times of crisis.

(b) It is therefore the intent of the Legislature, in adding Section 217, to provide directed resources to pupils and students in a manner that ensures actual delivery and accessibility in order to protect the public health, promote public welfare, protect young people and vulnerable populations, and reduce barriers to educational efficacy.

SEC. 3. Section 217 is added to the Education Code, to read:
217. (a) Commencing July 1, 2020, a public school, including a charter school, that serves pupils in any of grades 7 to 12, inclusive, and that issues pupil identification cards shall have printed on either side of the pupil identification cards the following telephone numbers:

(1) The National Sexual Assault Hotline, 1-800-656-4673.

(2) The telephone number for a local resource that provides sexual and reproductive health care information that is comprehensive and medically accurate, as that term is defined in subdivision (f) of Section 51931, and that is consistent with the information about local resources required to be provided pursuant to the California Healthy Youth Act (Chapter 5.6 (commencing with Section 51930) of Part 28 of Division 4 of Title 2).

(b) Commencing July 1, 2020, a private school that serves pupils in any of grades 7 to 12, inclusive, and that issues pupil identification cards shall have printed on either side of the pupil identification cards the National Sexual Assault Hotline, 1-800-656-4673.

(c) Commencing July 1, 2020, a public or nonsectarian private institution of higher education that issues student identification cards shall have printed on either side of the student identification cards the following telephone numbers:

(1) Either of the following sexual assault hotlines:

   (A) A local sexual assault hotline that provides confidential support services for students who have experienced sexual violence, sexual assault, sexual harassment, or stalking and that is available 24 hours a day.

   (B) The National Sexual Assault Hotline, 1-800-656-4673.

(2) The telephone number for a local resource that provides sexual and reproductive health care information that is medically accurate, as that term is defined in subdivision (f) of Section 51931.

(d) Commencing July 1, 2020, a sectarian private institution of higher education that issues student identification cards shall have printed on either side of the student identification cards either of the following telephone numbers:

(1) A local sexual assault hotline that provides confidential support services for students who have experienced sexual violence, sexual assault, sexual harassment, or stalking and that is available 24 hours a day.

(2) The National Sexual Assault Hotline, 1-800-656-4673.
(e) Notwithstanding subdivisions (a) to (d), inclusive, if, as of January 1, 2020, a school subject to the requirements of subdivision (a) or (b), or a public or private institution of higher education subject to the requirements of subdivision (c) or (d), has a supply of unissued pupil or student identification cards that do not comply with the applicable requirements of subdivisions (a) to (d), inclusive, the school or the public or private institution of higher education may issue those pupil or student identification cards until that supply is depleted.

(f) Subdivisions (a) to (d), inclusive, shall apply for a pupil or student identification card issued for the first time to a pupil or student, and to a pupil or student identification card issued to replace a damaged or lost pupil or student identification card.
Approved ______________________, 2019

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Governor