**A** **CONCURRENT RESOLUTION**

TO EXPRESS SUPPORT FOR EVIDENCE‑BASED PROGRAMS THAT FACILITATE SOCIAL AND EMOTIONAL LEARNING AND THE PROFESSIONALS NECESSARY TO MEET THE PHYSICAL AND MENTAL HEALTH NEEDS OF ALL STUDENTS DURING AND BEYOND THE COVID‑19 PANDEMIC AS RECOMMENDED BY THE SOCIAL EMOTIONAL LEARNING ALLIANCE OF SOUTH CAROLINA.

Whereas, a positive school culture is important for students, teachers, and staff to feel safe, valued, included, and respected; and

Whereas, students typically face intense academic and social pressures including stress, anxiety, bullying, fear, and social isolation; and

Whereas, as the COVID‑19 pandemic continues, students face increasing trauma as the result of social distancing requirements and increasing social isolation, fear of illness, or experience of loss for themselves and peers, uncertainty of the future for themselves and schooling, and financial insecurity that results in hunger or stress at home; and

Whereas, when these concerns or childhood trauma are not addressed, the results can include anxiety, depression, social withdrawal, disruptive behavior, drug and alcohol abuse, and violence; and

Whereas; the National Association of School Psychologists (NASP) recommends a student‑to‑psychologist ratio of 500‑750:1, but in South Carolina the ratio is approximately 1,400:1, with no full‑time school psychologists in some districts; and

Whereas, the Social Emotional Learning Alliance of South Carolina supports social emotional learning as a tool for preventing negative behaviors such as aggression, delinquent acts, and disciplinary referrals; reducing reports of student depression, anxiety, stress, and social withdrawal; improving attitudes and behaviors and motivating students to learn and develop a deeper commitment to school and recommends embedding social emotional learning in academics in all public schools from kindergarten through twelfth grade; and

Whereas, social and emotional learning is defined as the process through which children and adults acquire and effectively apply the knowledge, attitudes, and skills associated with social and emotional competency, including the ability to identify, understand, and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions. Now, therefore:

Be it resolved by the House of Representatives, the Senate concurring:

That the members of the South Carolina General Assembly support:

(1) using social emotional learning (SEL) as a tool for preventing negative behaviors such as aggression, delinquent acts, and disciplinary referrals, thereby reducing reports of student depression, anxiety, stress, and social withdrawal and improving attitudes and behaviors and motivating students to learn and develop a deeper commitment to school, as advocated by the Social Emotional Learning Alliance of South Carolina (SEL4SC);

(2) embedding social emotional learning in academics in all public schools from kindergarten through twelfth grades. To accomplish this, the General Assembly supports a concerted effort at the state and local levels, as advocated by SEL4SC; and

(3) pursuing a concerted effort at the state and local level to:

(a) develop a shared understanding of social and emotional skills such as the CASEL model, which defines five skill domains of self‑awareness, self‑management, responsible decision making, relationship skills, and social awareness;

(b) define expectations for instruction of social and emotional skills, including how development of these skills may be supported by embedding SEL in both in‑person and virtual curriculum for all students K‑12;

(c) provide regular in‑person and virtual face‑to‑face development for teachers to ensure that programs and initiatives that support SEL can evolve, grow, and build capacity as needed;

(d) develop policies and procedures for screening, full assessment, or both, of social and emotional skill competence;

(e) provide guidance regarding implementation of evidence‑based interventions when concerns arise about the social and emotional skill development of students;

(f) implement the recommendations of the NASP Framework for Safe and Successful Schools;

(g) provide ongoing access to school‑based mental health professionals due to the continuing impact of the COVID‑19 pandemic and resulting economic downturn; and

(h) increase teacher access to employee assistance programs or free access to counseling and mental health resources both within and outside the school building.

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