

AN ACT concerning education.

WHEREAS, Research-based prevention and wellness promotion efforts that strengthen positive parenting practices and enhance a child's resilience in the face of adversity have been shown to have a significant impact on a child's mental health, physical health, and educational outcomes; and

WHEREAS, The Centers for Disease Control and Prevention define positive parenting skills as good communication, appropriate discipline, and responding to a child's physical and emotional needs; and

WHEREAS, Studies in the last decade have shown that well-designed programs created to promote healthy cognitive, emotional, and social development can improve the prospects and quality of life of many children; and

WHEREAS, Parenting programs have been shown to provide critical information on child development and safety, promote positive parenting behaviors, teach effective discipline strategies, alter adverse family patterns, and reduce levels of child abuse and neglect; and

WHEREAS, Positive parenting practices are directly linked to adaptive behaviors in children and can buffer adverse outcomes, even amongst at-risk families; and

WHEREAS, While positive parenting strategies can promote adjustment and achievement, child abuse and neglect can interrupt healthy development in children and can lead to maladaptive functioning; and

WHEREAS, In the first major study of child abuse and neglect in 20 years, researchers with the National Academy of Sciences reported that the damaging consequences of abuse can reshape a child's brain (resulting in consequences that last throughout his or her life), influence the child's amygdala (the part of the brain that regulates emotions, particularly fear and anxiety), and change how the functioning prefrontal cortex works (the part of the brain responsible for thinking, planning, reasoning, and decision-making), which can lead to behavioral and academic problems; and

WHEREAS, Research shows an association between child maltreatment and a broad range of social problems, including substance abuse, violence, criminal behavior, teenage pregnancy, anxiety, sexually transmitted diseases, smoking, obesity, and diabetes; and

WHEREAS, Child abuse and neglect is a serious health problem that costs the United States \$103 billion annually, which includes \$33 billion in direct costs for foster care

services, hospitalization, mental health treatment, and law enforcement and \$70 billion in indirect costs, including productivity, chronic health problems, and special education; and

WHEREAS, Nobel prize-winning economist James J. Heckman and others have shown that for every dollar devoted to the nurturing of young children, the need for greater government spending on remedial education, teenage pregnancy, and prison incarceration may be eliminated; and

WHEREAS, Researchers have found that, left untreated, the effects of child abuse and neglect can profoundly influence a victim's physical and mental health, emotions and impulses, achievements in school, and relationships formed as a child and as an adult; and

WHEREAS, The American Academy of Pediatrics' Psychological Maltreatment Clinical Report posits that emotional abuse is linked with mental illness, delinquency, aggression, school troubles, and lifelong relationship problems in children; these effects of ill-treatment on a child's brain and behavioral development are not static and can be reversed with quick intervention and positive changes in a child's environment; the negative changes present in a child's brain can be countered by positive brain changes that take place when

the abuse ends and when the child is given the support he or she requires; parenting education is an effective way to prevent abuse and mental illness before it starts; therefore

**Be it enacted by the People of the State of Illinois,  
represented in the General Assembly:**

Section 5. The School Code is amended by changing Section 27-23.1 as follows:

(105 ILCS 5/27-23.1) (from Ch. 122, par. 27-23.1)

Sec. 27-23.1. Parenting education.

(a) The State Board of Education must assist each school district that offers an evidence-based parenting education model. School districts may provide instruction in parenting education for grades 6 through 12 and include such instruction in the courses of study regularly taught therein. School districts may give regular school credit for satisfactory completion by the student of such courses.

As used in this subsection (a) ~~section~~, "parenting education" means and includes instruction in the following:

- (1) Child growth and development, including prenatal development.
- (2) Childbirth and child care.
- (3) Family structure, function and management.
- (4) Prenatal and postnatal care for mothers and

infants.

(5) Prevention of child abuse.

(6) The physical, mental, emotional, social, economic and psychological aspects of interpersonal and family relationships.

(7) Parenting skill development.

The State Board of Education shall assist those districts offering parenting education instruction, upon request, in developing instructional materials, training teachers, and establishing appropriate time allotments for each of the areas included in such instruction.

School districts may offer parenting education courses during that period of the day which is not part of the regular school day. Residents of the school district may enroll in such courses. The school board may establish fees and collect such charges as may be necessary for attendance at such courses in an amount not to exceed the per capita cost of the operation thereof, except that the board may waive all or part of such charges if it determines that the individual is indigent or that the educational needs of the individual requires his or her attendance at such courses.

(b) Beginning with the 2019-2020 school year, from appropriations made for the purposes of this Section, the State Board of Education shall implement and administer a 3-year pilot program supporting the health and wellness student-learning requirement by utilizing a unit of

instruction on parenting education in participating school districts that maintain grades 9 through 12, to be determined by the participating school districts. The program is encouraged to include, but is not be limited to, instruction on (i) family structure, function, and management, (ii) the prevention of child abuse, (iii) the physical, mental, emotional, social, economic, and psychological aspects of interpersonal and family relationships, and (iv) parenting education competency development that is aligned to the social and emotional learning standards of the student's grade level. Instruction under this subsection (b) may be included in the Comprehensive Health Education Program set forth under Section 3 of the Critical Health Problems and Comprehensive Health Education Act. The State Board of Education is authorized to make grants to school districts that apply to participate in the pilot program under this subsection (b). The State Board of Education shall by rule provide for the form of the application and criteria to be used and applied in selecting participating urban, suburban, and rural school districts. The provisions of this subsection (b), other than this sentence, are inoperative at the conclusion of the pilot program.

(Source: P.A. 84-534.)

Section 99. Effective date. This Act takes effect upon becoming law.