



COYAC
Colorado Youth Advisory Council

Memo

TO: Legislators and Staff
Hugh McKean and Senator Faith Winter COYAC Review Committee

FROM: Sarah E. Moss, MPA, Executive Director
Colorado Youth Advisory Council

DATE: July 17, 2026

SUBJECT: COYAC Policy Recommendations 2025-26

On behalf of the 2025-26 Colorado Youth Advisory Council (COYAC) teens (ages 14-19), I am pleased to submit this memo of student-created policy recommendations.



COYAC members pose outside the History Colorado Center at the August 2025 COYAC retreat

2025-26 COYAC members

Bold = executive committee

- Leandra L., Southern Ute Indian Tribe Representative
- **Saanvi Y.**, Senate District 2
- **Brandon M.**, Senate District 3
- **Amalia S.**, Senate District 5
- **Monique S.**, Senate District 6
- **Kelsea K.**, Senate District 7
- **Judah T.**, Senate District 8
- **Ayush V.**, Senate District 9
- **Helena L.**, Senate District 10
- Vivienne Moss D., Senate District 12
- **Sofia V.**, Senate District 13
- **Julia Y.**, Senate District 14
- Lauren D., Senate District 15
- **Sophie T.**, Senate District 16
- Tanisha A., Senate District 17
- Om V., Senate District 18
- Madhvi C., Senate District 19
- Johnson Z., Senate District 20
- **Aiyana U.**, Senate District 21
- Josephine N., Senate District 22
- Peter H., Senate District 23
- Andre M., Senate District 24
- **Siddarth V.**, Senate District 25
- Michael Z., Senate District 26
- Shreya S., Senate District 27
- **Fatima N.**, Senate District 28
- Meron A., Senate District 29
- Hema V., Senate District 30
- **Ailee D.**, Senate District 31
- Hannah P., Senate District 32
- **Ainslie M.**, Senate District 33
- Micah G., Senate District 34
- Anabelle P., Senate District 35
- Nicholas I., At-Large
- **Katharine G.**, At-Large
- Parker A., At-Large

Suicide Prevention Commission Representative

- Ayush V., Senate District 9

COYAC 2025-26 staff

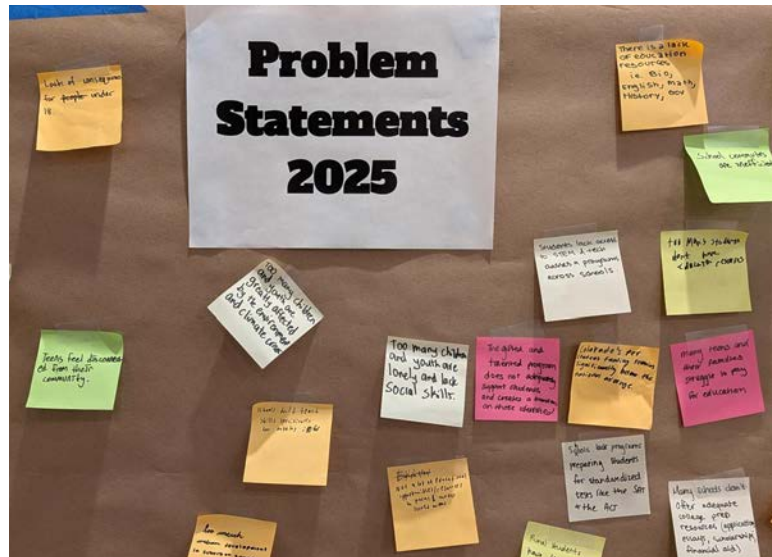
- Executive Director: Sarah E. Moss, MPA
- 2026 Summer Assistant: Katharine G.

COYAC 2025-26 Alumni Mentors

- Mason Evans
- Aidan Magruder
- Suzanna Steele
- Brenda Morrison

At the August 2025 retreat, members brought dozens of one-sentence problem statements to discuss. Members then divided themselves into policy committees to conduct research and outreach.

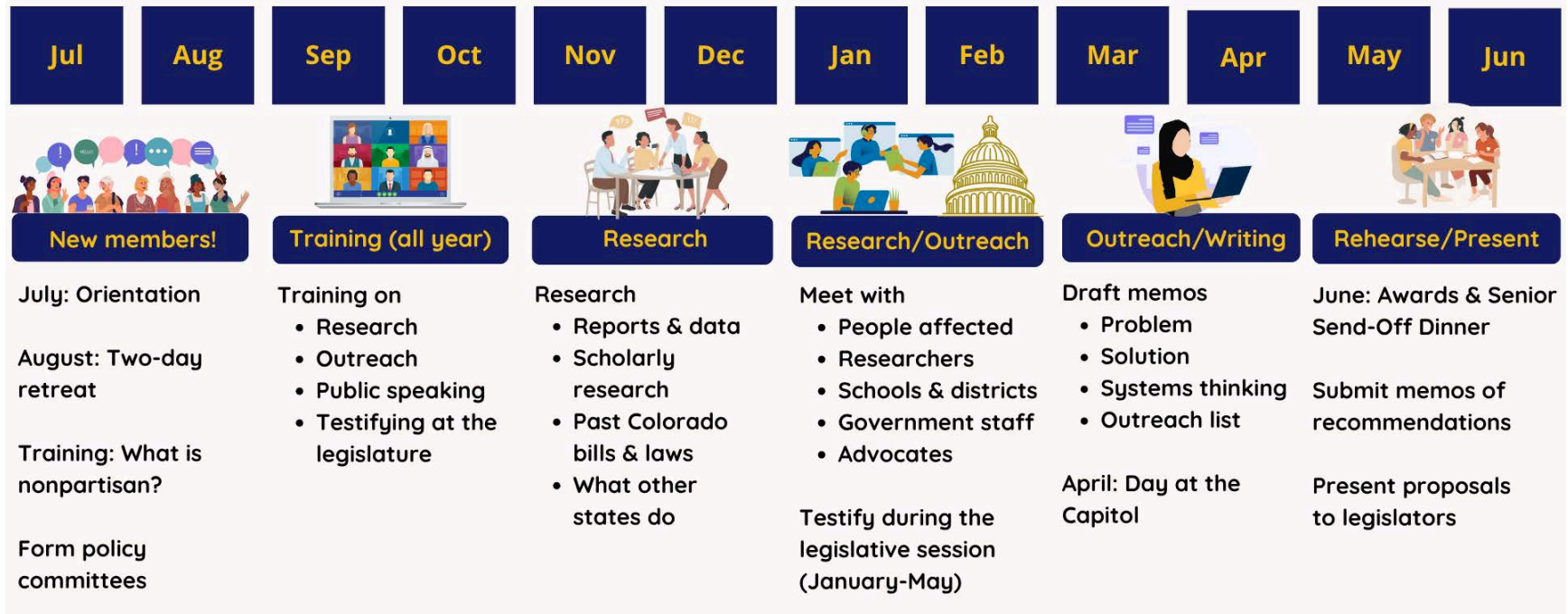
- Research and address policy areas affecting youth
- Serve as small group leaders to welcome new members
- Lead COYAC as an executive committee
- Design a yearbook
- Review anonymized applications from prospective members
- Serve as youth representatives on the National Civic League's 2026 All-America City Award jury



- Training on government roles and structures, the policy process, and research methods
- Discussions about nonpartisanship and civility
- Timelines, work plans, and leadership coaching
- Templates and examples
- Recommendations for research sources and outreach across multiple viewpoints
- Public speaking training and rehearsals
- Planning and logistics for virtual meetings/training sessions and in-person meetings: fall retreat, spring day at the State Capitol, and summer awards/senior send-off dinner

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COYAC Timeline



Policy recommendations

Below are the COYAC members' 2025-26 policy proposals; they contain the teens' own viewpoints, research, outreach, and writing.

[Environmental Policy Committee](#)

- Climate Education Policy in K-12 Schools
- Residential Outdoor Water Use

[Healthcare Policy Committee](#)

- Healthcare Resource Lists for Students
- Telehealth Equipment in School-Based Health Centers
- Medical Provider Check-Ins

[Mental Health Policy Committee](#)

- Mental Health Resources for Students
- Peer Resource Navigator Program in Schools
- Mental Health Curriculum and Training for Schools

[Technology AI Policy Committee](#)

- AI in Education Task Force

[Technology Regulation Policy Committee](#)

- Social Media Access for Children
- Youth Choice in Personalized Recommendation Algorithms
- Media Literacy Framework for Schools

[COYAC Infrastructure Policy Committee](#)

- Make COYAC Permanent Infrastructure in the Legislature



Environmental Policy Committee

Problem 1: Colorado schools lack climate education and face many barriers to implementing it.

Colorado is teaching climate change in its schools but it faces several challenges. Most importantly, students don't receive direct benefits from many of the programs. [Senate Bill 24-014](#) introduced climate literacy at the state level but schools have struggled to implement. Additionally, the Colorado State Board of Education recently revoked some language that was introduced into the Colorado Academic Standards that seems to lessen how important the impact of fossil fuels on climate change are.

According to a 2024 study on pro-environmental behaviors and climate literacy, when students had to work on climate related projects, students “felt more connected and empathized with their surroundings and felt more responsible for sustainable behavior.”¹ With students feeling more connected to their natural surroundings they'll be more likely to be stewards of their environment.

According to the Colorado Alliance for Environmental Education, 92% of Coloradans spend time engaging in outdoor recreation.² To live in a state that intertwines so deeply with the environment requires environmental education. A study by Stanford University found that “Eighty-seven percent of the reviewed environmental education studies reported outcomes such as awareness, knowledge, intentions, or skills that may support personal environmental behavioral changes, such as buying local foods or increasing participants' efforts to save water or

¹ Srivastava, V. (2024). Study of climate literacy and pro-environmental behavior amongst students. *Citizenship, Social and Economics Education*, 23(1). <https://doi.org/10.1177/14788047241246806>

² Colorado Alliance for Environmental Education, CDPHE, & CDNR. (2021). *Colorado's Environmental Education Plan*. Colorado Alliance for Environmental Education. https://caee.org/sites/default/files/documents/CAEE_Education_Plan_NewCover.pdf

energy at home. Research shows that actions such as these may indicate the start of long-term personal pro-environmental behavior change.”³

Environmental education is directly correlated with increased environmental behaviors and increased awareness in students.⁴ In an era where the United Nations explains 7 of the 9 planetary boundaries have been crossed⁵, and UN scientists expect global temperatures to rise by 1.5 degrees celsius decades ahead of what they were originally predicted.⁶

Not only do those statistics demonstrate the absolute necessity of having youth who are engaged in protecting the environment, but it also brings up the idea of mental health. Youth are suffering mentally because of the dark future they see for the planet. The dire situation of the planet is so apparent that even kids as young as preschoolers can suffer from eco-anxiety, eco-grief, and eco-depression.⁷ Moreover, “A global survey published in *Lancet Planetary Health* in 2021 reported that among an international cohort of more than 10,000 people between the ages of 16 and 25, 60% described themselves as very worried about the climate and nearly half said the anxiety affects their daily functioning.”⁸

Kids in Colorado are not immune from these statistics; if anything the situation might be worse in Colorado than in other states. Kids have seen the devastating effects of a degrading environment from the Marshall Fire to extreme drought to flash flooding. All of this affects their wellbeing.

³ Ardin, N. M., Bowers, A. W., & Gaillard, E. (2020, January). Environmental education outcomes for conservation: A systematic review. *Biological Conservation*, 241. <https://doi.org/10.1016/j.biocon.2019.108224>

⁴ Wetering, J. V. D., Leijten, P., Spitzer, J., & Thanders, S. (2022, June). Does environmental education benefit environmental outcomes in children and adolescents? A meta-analysis. *Environmental Psychology*, 81. <https://doi.org/10.1016/j.jenvp.2022.101782>

⁵ Stockholm Resilience Center. (2025). *Seven of Nine Planetary Boundaries Now Reached*. Stockholm University. <https://www.stockholmresilience.org/news--events/general-news/2025-09-24-seven-of-nine-planetary-boundaries-now-breached.html>

⁶ United Nations. (2025, November 5). *The world is likely to exceed a key global warming target soon. Now what?* UNEP. Retrieved June 12, 2026, from <https://www.unep.org/news-and-stories/story/world-likely-exceed-key-global-warming-target-soon-now-what>

⁷ Kluger, J. (2025, April 29). *Climate Anxiety Is Taking Its Toll on Young People*. TIME. Retrieved June 12, 2026, from <https://time.com/7280989/climate-anxiety-mental-health-young-people/>

⁸ Schmidt, C. (2023, Spring). *Climate Anxiety*. Harvard Medicine. <https://magazine.hms.harvard.edu/articles/climate-anxiety>

Additionally, climate education prepares Colorado students for the workforce. A 2026 study by Harvard Business School found that “half of U.S. publicly traded firms in climate relevant industries (49.6%) said they were working on climate solutions” (up from 20% in 2005).⁹ LinkedIn reported that “Roughly half of jobs in the 2050 green economy will lack qualified candidates if we don’t focus on strategic, expansive upskilling.” As early as 2030, LinkedIn analysts predicted 1 in 5 green jobs will go unfilled due to employees lacking climate education and climate skills.¹⁰ For Colorado students to stand a chance in the job market against other students, and to have a better opportunity to get into emerging fields, climate education at an early age is mandatory.

While this might seem like an issue for higher education, all students need a climate background from business to medicine to understand the impact of climate change on their industry. The Bureau of Labor Statistics points out that in 2030 there will be 17,900 solar panel installation jobs in the US, a job that only requires a high school diploma not a bachelor’s or associate’s degree¹¹.

Climate education is necessary in our schools to prepare students for the workforce and to create students who are better stewards of the land, creating the change the planet desperately needs.

Solution 1: Colorado should implement a required climate education policy in all K-12 schools, in all districts, with the Colorado Department of Education creating guiding resources.

Colorado should mandate that each district has a policy on environmental education. To support districts, the Colorado Department of Education should create guidelines and curriculum for when schools have the ability to adopt it. The need for climate education is immense and

⁹ Milligan, S. (2026, February 5). *Harvard research: Half of U.S. public companies are now creating climate solutions*. Harvard Business School.

<https://www.hbs.edu/bigs/harvard-research-half-of-us-public-companies-creating-climate-solutions>

¹⁰ Earth Day. (2024, November 18). *How Many Jobs Are Being Created in the Green Economy? LinkedIn’s New Report Has The Answers*. Earth Day. Retrieved June 12, 2026, from <https://www.earthday.org/how-many-jobs-are-being-created-in-the-green-economy-linkedins-new-report-has-the-answers/>

¹¹ *Green growth: Employment projections in environmentally focused occupations*. (2022, April). US Bureau of Labor Statistics. Green growth: Employment projections in environmentally focused occupations

students want to see it. A Colorado Public Radio article from 2023 demonstrated that students want climate education and exposure to careers that exist in the environmental sphere beyond the basics of an environmental scientist and park ranger.¹²

While the above may seem to indicate the need for a climate related education graduation requirement, Colorado schools do not have the capacity to meet such a requirement. In speaking with administrators from Littleton Public Schools, Denver Public Schools, Cherry Creek School District, and more, it's clear that the districts are behind climate education, but not behind putting more work on teachers.

The solution is to create a policy similar to cell phones. [House Bill 25 -1135](#) mandated that schools have a policy when it comes to cell phones. Modeling from this bill's success, the solution is for all school districts to have a policy/plan when it comes to climate education. This could include:

- Adding classes to high schools such as Advanced Placement /College Prep Environmental Science
- Adding resources or guides so that students are able to complete the [Seal of Climate Literacy](#)
- Building sustainability initiatives such as carpool encouragement, waste reduction, or tree planting programs and allowing students to be part of the process
- Implementation of sustainability initiatives or the planning thereof that involves students in the process
- Sustainability initiatives such as gardens that involve students in the long term
- Annual climate days/Earth Day celebrations/lectures that involve students in protecting the planet.

The Colorado Department of Education would ideally with partnership of environmental organizations looking to hire climate literate workers create a resource bank for schools that have the capacity to teach climate education. This would include guidelines for how to incorporate the topic into classes outside of science, as well as training for teachers who may want to teach about climate science but don't have the formal training to do so.

Systems thinking

Unintended consequences that we've considered include:

¹² Brundin, J. (2023, November 7). *Colorado students say they want more solutions-oriented climate education now before it's too late*. Colorado Public Radio.
<https://www.cpr.org/2023/11/07/colorado-students-want-climate-solutions-education/>

- School districts feeling pressure in adding climate education to their curriculum put additional pressure on already struggling teachers.
- By creating another resource, it may be underutilized as previous resources have been and the overall climate awareness and literacy rates of graduating high school students does not increase.
- Climate literacy is only taught as a science class, rather than being taught intertwined with other classes such as government, business, English, etc.

Problem 2: Colorado residents are using too much water for landscaping.

Colorado residents use a significant amount of water for landscaping, placing significant strain on the state's limited water resources. According to Colorado State University, residential outdoor irrigation continues to consume roughly 40 to 50 percent of water municipalities' supplies.¹³ This usage goes toward maintaining non-native and high water demand grass lawns, which are not suited for Colorado's dry climate. According to Denver Water, an efficient landscape should use only about 12 gallons per square foot per year, yet many properties exceed this.¹⁴ As climate change intensifies, reducing outdoor water consumption is crucial to keep Colorado's water management sustainable in the long term.

Solution 2: Colorado should implement residential outdoor water usage limits.

Colorado should establish statewide residential outdoor water-use standards that limit excessive irrigation. These standards should focus on reducing waste rather than reasonable water use.

In 2022, the General Assembly passed House Bill 22-1151, which directed the Colorado Water Conservation Bill to create a Turf Replacement Program that provides financial incentives for replacing irrigated turf with low-water use landscaping.¹⁵ Building upon this bill, Colorado

¹³ Colorado State University Extension, *CMG GardenNotes #267: Watering Efficiently*, Colorado Master Gardener Program, accessed June 23, 2026, <https://cmg.extension.colostate.edu/Gardennotes/267.pdf>.

¹⁴ Denver Water, *How Much Water Does Your Landscape Really Need?*, accessed June 23, 2026, <https://www.denverwater.org/tap/how-much-water-does-your-landscape-really-need>.

¹⁵ Colorado General Assembly, "House Bill 22-1151: Turf Replacement Program," accessed June 23, 2026, <https://leg.colorado.gov/bills/hb22-1151>.

should require municipalities and water providers to establish outdoor water-use standards and conservation plans while expanding access to turf replacement incentives.

One approach to this is to require municipalities to have seasonal watering restrictions. Denver Water recommends watering lawns only two days per week during most of the summer and no more than three days per week, demonstrating that limiting irrigation is a practical and effective conservation strategy.¹⁶

Additionally, Colorado should encourage homeowners to replace high-water-use lawns with native plants.¹⁷ Reducing irrigated turf in response to drought conditions, and maximizing efficient water use are critical for limiting water use.

Systems thinking

Unintended consequences that we've considered include:

- Colorado's diverse climate, elevations, and water systems may conflict with a uniform outdoor water-use standard
- Small or rural water providers may struggle with offering turf replacement as it may cause a financial restraint

Outreach

Did not respond after email and phone outreach

** Responded but declined to discuss our proposal*

While researching and writing this proposal, we reached out to:

Government agencies

State

- Colorado Division of Water Resources #
- Colorado Department of Education: Shelbie Konkel #
- Colorado Department of Public Health and Environment: Lindsay Ellis, Legislative Liaison #

¹⁶ Denver Water, "Watering Your Lawn,"
<https://www.denverwater.org/residential/conservation-tip/watering-your-lawn>.

¹⁷ Colorado State University Extension, "Why Go Native?"
<https://extension.colostate.edu/gilpin/resource/why-go-native/>.

- Colorado Department of Public Health and Environment: Derrek Wilson, Legislative Policy Advisor

Local

- Campo School District RE-6 #
- Cherry Creek School District: Joe Glover, Head of High Schools
- Cherry Creek High School: Ryan Silva, Principal of Cherry Creek High School
- Denver Public Schools #
- Durango School District #
- Jefferson County Public Schools #
- Littleton Public Schools Board of Education: Cherie Garcia- Kuper, President
- Central Weld County Water District
- #North Weld County Water District
- Northern Water

Organizations that work in this policy area

- 350 Colorado: Micah Parkin, Executive Director
- Colorado Association of School Boards: Matt Cook, Director of Public Policy and Outreach #
- Colorado Education Association #
- Colorado Democracy Initiative: Natalie Montecino, Executive Director #
- Colorado Nature League: Jen Clanahan, Executive Director
- Classrooms for Climate Education #
- Good Trouble Colorado: Aisha O’Neil, Director
- Great Education Colorado #
- Mountain Mamas: Sarah Kuntzler, Colorado State Director

Other subject matter experts

- Kathy Gebhardt, Colorado Board of Education District 2 Representative; Education Law Professor at University of Denver and University of Colorado Denver #
- Tanya Heikkila, Professor of Public Policy and Co-Director for Policy and Democracy, at University of Colorado Denver
- Tonie Miyamoto, Director of Office of Sustainability at Colorado State University
- Matt Samuelson, Attorney, Western Environmental Law Partners; Director of Special Projects at the Donnell-Kay Foundation

Legislators

- Former Senator Ellen Roberts #
- Senator Lisa Cutter
- Senator Chris Kolker
- Senator Janet Marchman

- Senator Byron Pelton
- Representative Regina English
- Representative Meg Froelich
- Representative Lori Garcia Sander #
- Representative Eliza Hamrick
- Representative Dusty Johnson *
- Representative Manny Rutinel



Healthcare Policy Committee

Problem 1: Coloradans do not have equitable access to hygiene products across the state.

Background

- **Period poverty** – The inability to afford menstrual products, and the lack of education around menstrual health for women and girls.¹⁸
- **Healthcare programs** – An entity within the state supported with its general fund or federal dollars to provide health care services, research, education, or resources (examples include Medicare, TRICARE, workers’ compensation).¹⁹
- **Hygiene poverty** – Lack of ability to afford everyday hygiene products (diapers, wipes, toothbrushes, soaps, etc.).²⁰

Whether it be via toothpaste and soap or menstrual products, the maintenance of good hygiene is fundamental to daily life and well-being of a person. Basic essentials like the aforementioned allow individuals to thrive, live with confidence, and maintain wellness in society while simultaneously impacting whether or not people go to school and whether or not they can maintain a job.

With more significance than external appearance, access to hygiene products can be a preventative measure against more serious physical and mental health issues.

¹⁸ United Nations Women. (2025, July 28). *Period Poverty – why millions of girls and women cannot afford their periods*. UN Women.
<https://www.unwomen.org/en/articles/explainer/period-poverty-why-millions-of-girls-and-women-cannot-afford-their-periods>

¹⁹ Law Insider. (2025). *Health Care Program definition*. Law Insider.
<https://www.lawinsider.com/dictionary/health-care-program>

²⁰ The Hygiene Bank. (2024). *What is Hygiene Poverty?* The Hygiene Bank.
<https://thehygienebank.com/who-we-are/what-is-hygiene-poverty/>

The lack of equitable hygiene product distribution throughout Colorado’s communities reveals systemic struggles stemming from financial inequality, awareness of available programs, and how resources reach underprivileged communities. The ability to stay clean and healthy should never depend on where an individual lives or their income, and yet for countless Coloradans, it does.

In a 2024 survey of Coloradans, nearly half (46%) of those surveyed were found to have experienced hygiene poverty in the past year.²¹ More specifically, the 44% of Coloradans polled who struggle to afford soap don’t reap the benefits of handwashing—a simplistic and highly effective disease prevention measure. Handwashing reduces the proliferation of respiratory illness by about 21% and can prevent the spread of more serious diarrheal diseases by 40%.²² Hand sanitizer—which 32% of Coloradans struggle to afford—can also help stem the tide of infectious disease and foodborne illness. The lack of support for communities with higher rates of hygiene poverty puts individuals at a higher risk of infectious disease while suppressing school attendance and work efficiency in underprivileged areas.

In addition to these basic measures, for those not experiencing hygiene poverty, product availability helps suppress eventual healthcare costs and establish baseline health.

Unfortunately though, efforts by the state legislature to ensure access to hygiene products face serious barriers to implementation. A 2024 report by Justice Necessary discovered that almost 49% of respondents struggling with hygiene products were unaware of programs that could’ve helped them access products, emphasizing the significant communication gap between state policies and community outreach initiatives. Although Colorado has passed measures like [HB24-1164](#) Free Menstrual Products to Students, which requires public schools to provide free menstrual products in school restrooms by 2028, it’s not always enough to ensure the end of hygiene poverty for families as whole, and some districts struggle with maintaining consistent stocks.²³

One issue is that some state-level actions are dependent on city and county level governments for implementation, which results in inconsistent access across regions. For instance, the Essential Hygiene Products Sales Tax Exemption exists, but many districts haven’t adopted it, leaving

²¹ Justice Necessary. (2025). *2024 Study on Hygiene Poverty*. Justice Necessary. <https://justicenecessary.org/the-need/2024-study-on-hygiene-poverty/#hygiene-poverty>

²² U.S. Centers for Disease Control and Prevention. (2024, April 17). *Handwashing Facts*. CDC. <https://www.cdc.gov/clean-hands/data-research/facts-stats/index.html>

²³ Colorado General Assembly. (2024). *HB24-1164 Free Menstrual Products to Students*. Colorado General Assembly. <https://leg.colorado.gov/bills/hb24-1164>

some Coloradans still paying tax on basic essentials.²⁴ Without stronger mechanisms for communication, equitable distribution, and program implementation, even well-crafted laws struggle to create a measurable impact, leaving Coloradans in perpetual need.

Hygiene poverty in Colorado isn't just an individual matter, but a collective issue, which reveals the cracks in policy implementation, awareness, and access to hygiene products. By acknowledging these systemic barriers, we emphasize the urgent need to ensure that all individuals are able to obtain basic hygiene products for communal well-being.

Solution 1: Mandate that school websites include healthcare resource lists when published.

Understanding the breadth of healthcare resources available and having access to them may seem insignificant, but for many Coloradans that step would be instrumental in stemming the tide of health afflictions. Whether individuals are seeking hygiene assistance programs, mental health services, healthcare providers, food assistance, or emergency support, access to information determines whether services are utilized. If you don't live in a place where health information is widely available or if you face other obstacles to access, truly mitigating health risks can be near impossible.

To address this issue, the state can centralize communication systems and provide easily accessible information that is not dependent upon where you live but rather guaranteed based upon residency. Every person across the state, regardless of socioeconomic background or age, should be able to access comprehensive guides to available health resources.

Colorado should require every public school district to maintain a standardized healthcare resource portal on its website. The portal should provide students, families, and community members with easy access to local and statewide resources related to hygiene products, healthcare services, mental health support, food assistance, transportation assistance, housing resources, telehealth programs, and other health-related services. Because schools already serve as trusted community institutions and maintain regular communication with families, they are uniquely positioned to distribute this information equitably regardless of a student's geographic location or socioeconomic status.

²⁴ Colorado Department of Revenue. (n.d.). *Sales Tax Exemption On Essential Hygiene Products* | Department of Revenue - Taxation. Colorado Taxation Division.
<https://tax.colorado.gov/sales-tax-exemption-on-essential-hygiene-products>

Colorado can build upon several successful models that already exist throughout the state. For example, the Denver Health Resource Finder allows people to enter their ZIP code and locate nearby resources and other essential services.²⁵ Likewise, Find Your Pantry provides a location-based directory that helps residents identify nearby food pantries and community assistance programs, demonstrating how geographic search tools can efficiently connect individuals with available resources.²⁶ Other resources exist, like the Denver Public Library Community Assistance List. These go beyond just basic needs, and provide places for people to access programs including LGBTQIA+, pregnancy/birth control, assistance for sexual assault victims, etc.²⁷

Many of these resource lists are readily available in big cities like Denver, but smaller towns may not have these lists or resources accessible. Rather than creating an entirely new system, Colorado could integrate links to these existing services and incorporate such programs into an easily navigable centralized school resource page, reducing implementation costs while maximizing use of established programs.

Teens can be susceptible to the pressures of social stigma, which means that providing discrete access to resources could be helpful in circumventing stigma barriers. Lists being on school websites or intranets (such as Infinite Campus and Canvas) means students have access to resources without shame, which can help families to shape positive future health outcomes regardless of initial background.

Problem 2: Vulnerable rural youth populations in Colorado lack adequate access to healthcare services.

Definitions

- **Rural area** – Geographical area with a population of less than 200,000; an area outside of any urban setting.²⁸

²⁵ *Community resources for our patients*. Denver Health. (n.d.).
<https://www.denverhealth.org/patients-visitors/community-resources>

²⁶ *Find Your Pantry Hygiene Seal: Helping Neighbors Find Food and Hygiene—Together*. Find Your Pantry. (n.d.).
<https://findyourpantry.org/>

²⁷ *Community Assistance Resources*. Denver Public Library. (n.d.).
<https://www.denverlibrary.org/content/community-resources>

²⁸ Agency for Healthcare Research and Quality (US). (2021). *Access to healthcare and disparities in access*. In [www.ncbi.nlm.nih.gov](https://www.ncbi.nlm.nih.gov/books/NBK578537/). <https://www.ncbi.nlm.nih.gov/books/NBK578537/>

- **Healthcare access** – The ability to use personal health services to achieve the best health outcomes.²⁹
- **School-based health center (SBHC)** – Funded by the Colorado Department of Public Health and Environment (CDPHE), building which provides healthcare services to children attending the school/within the school district.³⁰
- **Telehealth services** – Programs which use electronic information and telecommunication technologies to support long-distance clinical health care, patient and professional health-related education, health administration, and public health.³¹
- **Health inequities** – Differences in the health of groups and communities occupying unequal positions in society that are unjust.³²

Access to healthcare is foundational to a child’s development, well-being, and long-term success. Healthcare services are not privileges but essential components that allow young people to grow safely, learn effectively, and enter adulthood with stability. Yet health inequities, such as long travel distances, economic hardships, and demanding work schedules, have prevented certain populations from accessing necessary health services. For Colorado youth, these disparities contribute to delayed care, preventable illnesses, and poorer long-term health outcomes, making intervention now critical.

In Colorado’s rural communities, nearly 72% of residents live with at least one or more chronic health conditions, compared to about 66% of urban residents. Moreover, the mortality rate from coronary heart disease is 14.4% higher in rural Colorado (100.9 per 100,000) than in urban areas (87.3 per 100,000).³³ Across Colorado, rural communities face healthcare inequities that heighten risk for chronic illness, limit preventative care options, and delay treatment plans. These barriers reflect structural issues of rural isolation, underfunded systems, and unequal distribution of state resources. Ensuring that a child’s ZIP code does not determine the quality of their health is not merely a policy preference, but a matter of equity and opportunity for Colorado’s communities.

²⁹ US Department of Transportation. (2020). *Rural Areas Defined*. Transportation.gov.
<https://www.transportation.gov/grants/rural-areas-defined>

³⁰ Department of Public Health & Environment. (n.d.). *What is a school-based health center?* Cdphe.colorado.gov.
<https://cdphe.colorado.gov/sbhc/what-school-based-health-center>

³¹ Health Resources & Services Administration. (2022, March). *What is telehealth?* Wwww.hrsa.gov.
<https://www.hrsa.gov/telehealth/what-is-telehealth>

³² Baciu, A., Negussie, Y., Geller, A., & Weinstein, J. N. (2017). *The State of Health Disparities in the United States*. NIH.gov; National Academies Press (US).
<https://www.ncbi.nlm.nih.gov/books/NBK425844/>

³³ Colorado Rural Health Center. (n.d.). *Health Disparities in Rural Colorado and the Promise of Programs Aimed at Reducing Readmissions*. Colorado Trust.
https://www.coloradotruth.org/wp-content/uploads/2021/10/access_to_trust_building_vf.pdf

Schools are the primary point of access for youth healthcare, in both rural and urban areas, especially for mental health services. According to the American Academy of Pediatrics, 75% of students seeking mental health care rely on school settings, emphasizing the importance of properly-funded school-based health centers (SBHCs) that supply kids with the services they need.³⁴ And while SBHCs are instrumental in the development of primary access points, they face serious barriers in effectiveness due to cost and geographical spread (see Figure 1 and Figure 2). In the figures, viewers can observe the discrepancy between demonstrated need for health services at school versus where services are supplied.

But as noted, the availability of in-person services is limited, especially as the amount of rural healthcare providers stays stagnant while community populations increase. In turning to telehealth services, it's important to emphasize that telehealth even struggles to reach rural areas, as internet connectivity remains a major barrier for rural youth. The Colorado Trust reports that only 27% of rural school districts have high-level internet connectivity, directly reducing telehealth use compared to their urban counterparts.³⁵ As a result, many students in rural communities cannot access online medical/therapy consultations, services that have become a standard in urban Colorado. Disparities of technological access exacerbate geographic isolation, forcing youth to travel long distances for basic appointments, taking up time in school and family resources.

The limits in rural healthcare access are only exacerbated by federal and state budget reductions, including cuts in Medicaid, which have increased economic pressure on rural households. Funding SBHCs at the state level becomes more difficult with less funds to go around, and once SBHCs become unavailable families in poverty are compelled to delay or skip care due to cost, transportation issues, or inability to miss work.³⁶ For uninsured children without access to SBHCs, the likelihood of receiving preventive care, mental health services, and chronic disease management plummets as budgets decrease.

³⁴ American Academy of Pediatrics. (n.d.). *School-Based Mental Health: Pediatric Mental Health minute series*. <https://www.aap.org/en/patient-care/mental-health-minute/school-based-mental-health/>

³⁵ Rocky Mountain Health Plans. (2024, July 1) *Improving rural health care access in Colorado*. RMHP. <https://www.rmhp.org/improving-rural-health-care-access-in-colorado/>

³⁶ McFatridge, K. (2025, September 24). *Fewer Colorado Kids had health insurance in 2024*. Colorado Association of Health Plans. <https://colohealthplans.org/fewer-colorado-kids-had-health-insurance-in-2024/>

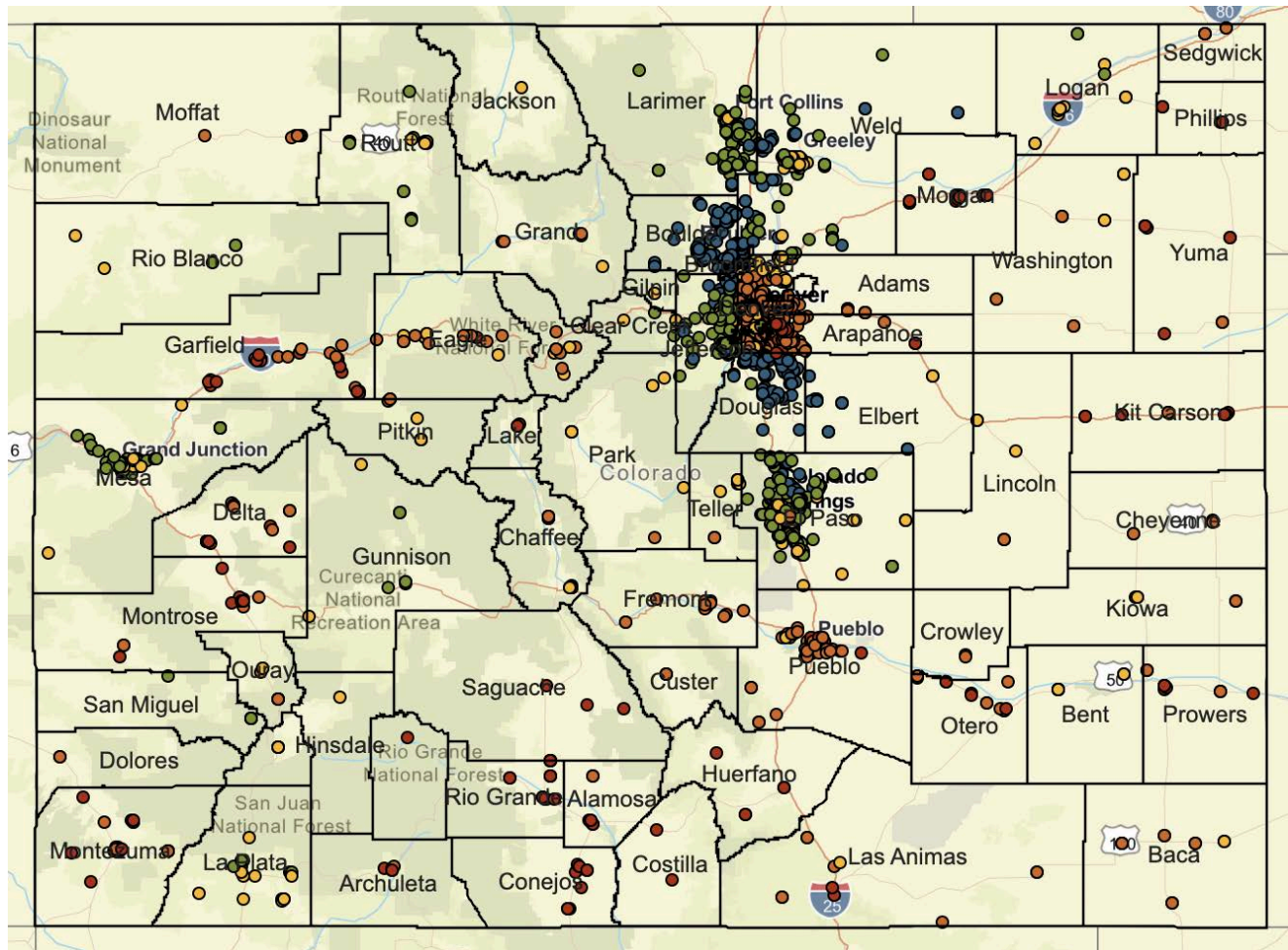


Figure 1: This figure illustrates the need for SBHCs by school. The schools with the most need are in red/orange/yellow, and schools with lower need are demonstrated in green and blue. The areas with the highest need for SBHCs, highlighted in darker orange and red, are concentrated in

rural areas like the San Luis Valley, the Eastern Plains, and parts of Southern Colorado.³⁷

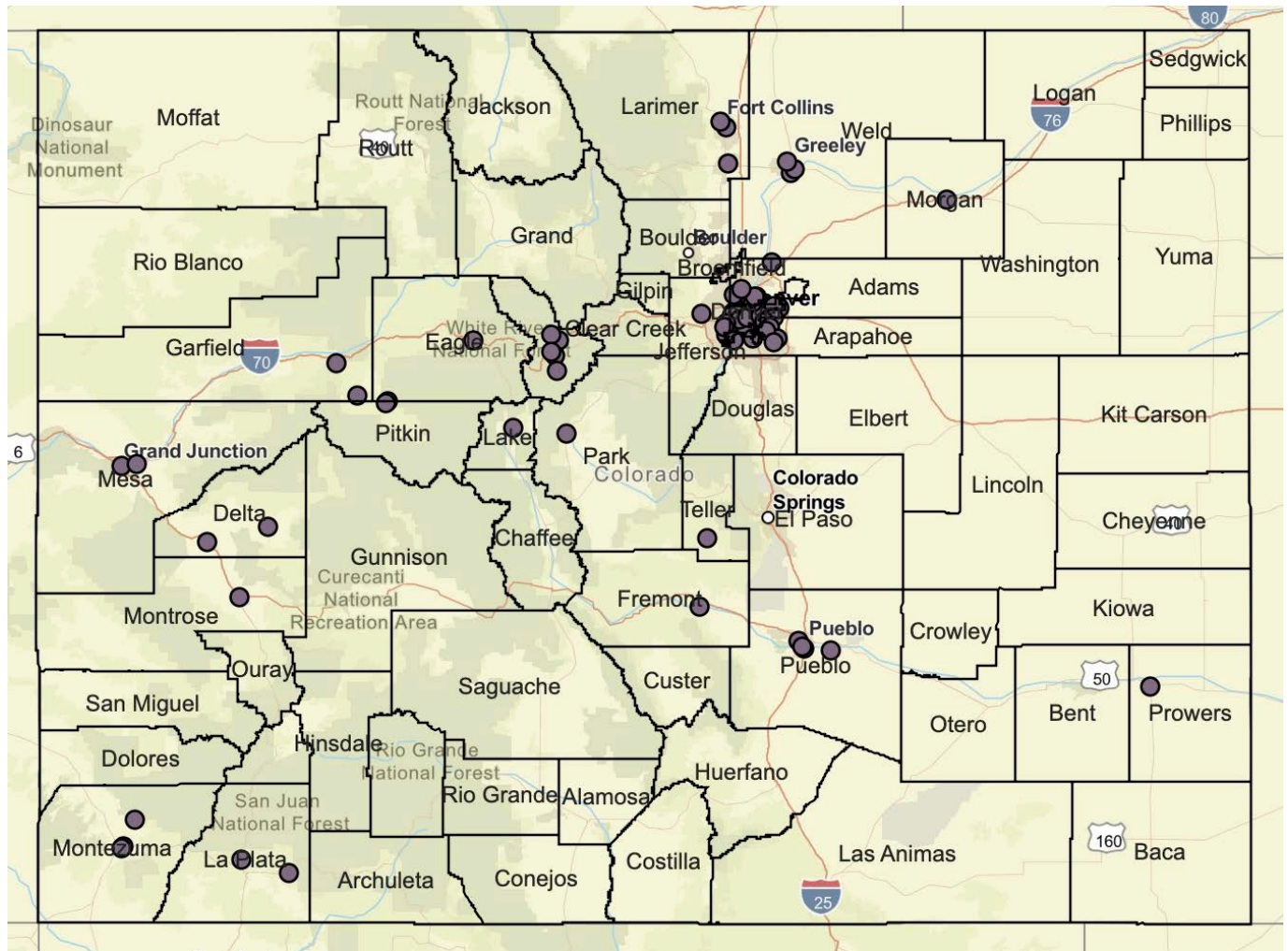


Figure 2: The figure above, in contrast with Figure 1, demonstrates the distribution of SBHCs across Colorado. Clearly prominent in urban areas, this distribution ignores the need demonstrated in Figure 1.³⁸

³⁷ Colorado Health Institute. (n.d.). *Identifying Opportunities for School-Based Health Care in Colorado*. <https://www.coloradohealthinstitute.org/research/school-based-health-care-opportunities>

³⁸ Colorado Health Institute. (n.d.). *Identifying Opportunities for School-Based Health Care in Colorado*. <https://www.coloradohealthinstitute.org/research/school-based-health-care-opportunities>

Map 1

Western Slope Struggled Again With Health Coverage

Topic:

Uninsured rate.

Population:

All Coloradans, by Health Statistics Region.

Year: 2023.

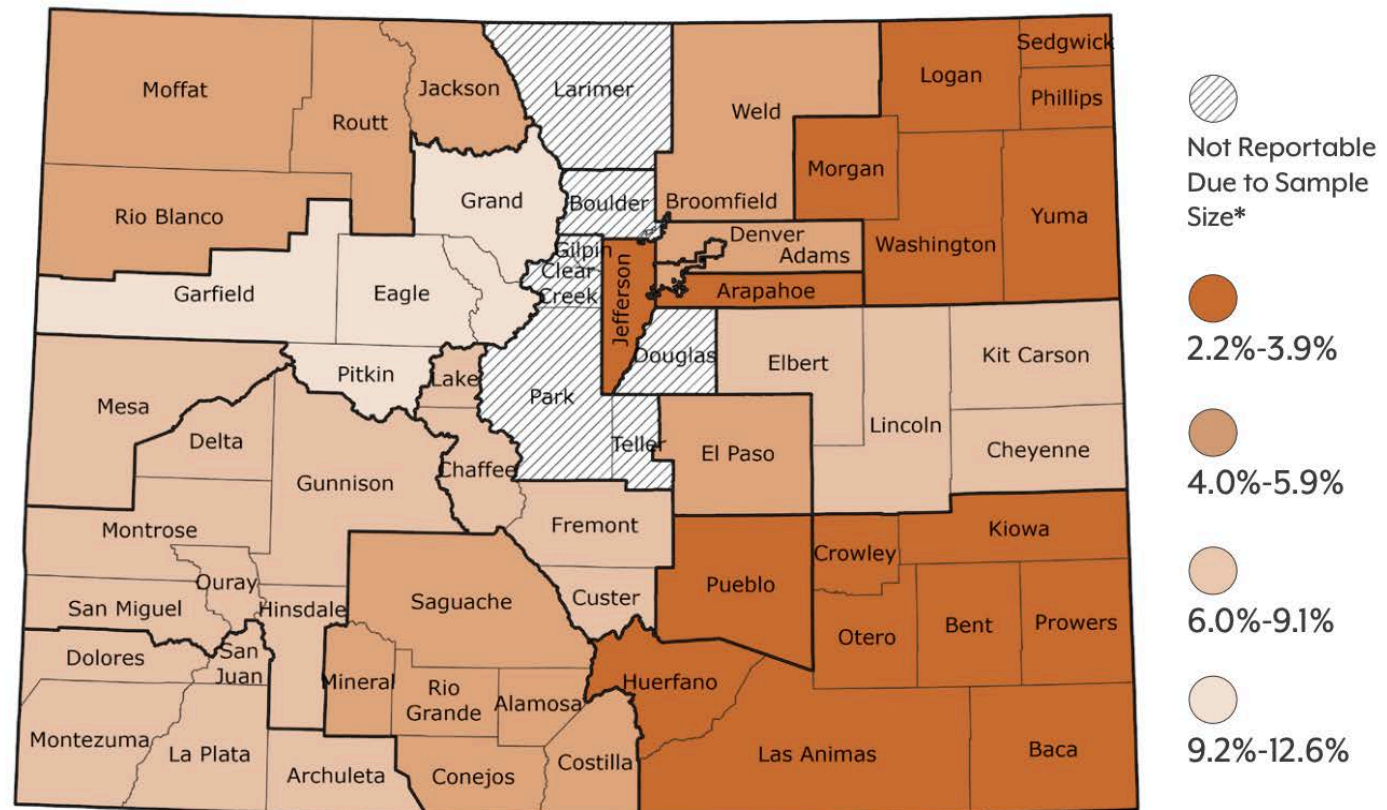


Figure 3: The figure above shows that rural regions, especially on the Western Slope, face disproportionately high uninsured rates. Counties such as Montrose, Delta, Mesa, etc, fall into the highest uninsured category, reinforcing how rural Colorado has struggled consistently with healthcare affordability and access.³⁹

³⁹ Colorado Health Institute. (2023). *Well-Being in the Wake of the Pandemic Key Findings from the 2023 Survey*. <https://www.coloradohealthinstitute.org/sites/default/files/2024-02/2023%20Colorado%20Health%20Access%20Survey.pdf>

Solution 2A: Require the availability of telehealth equipment in school-based health centers and invest further into school-based health centers across the state.

Being in a rural area means healthcare access is ultimately less prominent than an urban one. Doctors are not incentivized to work in rural areas because of income disparities and lifestyle differences small towns present. Specialized medical equipment, in high demand everywhere, doesn't make its way to rural areas largely because lack of high-density populations means investment returns are not justified.⁴⁰

Additionally, largely due to resource allocation differences (mainly because of unequal population spreads) and the cost of spreading healthcare across the state, programs like the ones that would be listed on school websites in accordance with Solution 1 are not as accessible to rural community members.

To stem the tide of rural inequality, many providers have pointed to telehealth and using the technology of the 21st century to make healthcare access equitable. Available on nearly every device through programs such as MyChart, telehealth meetings are held virtually, on confidential meeting services that present similarly to Zoom or Google Meet. Like both commonly used platforms, telehealth is often considered to be easy on the patient's end. Meeting times are flexible, and care is received from the comfort of one's own home.

Although telehealth is not able to provide every health service necessary, in terms of preventative care it can do wonders. Things like low-involvement physical therapy, check-in appointments, and well-child visits can all happen online. Virtual access can be the only access for geographically disadvantaged areas.

Unfortunately, not every Coloradan has access to these technologies (although they may just involve simple devices). Requiring telehealth equipment in school-based health centers would bring access to more patients.

Much like the computer stations at a library, the telehealth equipment in these centers would be available to anyone (not just students) as SBHCs are used by a wide variety of community members. Only, unlike a library, the location would provide the confidentiality needed between

⁴⁰ National Rural Health Association. (n.d.). *Recruitment challenges, solutions, and outlooks for the rural doc shortage*.
<https://www.ruralhealth.us/blogs/2025/07/recruitment-challenges.-solutions.-and-outlooks-for-the-rural-doc-shortage>

doctor and patient to properly diagnose and treat. The staff in SBHCs, though often sparse, could help to facilitate these meetings and ensure doctors were able to ask the questions needed to their patients.

Telehealth availability in SBHCs would aid in spreading access to physicians across the state. Unfortunately though, rural areas often have fewer SBHCs (as seen in previous figures) and often struggle to access them. However, providing this equipment at a local SBHC would help to shorten the amount of time to the nearest healthcare resource. And, encouraging the proliferation of these centers can aid in spreading the success of telehealth programs to disadvantaged communities.

Solution 2B: Require provider check-ins after each telehealth appointment. After in-person visits, allow for virtual check-in appointments.

Telehealth appointments, according to some local public health agencies, are far from perfect as they drastically limit the capabilities of a physician to assess patients. They can also eliminate the safety net that comes from check-ins and follow-ups.

Since telehealth appointments are often used for minor cases (like physical therapy or check-ins regarding flu-like symptoms), accessing follow-up appointments online could be instrumental in catching more serious cases of illness. Whether it be the escalation of injury or drastic upticks in symptoms, provider check-ins can help to catch patient deterioration before it becomes detrimental. Although it could be via MyChart chat or via phone call, having a doctor check in with individuals could be a step for higher risk rural patients to get more specialized care while still employing an efficient online system.

Another layer to this is in-person check-in appointments. Rural patients have to travel further to see doctors, especially specialists, which makes medical care more expensive and a greater burden. One solution to this is a policy to minimize the number of in-person meetings between patient and doctor. Rather than having to drive to a medical provider for a consultation, the actual appointment, and post-operation care, telehealth expansions could allow patients to only drive for the operation/essential appointment itself. Consultations and post-operation care could be done online, if appropriate. Although this system would not apply to high-risk patients or surgeries, for simpler doctors visits prior consults could be done virtually along with post-operation check-ins—depending on individual doctor discretion. Expanding telehealth

check-ins could help to catch rural patients' deteriorating conditions without forcing them through a more difficult system of in-person appointments that require more resources.

Systems thinking

Unintended consequences that we've considered include:

- Making resource lists accessible to everyone could lead to an influx in demand for each program. What today may be underused may grow to be overworked as more people request services, leading to greater strain on both state and private agencies.
- Requiring telehealth providers to check in with patients after each appointment can be instrumental in ensuring wellbeing, but also runs the risk of overworking physicians. Greater strain on telehealth providers could further decrease the likelihood of physicians (especially involved in family medicine) to work in rural areas where demands are high and pay is low(er).
- Emphasizing telehealth in rural areas could lead to an overreliance on it and a pause in ensuring other healthcare resources are available in-person to rural communities. Some rural providers and local public health agencies emphasize the benefits of telehealth, but also the idea that it isn't effective for every facet of health—including emergency medicine.
- Allowing virtual check-ins could mean patients slip through the cracks and deteriorate in conditions if doctors are unable to catch in person symptoms. This is why, for more serious cases or higher risk patients, in-person post meetings may be discussed or required.

Outreach

Did not respond after email and phone outreach

** Responded but declined to discuss our proposal*

” Meeting scheduled

While researching and writing this proposal, we reached out to:

Government agencies

State

- Colorado Department of Education: Melissa Bloom, Principal Policy Advisor

- Colorado Department of Public Health and Environment: Jena Burgess, Legislative Policy Advisor

Local

- Mesa County Public Health: Jennifer Daniels, Behavioral Health Division Director
- Montrose County Public Health: Mirza Ahmed, Director

Organizations that work in this policy area

- American Academy of Pediatrics: Ellen Brilliant, Colorado Chapter Executive Director
- Ariel Clinical Services: Becky Hobart, Chief Executive Director
- Aunt Flow #
- Center for Health Progress: Dana Kennedy, Co-executive Director
- Children's Hospital Colorado Population Health Division: Alli Daley, Senior Behavioral Health Policy Coordinator #
- Cherry Creek High School: Ryan Silva, Principal
- Children's Hospital Youth Advisory Council: Allison Butler, Facilitator; Jen Faraone, Facilitator; Cole Sanders, Facilitator
- Colorado Academy of Family Physicians: Isabel Hinshaw, Director of Policy and Government Relations
- Colorado Access: Amanda Berger, Senior Manager of Care Coordination; Bridget Anshus, Policy Team; Shawnette Gillespie, Community Engagement Team
- Colorado Alliance for Health Equity and Practice #
- Colorado Children's Campaign: Madeleine (Madi) Ashour, Director of K-12 Education Policy
- Colorado Coalition For The Homeless #
- Colorado Community Health Network: Stephanie Brooks, Policy Director
- Colorado Consumer Health Initiative: Priya Telang, Communications Manager
- Colorado Health Institute: Gerardo Silva-Padron, Associate
- Colorado Health Network: Leah Dirkse, Health Services #
- Colorado Hospital Association: Lyle Moore Jr., Director of Hospital Emergency Preparedness #
- Colorado Rural Health Center: Kelly Erb Zager, Director of Policy and Advocacy
- Colorado Schools Alliance: Frank Reeves, Director of Operations and Strategic Partnerships
- Families USA #
- Health Team Works: Cecilia Saffold, Chief Executive Officer; Cynthia Keenan, Director of Organizational Excellence and Regional Health Connector
- HomewardBound of the Grand Valley #
- Mountain Family Health Centers #
- Pediatric Telehealth of Colorado #
- Percipio #

- Pikes Peak Suicide Prevention: David Galvan, Vice President
- Project CURE: Tyler Grant, Denver Operations Director #
- Rural Communities Resource Center #
- Southwestern Colorado Area Health Education Center: Rexine Williams, Executive Director #
- The Colorado Trust #
- Western Healthcare Alliance: Angelina Salazar, Chief Executive Officer
- Young Invincibles: Khoa Nguyen, Rocky Mountain Policy and Advocacy Fellow
- Youth Healthcare Alliance: Aubrey Hill, Executive Director

Other subject matter experts

- Dr. Deborah Parra-Medina, Visiting Professor, Executive Director of the Center for Health Equity at the University of Colorado Anschutz Medical Campus #

Legislators

- State Representative Dan Woog, House District 19
- State Representative Eliza Hamrick, House District 61
- State Representative Lindsay Gilchrist, House District 8
- State Representative Regina English, House District 17
- State Senator Janice Marchman, Senate District 15



Mental Health Policy Committee

Problem 1: Colorado’s minority youth face the greatest mental health challenges and the most difficulty accessing the help they need.

Colorado’s minority youth face a disproportionate mental health burden while simultaneously having the least reliable access to information about available resources, making them a critical population to address to improve overall mental health in Colorado. Many minority students, including Asian American, Latinx, and multiracial students, are more likely to have clinically elevated depression symptoms compared to other students.⁴¹ Additionally, minority students in grades 6-12 are more likely to attempt suicide in comparison to their white counterparts at 7.2% for Black youth, 7.4% for Latinx youth, 10% for multiracial youth, and 12.9% for American Indian and Alaskan Native youth (compared to white youth at 6.7%).⁴²

Yet despite this elevated need for mental health resources, minority youth are less likely to receive mental health care services compared to their non-Latinx white counterparts.⁴³ This extends to minority youth’s comfort with discussing these issues with their parents as transgender teens are more than 20% less likely than their cisgender peers to talk with their parents about mental health concerns and Black teens are 10% less likely than their white peers

⁴¹ Lipson, S., Kern, A., Eisenberg, D., & Breland-Noble, A. times(2018, September). *Mental Health Disparities Among College Students of Color*. Journal of Adolescent Health. <https://www.jahonline.org/article/S1054-139X%2818%2930191-5/fulltext>

⁴² *Youth Mental Health*. Healthier Colorado. (2022). <https://healthiercolorado.org/wp-content/uploads/2022/09/Youth-Mental-Health-2.pdf>

⁴³ Alegria, M., Vallas, M., & Pumariega, A. J. (2010, October). *Racial and ethnic disparities in Pediatric Mental Health*. Child and adolescent psychiatric clinics of North America. <https://pmc.ncbi.nlm.nih.gov/articles/PMC3011932/>

to do the same.⁴⁴ Geographic and economic inequities compound the problems, as poorer areas of Colorado show adolescent suicide attempt rates up to 2.5 times higher than affluent counties like Boulder.⁴⁵ Of the 179 school districts across Colorado, 35 have no school counselor at all, while 46 of Colorado's 64 counties have no practicing child or adolescent psychiatrist.⁴⁶

The disproportionate mental health challenges facing minority youth are further worsened by a systemic failure to connect them with the resources that do exist. Although legislation like HB23-1003 School Mental Health Assessment (<https://leg.colorado.gov/bills/hb23-1003>) created a mental health screening program for students in grades six through twelve, screenings are only useful if students, families, and school staff know where to direct those who need care.⁴⁷ This knowledge gap is widespread: Colorado's mental health system has been described as "confusing, fragmented, and siloed," and when families cannot identify scarce services or feel lost navigating the system, they often have no other choice but to go to the hospital emergency room.⁴⁸

Making matters worse, programs that build protective factors for mental health (conditions or attributes that reduce risk) remain limited in many communities and schools, so even where resources exist, they don't consistently reach the students who need them most.⁴⁹ Although resources exist, such as Colorado LIFTS, which connects individuals and families to available services, they do not consistently provide comprehensive or easily accessible information regarding youth mental health services.⁵⁰ As a result, students, families, and school personnel may face challenges identifying appropriate support in a timely manner, particularly in underserved or rural communities. Additionally, while schools serve as a critical access point for youth to receive ongoing mental health support, school-based mental health professionals and

⁴⁴ *Healthy Kids Colorado Survey Dashboard*. Colorado Department of Public Health and Environment. (2023). <https://cdphe.colorado.gov/healthy-kids-colorado-survey-information/healthy-kids-colorado-survey-dashboard>

⁴⁵ *Youth Mental Health*. Healthier Colorado. (2022). <https://healthiercolorado.org/wp-content/uploads/2022/09/Youth-Mental-Health-2.pdf>

⁴⁶ Mulholland, J. B. (n.d.). *Stress, Social Media, Pandemic Are Taking a Heavy Toll on Colorado Kids' Mental Health, According to Annual Report*. Colorado Public Radio. <https://www.cpr.org/2023/08/29/kids-count-in-colorado-report-children-mental-health/>

⁴⁷ Jenet, D., & Cutter, L. (2023). *School Mental Health Assessment*. HB23-1003 School Mental Health Assessment | Colorado General Assembly. <https://leg.colorado.gov/bills/hb23-1003>

⁴⁸ *Youth Mental Health*. Healthier Colorado. (2022). <https://healthiercolorado.org/wp-content/uploads/2022/09/Youth-Mental-Health-2.pdf>

⁴⁹ *Solutions to Strengthen Colorado's Youth Mental Health Ecosystem* | Colorado Health Institute. (n.d.). [Www.coloradohealthinstitute.org. https://www.coloradohealthinstitute.org/research/solutions-strengthen-colorados-youth-mental-health-ecosystem](https://www.coloradohealthinstitute.org/research/solutions-strengthen-colorados-youth-mental-health-ecosystem)

⁵⁰ Colorado Behavioral Health Administration <https://bha.colorado.gov/help/get-help-mental-health-drugs-or-alcohol#Mental-health-services>

community health providers must pool resources to work together, a level of coordination that is inconsistent across Colorado's counties and districts.⁵¹

Solution 1: Colorado should create a database organized by county with mental health resources available to school districts, students, parents, and staff.

To improve awareness of and access to behavioral health resources, the Colorado Behavioral Health Administration, in collaboration with the Colorado Department of Education, should develop and maintain a centralized, statewide database of all available youth mental health services. This database should include school-based, community-based, crisis, and preventive mental health resources and be updated regularly to ensure accuracy. The database should also be distributed annually to all school districts across Colorado and made accessible to students, families, counselors, and educators. The database should have a search function based on ZIP code or county to identify resources nearby.

Establishing a centralized and comprehensive resource system will strengthen access to resources among youth, reduce barriers to care, and help ensure that students receive timely and appropriate mental health support.

Systems thinking

Unintended consequences that we've considered include:

- Youth who do not have reliable access to the internet may not be able to access this resource as easily.
- This resource would have to be updated every few months in order to prevent information from being outdated. This would require personnel or some kind of algorithm to verify if resources are current and add new ones.

⁵¹ *How can schools and community health providers collaborate effectively?* (n.d.). [www.childrenscolorado.org. https://www.childrenscolorado.org/doctors-and-departments/departments/psych/mental-health-professional-resources/primary-care-articles/collaborating-with-schools-to-support-youth-mental-health/](https://www.childrenscolorado.org/doctors-and-departments/departments/psych/mental-health-professional-resources/primary-care-articles/collaborating-with-schools-to-support-youth-mental-health/)

Problem 2: Colorado youth, especially youth from rural areas, have limited access to mental health resources.

Colorado state and national data shows that rural communities face the most severe shortages of mental health providers and the longest wait times for care. Approximately 70% of rural U.S. counties lack a psychiatrist, and 61% of mental health shortage areas are rural.⁵² Some rural school districts have ratios as high as 2,128 students per counselor, much higher than the Colorado state average of 253:1.⁵³ This is especially concerning because 75% of children who receive mental health care access it through schools.⁵⁴ Economic inequalities worsen this geographical issue. In areas like Pueblo County, where poverty rates are higher, youth suicide attempt rates are nearly 2.5 times greater than in wealthier counties.⁵⁵ Colorado residents, specifically youth, will likely continue to face hardship in finding mental health resources outside of city centers due to the barriers they face in accessing providers.

Although Colorado has expanded mental health programs and resources for youth in recent years, with a decreasing number of Coloradans who reported eight or more days of poor mental health in the past month, many students still struggle to access the support available to them.¹⁸ This is especially true for rural regions where there are shortages of mental health professionals, transportation barriers, and other limitations. While the percentage of Coloradans reporting frequent poor mental health has decreased, youth mental health concerns still remain widespread, and many students do not get the help they need.⁵⁶

⁵² Models to Expand Affordability for Mental Health Services - RHInhub Toolkit. (2025). Ruralhealthinfo.org. <https://www.ruralhealthinfo.org/toolkits/mental-health/2/affordability>

⁵³ Grover, E. (2023, June 26). Innovative Project Addresses “Dire Need” for School Psychologists in Colorado’s Rural Communities. University of Denver. <https://www.du.edu/news/innovative-project-addresses-dire-need-school-psychologists-colorados-rural-communities>

⁵⁴ School-Based Mental Health: Pediatric Mental Health Minute Series. (n.d.). www.aap.org. <https://www.aap.org/en/patient-care/mental-health-minute/school-based-mental-health/>

⁵⁵ Generation Better: Actionable Policy Solutions on Mental Health for the Next Generation A White Paper By Healthier Colorado. (n.d.). <https://healthiercolorado.org/wp-content/uploads/2022/09/Youth-Mental-Health-2.pdf>

⁵⁶ *Mental Health Colorado: Are Things Really Getting Better?* | Colorado Health Institute. (2025). Coloradohealthinstitute.Org; Colorado Health Institute. <https://www.coloradohealthinstitute.org/research/mental-health-colorado-are-things-really-getting-better>

Solution 2: Colorado should create a model peer resource navigator program that school districts can adopt.

Inspired by peer-support initiatives like those of the Youth Mental Health Corps, this program would train students to help classmates identify and access mental health resources.¹⁹ These students would not provide counseling for the students; they would connect peers to professional counselors and other state-wide programs. They could also support students by helping them find appropriate services, understand eligibility requirements, or schedule appointments.

Peer-based support would be especially helpful because students are more likely to confide in their classmates who go through similar events. While counselors or other advisors may struggle to reach or identify students in need, peers have the best understanding of how their other classmates are doing mentally.⁵⁷ By initiating these peer-based programs, students across Colorado could access existing resources while simultaneously reducing stigma regarding treatment.

Systems thinking

Unintended consequences that we've considered include:

- Untrained students may not know how to best support peers with underlying mental health issues. This could lead to students overlooking this option, or not using it at all.
- As the needs of various regions in Colorado are diverse, it could be difficult for students to connect with others from across the state, posing challenges to engaging in this peer resource program.

Problem 3: Colorado youth are not using mental health resources due to stigma and/or lack of awareness of resources.

According to the Colorado Health Institute, more than one in five young adults in Colorado reported needing mental health care but not receiving it, and 10.6% specifically cited stigma as a

⁵⁷ Pointon-Haas, J., Waqar, L., Upsher, R., Foster, J., Byrom, N., & Oates, J. (2023). A systematic review of peer support interventions for student mental health and well-being in higher education. *BJPsych Open*, 10(1), 1–16. <https://doi.org/10.1192/bjo.2023.603>

barrier to seeking help.⁵⁸ Additionally, research from Healthy Kids Colorado found that students who do not have trusted adults and mental health education in their environment are less likely to seek support. About 71.3% of Colorado high schoolers say they have an adult they can turn to for help with a serious problem, and that same group tends to report lower rates of depression and suicidal thoughts.⁵⁹ Despite programs such as Colorado’s I Matter initiative and school-based mental health resources, many adolescents retain a fear of being judged for using them, which contributes to untreated anxiety, depression, and other mental health challenges.⁶⁰

Solution 3: Colorado should create and/or expand on the mental health curriculum in secondary education for both students and staff.

Expanding and improving mental health academic standards to mandate that schools share information on accessing mental health resources could encourage Colorado students to use the resources available to them. Current health standard requirements in Colorado state that students be taught to “advocate to improve or maintain positive mental, emotional well-being for self and others.”⁶¹ However, this vague requirement can lead to confusion and varying expectations within different schools. Updating the list of standards to include resource sharing as an explicit requirement will ensure that students across Colorado have the same access to information to help themselves and others. Across America, only 52% of schools feel that they can provide adequate mental health resources to their students.⁶² Teaching students about resources available in the community helps lessen the burden on schools by encouraging students to use other resources.

Staff training should also accompany the student curriculum update. Teachers and school staff are often the first adults to notice warning signs, but many report feeling unprepared or unsure

⁵⁸ 2023 CHAS: Gen Z Mental Health | Colorado Health Institute. (2023). Coloradohealthinstitute.org; Colorado Health Institute. <https://www.coloradohealthinstitute.org/research/2023-chas-gen-z-mental-health>

⁵⁹ Healthy Kids Colorado. (2023, March 10). Healthy Kids: Mental Health | Colorado Health Institute. [Www.coloradohealthinstitute.org. https://www.coloradohealthinstitute.org/research/healthy-kids-mental-health](https://www.coloradohealthinstitute.org/research/healthy-kids-mental-health)

⁶⁰ Generation Better: Actionable Policy Solutions on Mental Health for the Next Generation A White Paper By Healthier Colorado. (n.d.). <https://healthiercolorado.org/wp-content/uploads/2022/09/Youth-Mental-Health-2.pdf>

⁶¹ *Colorado Academic Standards Online*. Colorado Department of Education. (2019). <https://www.cde.state.co.us/apps/standards/3.15.0>

⁶² *School Pulse Panel: Surveying high-priority, education-related topics*. School Pulse Panel - Interactive Results. (2025). <https://nces.ed.gov/surveys/spp/results.asp#current>

which resources to point students toward.⁶³ Requiring periodic training for school staff on recognizing mental health warning signs and on the same resource information taught to students would ensure that the adults students are told to turn to can actually follow through.

Systems thinking

Unintended consequences that we've considered include:

- Schools that do not already adhere to mental health curriculum benchmarks would not receive the same benefits.
- This proposal could tax school resources by adding extra teaching requirements. Teachers may have less time to work on lesson planning or teach different units.

Outreach

Did not respond after email and phone outreach

^ *Meeting scheduled*

* *Declined to meet*

While researching and writing this proposal, we reached out to:

Government agencies

State

- Colorado Attorney General's Office: Stacey Scardino, Safe2Tell Director; Allie Cooper, Safe2Tell Director of Youth Mental Health Initiatives

Local

- 27J School District: William Pierce, Superintendent; Melissa Vasquez, Intervention Services Specialist
- Adams 12 Five Star Schools: Chris Gdowski, Superintendent #
- Aurora Public Schools: Jessica O'Muireadhaigh, Director of Mental Health and Counseling
- Cheyenne Mountain High School: Natalie Crow, English Language Development Teacher
- Cherry Creek Public Schools: Dr. Andrea Roberts, Psychologist
- Colorado Springs School District 11: Michael Gaal, Superintendent #
- D'Evelyn High School: Molly Harrington, High School Counselor

⁶³ Stickl Haugen, J., Sutter, C. C., Tinstman Jones, J. L., & Campbell, L. O. (2023). Teachers as Youth Suicide Prevention Gatekeepers: An Examination of Suicide Prevention Training and Exposure to Students at Risk of Suicide. *Child & youth care forum*, 52(3), 583–601. <https://doi.org/10.1007/s10566-022-09699-5>

- Doherty High School: Kathy Reed, Co-leader of the Wellness Design Team and the Suicide Prevention Design Network; Lindsey Wedor, Counselor
- Gilpin County Public Health: Marie Larson, Community Health Specialist
- Jeffco Public Schools: Deb Gopstein, Suicide Prevention Specialist
- Thornton High School: Charles Arellano, Principal; and Iris Converse, Social Worker
- Las Animas High School: Jenn Pointon, Counselor
- Mountain Valley Schools: Elise Lovato, Counselor
- Riverdale Ridge High School: Cody Clark, Principal; Brittney Coyle, Lead Counselor
- Thornton Police Department: Raymond Ritter, School Resource Officer
- Summit County Sheriff's Office: Patrick Finley, School Resource Officer

Organizations that work in this policy area

- Broomfield Youth 4 Youth: Laura Paulson, Youth Projects Coordinator
- Colorado Children's Hospital & University of Colorado School of Medicine: Ron-Li Liaw, Mental Health In-Chief
- Colorado Rural Health Center #
- Colorado State University: James Kuemmerle, Regional Behavioral Health Specialist
- Finding Hope Counseling and Consulting LLC: Sarah Younggren, Consultant
- Hayden Youth Council: Tariq Rogers, Routt County Empowerment Program Coordinator
- Healthy Young Minds: Cody Cardaballo, Partnership Manager
- Inside Out Youth Services: Alie Ehrensaft, Program Manager; Ollie Glessner, Communications and Advocacy Director
- Jeffco Communities That Care: Emily Tucker, Coalition Manager
- La Cocina: Janina Fariñas, CEO and Founder
- Partners for Youth: Heidi Brown, Empower Program Director
- Pikes Peak Suicide Prevention Partnership: Maria Cortés, Youth and Family Resource Navigator #
- Turning Point Center for Youth & Family Development: Wendy Lee, Executive Director
- University of Denver: Xochilt Alamillo, Licensed Clinical Social Worker and Mental Health Researcher
- Youth Council on Mental Health: Stephanie De Jesus Ayala, Program Director

Legislators

- Senator Kyle Mullica, District 24
- Representative Brianna Titone, District 27
- Representative Brandi Bradley, District 39 #
- Representative Carlos Barron, District 38 #
- Representative Dusty Johnson, District 63*
- Representative Rick Taggart, District 55 #
- Representative Ty Winter, District 47 #



Technology AI Policy Committee

Problem: The Colorado state government lacks guidance on what factors school districts should consider when implementing AI and what resources exist to properly educate both students and professionals on AI use.

Background

- **AI (artificial intelligence)** – The broad field of computer science that focuses on developing systems to perform tasks that typically need human intelligence.
- **LLM (large language model)** – A type of AI system trained on text data to analyze and generate human language. Examples include ChatGPT (OpenAI), Gemini (Google), and Claude (Anthropic).

Artificial intelligence (AI) in the form of large language models (LLMs)—such as ChatGPT, Gemini, Claude, and Grok—has transformed the world, impacting the way humans operate in almost every space.⁶⁴ It has redefined the workspace for a variety of professions and has also created a paradigm shift in education. These fundamental changes are necessary for Colorado—specifically Colorado’s education sector—to consider; Colorado is responsible for providing a quality education that not only teaches students the standards but also prepares them for the workforce. Colorado must consider the impact AI has on both of these responsibilities.

⁶⁴ Cheong, I., Caliskan, A., & Kohno, T. (2024). Safeguarding human values: rethinking US law for generative AI’s societal impacts. *AI and Ethics*.
<https://doi.org/10.1007/s43681-024-00451-4>

Firstly, AI is a powerful tool, but students' overreliance on it can produce unwanted effects that diminish the quality and value of the education teachers provide. Many students end up using AI as a way to get the answers they need without employing any critical thinking, other than the negligible amount needed to actually write the prompt. This results in a phenomenon called cognitive offloading, where students outsource the thinking required to answer a question or write an essay to AI.⁶⁵ This can lead to a decline in memory, attention, and problem-solving skills, thus lowering critical thinking ability.⁶⁶ As AI grows, the prevalence of cognitive offloading and the reality of its impact on critical thinking becomes more apparent: In 2025, Michael Gerlich at the Switzerland Center for Strategic Corporate Foresight and Sustainability identified a significant negative correlation between frequent AI tool usage and critical thinking abilities, mediated by increased cognitive offloading. In that study of 666 participants, younger participants exhibited higher dependence on AI tools and lower critical thinking scores compared to older participants. This warrants a serious concern about the extent to which cognitive offloading is truly impacting students as AI reaches unprecedented levels of usage by students. The best way to avoid cognitive offloading is to use AI as an 'enabler rather than a substitute.'⁶⁷ However, many students don't know how to use AI properly, and, worse, many don't know that there are real adverse consequences of using AI as a cognitive substitute. This problem underscores the need for some form of AI education in schools. The state government has the power to at least guide school districts on how to educate students on AI usage.

Though AI does have negative impacts when used incorrectly, it can accelerate productivity in the workplace, generally by picking up the menial tasks that require less human critical thinking and creativity, like formatting Excel spreadsheets. Because of the potential AI has to accelerate productivity, being competent with AI is a top skill employers are now recruiting for.⁶⁸ The professional space is changing, which means that to prepare students for the workforce, Colorado has to adapt.

⁶⁵Jose, B., Cherian, J., Verghis, A. M., Varghise, S. M., Mumthas, S., & Joseph, S. (2025). The cognitive paradox of AI in education: Between enhancement and erosion. *Frontiers in Psychology*, 16, Article 1550621. <https://doi.org/10.3389/fpsyg.2025.1550621>

⁶⁶Gerlich, M. (2025). AI tools in society: Impacts on cognitive offloading and the future of critical thinking. *Societies*, 15(1), Article 6. <https://doi.org/10.3390/soc15010006>

⁶⁷Jose, B., Cherian, J., Verghis, A. M., Varghise, S. M., Mumthas, S., & Joseph, S. (2025). The cognitive paradox of AI in education: Between enhancement and erosion. *Frontiers in Psychology*, 16, Article 1550621. <https://doi.org/10.3389/fpsyg.2025.1550621>

⁶⁸Ryan, R. (2025, July 30). The No. 1 skill employers want in 2025 and most job seekers don't list it. *Forbes*. <https://www.forbes.com/sites/robinryan/2025/07/30/the-no-1-skill-employers-want-in-2025-and-most-job-seekers-dont-list-it/>

Currently, the state offers no comprehensive guidance to school districts and educators for navigating AI and its new role in education.⁶⁹ Educators are wondering: How do I teach my students about AI? How do I create assignments that students actually have to think about to complete (rather than just asking AI)? How should students use AI to augment their thinking rather than simply substitute their thinking? What skills can I teach my students to prepare them for a changing workforce? Many educators also lack understanding of what AI is, how they can use it in their own jobs ethically, and best practices in the classroom. The state offers no form of guidance on how to navigate these questions to school districts and educators.

Solution: Colorado should create an AI task force composed of educators, administrators, ed-tech organizations, and youth to guide AI in education.

Creating a task force within the state of Colorado dedicated specifically to guiding school districts and educators on AI implementation and usage in the classroom is a direct way to solve the problem outlined. Colorado would join other pioneering states like California, Michigan, Ohio, Nevada, Washington, and more as the first states to create AI task forces and guide the progression of AI in their states.

This task force should be composed of educators, administrators, ed-tech organizations, and youth to facilitate coordination among educators and students in the public sector and members of the private sector. This is important because many edtech organizations like the Colorado Education Initiative, CosN, aiEDU, etc., have already been working on providing guidance for AI in schools and mapping out the potential future of AI in our state. For example, the Colorado Education Initiative published the Colorado AI Roadmap in August of 2024 and will publish the follow-up Roadmap 2.0 later this year.⁷⁰ aiEDU has been developing direct curriculum for schools to implement in their districts and has been compiling resources from different organizations into a unified web page.⁷¹ It is important to coordinate both public and private

⁶⁹Colorado Education Initiative. (2024, August). Colorado roadmap for AI in K-12 education: Guidance for integrating AI into teaching and learning. https://www.coloradoedinitiative.org/wp-content/uploads/2024/08/Colorado-Roadmap-for-AI-in-K-12-Education_August-2024.pdf

⁷⁰ Colorado Education Initiative. (2024, August). Colorado roadmap for AI in K-12 education: Guidance for integrating AI into teaching and learning. https://www.coloradoedinitiative.org/wp-content/uploads/2024/08/Colorado-Roadmap-for-AI-in-K-12-Education_August-2024.pdf

⁷¹National AI Literacy Day. (n.d.). AI literacy resources for educators & learners. Retrieved June 10, 2026, from <https://ailiteracyday.org/resources>

efforts to keep the direction of AI in Colorado unified and collaborative. The task force should also include youth voices.

This task force should have five key outcomes:

1. The task force will create guidelines for school districts on how to vet and analyze AI education curriculum.

It is difficult for a volunteer-based task force to vet the numerous AI curricula that exist already and that will continue to grow in the future. Furthermore, the curriculum for AI will evolve constantly because AI is also changing rapidly. Therefore, the task force should focus on creating guidelines for school districts on how to vet the curricula that exist.⁷² Guidelines could state, for example, that the AI curriculum should focus on strategies for developing critical thinking skills while using AI. By creating these guidelines, school districts will be able to implement what works best for them within a defined framework to create the best outcomes.

2. The task force should compile instructional materials for ease of access.

Many private organizations have been compiling instructional materials for AI, and some are beginning to start vetting those instructional materials. Because the task force is composed of private entities that have been compiling instructional materials, we recommend that educators and private organizations work together to organize these compilations into a list of materials that districts may potentially use. Note that this doesn't require vetting, but the purpose is to offer a more publicized list of materials so that school districts, especially under-resourced ones, don't have to spend time scouring the internet for potentially good resources.

3. The task force will write policy recommendations to the state legislature on AI implementation.

As AI evolves, so will the legislation schools need to support their implementation of AI. The task force should also write policy recommendations to the state legislature on what Colorado needs for AI to produce positive outcomes in the classroom. These recommendations should be actionable and may have an interim committee for presentations.

4. The task force will provide a policy framework to school districts for what AI should look like.

Another important consideration for school districts is the ethical use of AI by teachers, students, and administrators. This can include ensuring that users maintain privacy in AI usage, penalties for certain AI usage by students, etc. The task force must develop a framework for what policies surrounding AI should look like in school districts. This framework should specifically pertain to a few key pillars like integrity, legality, or ethicality. School districts ought to maintain legality

⁷² Christian Pinedo, VP of External Affairs, aiEDU, personal communication, June 2026

and ethicality in their use of AI, along with upholding a standard of integrity for students. Creating a framework for districts to build off of is valuable, especially for less-resourced districts.⁷³ A framework grounded in baseline values allows districts to create more informed policy decisions.

5. The task force should aim to organize professional development sessions for teachers or trainers to learn about AI, earn Continuing Education Credits, and utilize that information in their school districts.

AI is a rapidly evolving field, and it is difficult for educators to stay updated on the field. This can limit educators' abilities to effectively teach students about AI.⁷⁴ To help our educators deliver AI education to students, we recommend creating AI literacy sessions to educate teachers on the basics of AI. Colorado can set up these sessions in collaboration with the Colorado Department of Education or in collaboration with private organizations like the Colorado Education Initiative. Furthermore, to give educators the best output for their valuable time, we recommend that Colorado incentivize these AI literacy sessions. One such method is by offering continuing education credits to teachers who attend these professional development sessions. Combining these credits with other incentives can ensure that AI literacy diffuses better across the state.⁷⁵ With these incentivized AI literacy trainings, teachers can complete continuing education requirements and also take a more informed approach to AI in the classroom. Professional trainers can also attend these sessions to learn more about AI.

Though it is not our role as youth advisors to determine sources of funding, the Technology AI committee has facilitated conversations with potential business partners and funding sources. Through Senator Robert Rodriguez's network, we have connected with clients at Google.org, IBM, and the Business Software Alliance. We have spoken with them about receiving donations to fund the task force through "Gifts, Grants, and Donations," which would alleviate fiscal burdens from the legislature's end.

A task force in any capacity that is able to accomplish even a few of the objectives outlined above could ensure that AI in education creates positive outcomes for students to develop professionally and gain critical thinking skills. As the landscape of AI evolves, we ought to establish key frameworks and pillars that define what education needs from AI so that we can create a positive future for our students rather than letting students fall to the pitfalls and risks of AI overuse. A private–public–youth collaborative task force would be a powerful step in the right direction.

⁷³ Diane Fricke, Director of Technology, Academy District 20, personal communication, September 2025

⁷⁴ Diane Fricke, Director of Technology, Academy District 20, personal communication, September 2025

⁷⁵ Dr. William Penuel, Strand 3 Co-Principal Investigator, CU Boulder AI Institute, personal communication, January 2026

Systems thinking

Unintended consequences that we've considered include:

- State directives on implementing AI might result in the implementation of AI where it is not necessary and where it may be harmful because of the state directive.
- AI directives from the state level may encourage building more data centers, which can be harmful for rural and under-resourced populations where companies typically build them.
- Increased AI usage that state AI directives may cause may also result in increased water usage and environmental impact.

Outreach

Did not respond after email and phone outreach

** Responded but declined to discuss our proposal*

While researching and writing this proposal, we reached out to:

Government agencies

State

- Artificial Intelligence Impact Task Force: Samantha Falco, Task Force Member #
- Colorado Broadband Institute: Brandy Reitter, Executive Director

Local

- Academy School District 20: Diane Fricke, Director of Technology
- Academy School District 20: Steve Errickson, AP Cybersecurity Teacher, Pine Creek High School
- Boulder Valley School Districts: Bob Roark, Director of IT Services
- Eagle County School District: John Donnelly, Chief Technology Officer
- Eagle County School District: Bri Chittenden, Education Technology Manager
- Norwood High School: Malisha Reed, Principal
- Norwood High School: Eliza Brumfiel, History Teacher
- Norwood High School: Steven Hall, English/History Teacher

Organizations that work in this policy area

- AI4K12: General Email #
- aiEDU: Christian Pinedo, VP of External Affairs & Advocacy for the AI Education Project
- Colorado Education Initiative: Kelly Quinn, Manager, Social Emotional Development #

- Colorado Education Initiative: Patty Quinones, Senior Partner in Leadership & Innovation
- Colorado Education Initiative: Carly Schwab, Director of Implementation & Design
- Colorado Education Initiative: Amy Spicer, Vice President of Implementation & Design #
- CoSN: David Jarboe, CoSN Educational Technology Innovation Chair
- CoSN: Pete Just, Director of CoSN AI Projects
- National AI Institute for Student-AI Teaming: Thomas Breideband, Associate Director #

Other subject matter experts

- Gregory Benedis-Grab, Research Scientist II, CU Boulder Institute of Cognitive Science #
- Nathaniel Blanchard, Researcher, National AI Institute for Student-AI Teaming #
- Jeremiah Contreras, Professor of Accounting at Leeds School of Business, CU Boulder #
- Denise Henry, Director of Center for Teaching, Learning, and Leadership, CSU Pueblo #
- Dr. Leanne Hirshfield, Strand 2 Researcher, CU Boulder AI Institute #
- Mary Kay Hogan, Principal at the Fulcrum Group and coordinates with Business Clients for Legislative Affairs
- Margot Kaminski, Professor of Law, Served on Colorado's AI Task Force, University of Colorado #
- Vivek Krishnamurthy, Associate Professor of Law and Director of the Samuelson-Glushko Technology Law and Policy Clinic (TLPC), Served on Colorado's AI Task Force, University of Colorado #
- Rebecca Lee, Student Initiatives Coordinator, CU Boulder Center for Teaching & Learning #
- Dr. William Penuel, Strand 3 Co-Principal Investigator, CU Boulder AI Institute
- Dr. Thomas Phillip, Strand 3 Co-Principal Investigator, CU Boulder AI Institute #
- Dr. Tamara Sumner, Strand 2 Principal Investigator, CU Boulder AI Institute #

Legislators

- State Senator Matt Ball, Senate District 31
- State Senator Robert Rodriguez, Senate District 32
- State Representative Meghan Lukens, House District 26



Technology Regulation Policy Committee

Problem: Social media companies are failing to protect Colorado youth mental health and online safety.

Background

- **Instant gratification features** - likes, comments, shares, notifications, or otherwise social validating interactions with the platform
- **Social media recommendation algorithm** - a process used to prioritize, recommend, or deliver content to users based on behavior, preferences, engagement, and demographic factors
- **Parental consent** - authorization provided by a parent or legal guardian, consistent with the requirements of COPPA
- **Data collection** - the gathering, storage, and use of user information by a platform, including engagement and behavioral data, is used to power social media recommendation algorithms
- **Microtargeting** - the practice of delivering highly specific content to a narrowly defined audience based on user data and algorithmic measures
- **Targeted content delivery** - Use of recommendation algorithms to show users content based on collected data, preferences, or previous interactions
- **Psychological dependence** - when a user feels a persistent need to engage with a platform in order to experience satisfaction, or avoid extreme discomfort
- **Age verification system** - process used to reasonably confirm a user's age *prior* to granting platform access
- **Dopamine loop** - A feedback cycle in which the brain's reward system produces positive sensations that encourage repeated interaction with a stimuli
- **Content moderation** - when a platform reviews, restricts, or removes content that violates the platform's policy, or other laws
- **Passive consumption** - engagement on the platform without direct interaction – scrolling, or viewing but not posting, sharing, reacting, or creating content

- **Active engagement** - interaction using direct participation – posting, commenting, sharing, or reacting to content
- **Third-party consent** - content that is created and uploaded by users rather than the platform provider
- **Gamification** - the ability for users to win badges or points to be on leaderboards
- **Body dysmorphia**– a mental health condition characterized by a persistent and disordered perception of physical appearance

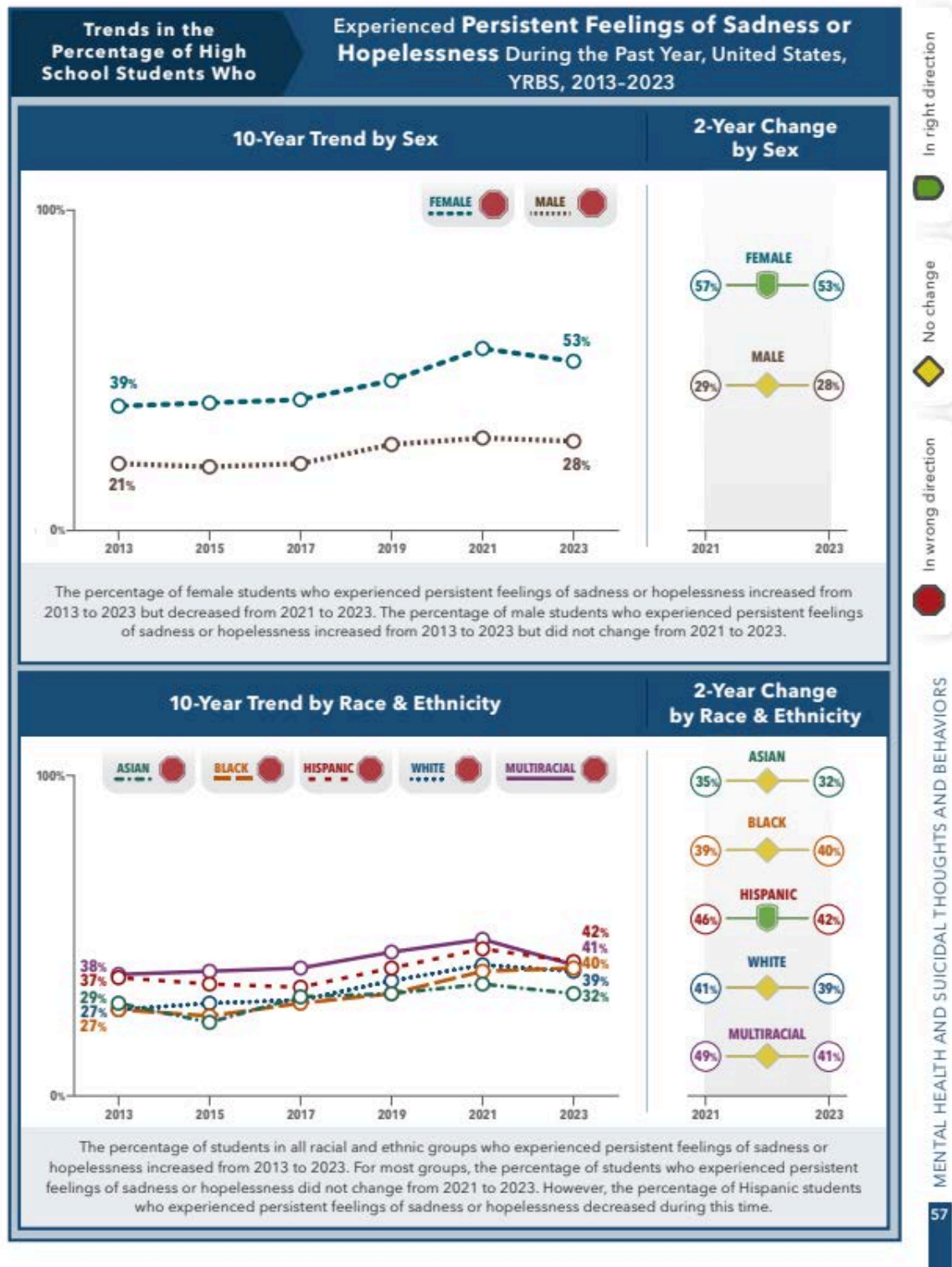
Since its initial popularization in the late 2000s and early 2010s, social media usage among minors has significantly increased, leading to changes in user behavior, communication, and decision making. Concerns have emerged regarding the effects that increased screen time and use of social media platforms are having on adolescents. In the fall of 2024, a bipartisan coalition of 42 attorneys general sent a letter to Congress to urge legislation requiring a U.S. surgeon general warning on “all algorithm-driven social media platforms”⁷⁶. Social media companies fail to protect youth mental health in various ways, but specifically in the harmful content that algorithms push through microtargeting, the practice of delivering highly personalized content to a narrowly defined audience based on user data and algorithmic measures, as well as the lack of age verification and authorization to access the products.

Researchers have noticed striking statistics about youth anxiety and depression since 2012, when smartphones became readily available.⁷⁷ Every year in the US, teens are required to complete a survey about mental health at wellness appointments. In 2013, the percentage of female teens who reported “Persistent feelings of sadness or hopelessness” was 39%, but by 2023 it had jumped to 53%. Male teens who reported the same feelings were 21% in 2013, and 28% in 2023. The data varied from 27% to 38% when separated by race and ethnicity in 2013, and varied from 32% to 42% in 2023 with Hispanic students ranking the highest and Asian students ranking the lowest.

⁷⁶ National Association of Attorneys General. (2024, September 9). *Requiring a Surgeon General's warning label on social media platforms*. https://www.naag.org/wp-content/uploads/2024/09/SM-Warning-Label-Letter_FINAL.pdf

⁷⁷ Twenge, J. M., Joiner, T. E., Rogers, M. L., & Martin, G. N. (2018). *Increases in depressive symptoms, suicide-related outcomes, and suicide rates among U.S. adolescents after 2010 and links to increased new media screen time*. *Clinical Psychological Science*, 6(1), 3–17. <https://doi.org/10.1177/2167702617723376>

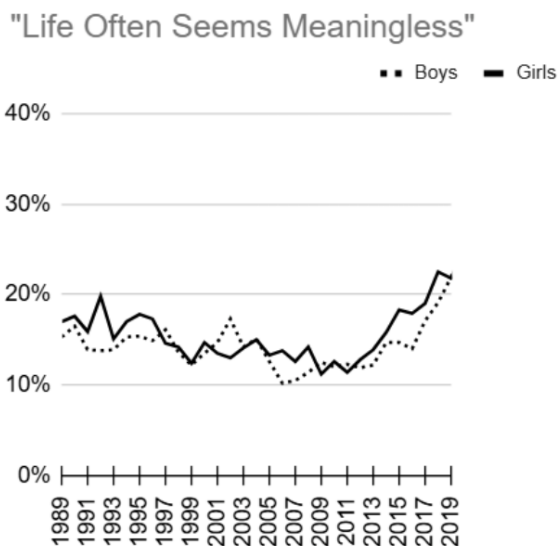
Figure 1: CDC Youth Risk Behavior Survey 2013-2023 Page 60⁷⁸



⁷⁸ Centers for Disease Control and Prevention. (2024). *Youth Risk Behavior Survey Data Summary & Trends Report: 2013–2023* (p. 60). U.S. Department of Health and Human Services. <https://www.cdc.gov/yrb/dstr/pdf/YRBS-2023-Data-Summary-Trend-Report.pdf>

According to *Monitoring the Future*⁷⁹, 12% of girls and 11% of boys surveyed across the country in 2011 agreed when presented with the statement “Life often seems meaningless”. These numbers steadily increased to 21% of girls and 31% of boys agreeing with the statement as of 2021. The numbers in 2011 are an overall low for both sexes at the same time compared to data collected since 1989.

Figure 2: Percentage of U.S. youth agreeing with the statement “Life often seems meaningless”⁸⁰



These numbers are just a drop in the ocean of data and statistics that support the decrease of youth mental health. The increase in anxiety and depression is also correlated with an increase in reported self-harm and eating disorders. Nonsuicidal self-injury (NSSI), typically used as a coping mechanism for feeling out of control or hopeless as well as strong levels of anxiety, has increased especially in adolescent girls; the likelihood of these events tripled from 2010 to 2020. Since 2010, there has been an 188% increase in the number of visits by female teens to the emergency room due to nonfatal self-injury. There has also been a 48% increase in teen male visits, significantly lower than the visits by female teens, but still a cause for concern. Suicide rates have also increased significantly since 2010.⁸¹ Per 100,000 adolescents ages 10-14, there has been a 91% increase in boys and a 167% increase in girls⁸². Researchers also recognize that

⁷⁹ Monitoring the Future. (n.d.). *Monitoring the Future: An ongoing study of the behaviors, attitudes, and values of Americans from adolescence through adulthood*. <https://monitoringthefuture.org/>

⁸⁰ Ibid (3)

⁸¹ Haidt, J. (2024). *The anxious generation: How the great rewiring of childhood is causing an epidemic of mental illness*. Penguin Press.

⁸² Ibid (6)

some of these increases could have come from the effects of the pandemic and social distancing. With teens feeling more hopeless and alone they turned to entertainment technology, especially social media to feel connected. Social media in turn fed them harmful content alongside the positive content.

Solution 1A: Colorado should hold social media companies accountable for underage access through inspection, enforcement actions, and penalties.

We propose that Colorado create a program to establish a regulatory framework to ensure that social media platforms prevent access to users under thirteen years of age. Under COPPA—Children’s Online Privacy Protection Act of 1998—the ways that a company can collect personal data about a child are legally limited.⁸³ Therefore, many social media companies have adopted a minimum user age of 13, or have created limits for users under the age of 13. We recognize that these limits are not followed, or enforced, therefore negatively harming the health of these youth. We advise that Colorado require social media companies to:

- Prohibit the creation of an account by individuals under 13 years of age unless with explicit and ensured parental permission via evidentiary age verification, which is not to be obtained through processes such as solving a multiplication equation, or entering a birth year alongside other declaration forms of verification that are easily bypassable.
- Remove accounts that belong to people under 13, unless parental permission is obtained and documented,
- Maintain records of and delete age verification data given through this process.

If the social media platform fails to comply with these guidelines, a notice of violation will be sent to the company, documenting the violation, and requesting proof of correction of the violation. If proof of the correction is not provided, then civil penalties shall be imposed. If the violation continues, additional penalties for failing to comply shall be placed upon the platform in question. A platform that repeatedly fails to comply with these requirements, or willfully violates the compliances, shall be subject to enhanced penalties.

⁸³ Federal Trade Commission. (2013, January 17). *Children's Online Privacy Protection Rule* (16 C.F.R. Part 312). *Federal Register*, 78(12), 3972–4059. <https://www.ftc.gov/system/files/2012-31341.pdf>

Solution 1B: Colorado should require social media platforms to provide youth with the option to opt in or opt out of personalized recommendation algorithms.

We propose that Colorado require social media companies to give users under 18 the option to choose whether personalized recommendation algorithms are used on their accounts. Right now, these algorithms automatically decide what content young people see based on what keeps them scrolling and engaged. Instead, social media platforms should be required to ask youth whether they want this type of personalized content when they create an account and allow them to change their choice at any time in their account settings.

If a user chooses to opt out, the platform should show content in a non-personalized way, such as in chronological order or only from the accounts they choose to follow, instead of recommending posts based on engagement and viewing history. Platforms should also clearly explain what recommendation algorithms are and how they affect the content users see so that youth and parents can make an informed decision.

This idea is similar to Apple's App Tracking Transparency feature.⁸⁴ In 2021, Apple started requiring apps to ask users for permission before tracking their activity across other apps and websites for targeted advertising. Apple did not ban tracking; it gave people the choice whether they wanted to participate. Users can also change that decision whenever they want in their device settings. Colorado can use the same idea by requiring social media companies to let young people choose whether they want personalized recommendation algorithms instead of automatically enrolling everyone.

Giving Colorado youth more control over the algorithms that shape their online experiences can help reduce unhealthy social media use while still allowing young people to enjoy these platforms instead of deciding for them.

Systems thinking

Unintended consequences that we've considered include:

- Users may be at greater risk of data breaches.
- There may be increased public backlash due to concerns about government overreach.
- Some companies may choose not to fully comply with the law and would rather pay out penalties.

⁸⁴ If an app asks to track your activity - Apple Support. (2025, December 19). Apple Support. <https://support.apple.com/en-us/102420>

Problem 2: Teenagers are increasingly vulnerable to the real-life consequences of hate speech, misinformation and political polarization in online spaces.

Adolescents are some of the most frequent users of social media platforms. Screen time among children and adolescents increased from 2.7 hours a day to 4.4 in 2020 as a result of the lockdown and digital schooling, and has remained higher than it was before lockdown.⁸⁵ Adolescents may find refuge from real life in online spaces, meaning those with pre-existing mental health issues are especially privy to the negative effects. Additionally, many internet users have reported that social media is their main source of news, which raises concerns about the impact of misinformation as AI-generated images and videos become more lifelike. Adolescents have less developed decision making abilities and are more vulnerable to the addictive nature of social media platforms.

Online platforms may facilitate bullying and harassment by peers or strangers, social isolation, mental health issues, and could lead to violence against others or self in most extreme cases. In Jefferson County, Colorado, the teenager who shot and critically injured two students at Evergreen High School in September of 2025 had been active in online spaces promoting neo-nazi ideology and communities praising the assailants of the Columbine High School shooting. This activity had been flagged by the Anti-Defamation League six months before the shooting occurred.⁸⁶

The current academic curriculum does not give students the necessary tools to interpret what they see online. The state government cannot control what materials are used or how curriculums are developed. HB21-1103 establishes an online media literacy resource bank, but it does not fully address the problems presented by the modern media landscape and does not adequately prepare educators to teach the provided materials.

⁸⁵ Mori, Y., & Silwal, S. (2026, March 21.) Long-Term Trends in Screen Time Use Among Children and Adolescents: A Systematic Review Including Pre- and Post-COVID Periods. *Child Psychology and Psychiatry*, <https://doi.org/10.1177/13591045261432532>

⁸⁶ Paul, J., & Prentzel, O. (2025, September 12.) Evergreen High School shooter embraced Columbine, antisemitism and white supremacy online. *The Colorado Sun*. <https://coloradosun.com/2025/09/12/evergreen-high-school-shooting-suspect-social-media/>

Solution 2: Colorado should develop and adopt a model framework for media literacy for grades 9-12 for optional use by school districts that includes comprehensive education on social media algorithms, digital citizenship, and online safety.

A model framework will give schools a resource to implement media literacy curriculum that will address the specific needs of today's youth, including instruction on the unique risks of using digital media, such as personalized algorithms, data privacy concerns, and exposure to misinformation. Students will not just be able to identify if content contains misinformation, but also why the creator made the content and why it is being shown to them. Teachers should also have access to educational resources for teaching media literacy.

Outreach

Did not respond after email and phone outreach

** Responded but declined to discuss our proposal*

While researching and writing this proposal, we reached out to:

Government agencies

State

- Colorado Department of Education (Social Media & Communication Manager, Mikaley Osley)
- Colorado Department of Education (Dr. Joanna Bruno, Chief Academic Officer, Student Learning Division)
- Colorado Department of Public Health and Environment Healthy Kids Colorado Survey (Haley Witt Recruitment & Outreach Coordinator)

Local

- Granada School District RE-1: John Hopper, Sociology & Psychology Professor

Organizations that work in this policy area

- Colorado Rural Health and Education Coalition: Dr. Robert Fulton
- Colorado Rural Health and Education Meeting Presentation (will be given on August 25)
- Media Literacy Now: Helen Kelly, Colorado State Advocate

Other subject matter experts

- Superintendent Abby Pettinger, Vilas School District RE-5

Legislators

- State Senator Lindsey Daugherty (Senate District 19)
- State Senator Lisa Frizell (Senate District 2)
- State Senator Nick Hinrichsen (Senate District 3)
- State Senator Rod Pelton (Senate District 35)
- State Senator Robert Rodriguez (Senate District 32)
- State Representative Andrew Boesenecker (House District 53)
- State Representative Dusty Johnson (House District 63)
- State Representative Brianna Titone (House District 27)
- State Representative Yara Zokaie (House District 52)



COYAC Infrastructure Policy Committee

Problem: The sunset clause in COYAC’s enabling legislation does not ensure a sound infrastructure or recognize the permanent value of youth voice in the legislature.

The legislature established COYAC in 2008 with the passage of [HB08-1157](#). This legislation included a sunset clause to re-evaluate the program in 5 years. Legislators renewed COYAC in 2013 ([SB13-148](#)), 2018 ([HB18-1186](#)), and 2023 ([SB23-076](#)). The next sunset review is scheduled for 2028 ([C.R.S. 2-2-1307](#)). However, the sunset clause in COYAC’s enabling legislation does not benefit the program or the Colorado legislature; it prevents permanent infrastructure for the program and creates administrative inefficiencies.

Further, the sunset process itself does not align with the COYAC’s role within the legislature. According to the Colorado Department of Regulatory Agencies (DORA), “a sunset review will generally question the need for regulation to protect the public.”⁸⁷ As recognizing youth voice and providing recommendations to the Colorado State Legislature pose no inherent risk to public safety, the general purpose of a sunset review does not apply to COYAC.

An additional criteria for sunset reviews is “Whether the conditions that led to the initial creation of the program have changed.”⁸⁸ Teens have not disappeared from Colorado; the number of youth ages 15-19 has grown since COYAC’s creation in 2008.⁸⁹ A nonpartisan source of youth voice, examining issues often unique to young people, to advise legislators is valuable to the

⁸⁷ Colorado Office of Policy, Research & Regulatory Reform (COPRRR). (2026, July). *Sunset Reviews*. Colorado Department of Regulatory Agencies (DORA). <https://coprrr.colorado.gov/how-reviews-work/sunset-reviews>

⁸⁸ Ibid.

⁸⁹ Colorado Department of Local Affairs. (n.d., accessed 2026, July). *Population by Age Groups*. <https://gis.dola.colorado.gov/AgeMap/>

state every year. COYAC’s founding mission recognizes this, specifically stating youth will “examine, evaluate and discuss the issues, interests, and needs affecting Colorado youth now **and in the future**” [emphasis added]. The sunset clause fails to recognize the nature of the council’s purpose and impact.

COYAC continues to fulfill this mission, as the 2022 COPRRR Sunset Review found “COYAC provides a valuable service by actively engaging in the legislative process by recommending changes and improvements for issues affecting the youth population in Colorado. COYAC continues to meet regularly and explore issues that would improve the quality of life related to the Colorado youth population.”⁹⁰

The sunset clause also creates additional administrative responsibilities:

- It requires a legislator to use one of their limited bill slots to sponsor COYAC’s renewal.
- The committee hearings and COPRRR sunset review consume significant time and resources that elected officials and state employees could direct toward other initiatives.
- When COYAC members—who are full-time high school students with extracurricular activities, part-time jobs, and families responsibilities—spend time writing and submitting testimony on if the program is necessary and should be continued or repealed, it takes away from their limited COYAC time that they can spend on research and outreach for policies that impact youth statewide.
- COYAC’s adult director already provides program reports and monthly fiscal reports that include the same information found in the sunset review: meeting dates and attendance, current committees/proposals, etc.

The Guide To Engaging Youth In Policy Making, a report by the Forum for Youth Investment in collaboration with the National Conference of State Legislatures (NSCL), lists six keys to creating effective youth councils:

1. Determine Council Membership
2. Ensure a Sound Infrastructure
3. Provide Supportive Work Environment
4. Build Youth Capacity
5. Deepen Youth Motivation
6. Negotiate Opportunities for Access

Since the state legislature created COYAC in 2008, it has set the stage and provided funding to fulfill most of the recommendations in the report. However, missing are two elements from Key 2, Ensure a Sound Infrastructure:

⁹⁰ Colorado Office of Policy, Research, & Regulatory Reform (COPRRR). (2022, October). *2022 Sunset Reviews*. https://leg.colorado.gov/summary_attachments/8892/download

- **“Institutionalize the youth council so that it exists beyond a change in administration.** One way to ensure that the youth council endures over time is to formalize it in legislation and to include a requirement that the council will remain in place regardless of who is in office.”
- **“Authorize the youth council to draft legislation.** To secure the efficacy of a youth council, make sure its structure allows for deep engagement in the policymaking process.”⁹¹

From 2019-2024, legislators on the COYAC interim committee could draft six bills based on students’ recommendations and recommend three bills for introduction. With [SB25-199](#), legislators removed their authority in 2025 and diminished youth engagement in the policymaking process, counter to the recommendation by the Forum for Youth Investment and NCSL.

Legislators from both political parties have expressed support and appreciation for COYAC, even when disagreeing with specific proposals. Yet, COYAC is still subject to renewal through the legislative process every five years. An effective, nonpartisan council should not be subject to political review and debate.

Recognizing the value of enduring youth engagement, many states have programs similar to COYAC that are permanently institutionalized within the state government.

- Currently, these states’ youth advisory councils have enabling legislation without a sunset clause: Hawaii ([HB1716, 2018](#)), Indiana (HEA1162, 2008, now [IC 2-5-29](#)), Iowa ([Iowa Code 216A.140\(8\), 2009](#)), Louisiana (SB46, 2007, now [RS 24:973.1](#)), Maryland ([SB1, 2008](#)), Minnesota ([statute 124D.957, 2013](#)), and Nevada ([SB247, 2007](#)).⁹²
- In Washington State, legislators initially formed the Washington Legislative Youth Advisory Council (LYAC) with a sunset clause, but legislators removed the clause in 2009 ([SB5229](#)).
- Vermont legislators established the Vermont State Youth Council (VSYC) in 2022 ([H.293](#)) and set it to expire in early 2026. Legislators repealed the sunset clause ([H.439, 2025](#)) after VSYC members recommended making the council permanent.

⁹¹ Martin, S., Pittman, K., Ferber, T., & McMahon, A. (2007 July). *Building Effective Youth Councils A Practical Guide To Engaging Youth In Policy Making*. The Forum for Youth Investment. <https://forumfyi.org/knowledge-center/building-effective-youth-councils-a-practical-guide-to-engaging-youth-in-policy-making/>

⁹² Geddes, Isabel. (2025, September). *Participation in Practice: A Human Rights Analysis of Youth Councils in the United States*. <https://docs.google.com/spreadsheets/d/1zJdzP4ofsb4RPeRgUsNvJeNgiGToKy2U/edit?gid=361594806#gid=361594806>

Colorado's maintenance of a COYAC sunset clause is an outlier at the national level, as most legislatures with youth councils have created stable infrastructure for their programs.

Solution: Remove the sunset provision to prioritize youth voices through permanent infrastructure.

In [C.R.S. 2-2-1307](#), remove the sunset clause to make COYAC a permanent part of the State Legislature instead of a temporary program. This would institutionalize COYAC so that it exists beyond a change in elected officials and recognize the permanent value of youth voice in the legislature.

Before she died, Senator Faith Winter discussed running a bill during the 2026 session to remove the sunset clause from COYAC's enabling legislation.

Systems thinking

Unintended consequences that we've considered include:

- Youth sometimes make recommendations that elected officials dislike or disagree with.

Outreach

While researching and writing this proposal, we reached out to:

- State Senator Faith Winter, Senate District 25
- Sarah Moss, Executive Director, Colorado Youth Advisory Council