

Testimony in Support of H.817
Justin Pinard, Vermont School Counselors Association
House Health Care Committee – February 27, 2026

My name is Justin Pinard. I currently work as a School Counselor at The Center for Technology, Essex and sit as the Public Relations Chair with the Vermont School Counselor Association (VTSCA). I also want to note that I have worked as a School Counselor in several Supervisory Unions around Vermont such as Franklin Northeast, Franklin West, and Chittenden County and have supervised many youth groups within those schools.

Thank you for the opportunity to testify. School Counselors in Vermont support students' academic, college/career, and social/emotional development, while working to ensure that schools are places where students can learn, thrive, and succeed. We work closely with families, educators, and administrators to support academic, career, and college planning, remove barriers to learning, and play a vital role in fostering a positive, equitable, and restorative school climate.

We often serve as the first trusted adult a student turns to when they are struggling. We provide ongoing support related to anxiety, depression, trauma, grief, peer conflict, and family stress, while also identifying early signs of more significant concerns. We regularly respond to issues such as chronic absenteeism and escalating emotional distress, working with students and families to understand underlying factors and connect them with appropriate systems of support. Through prevention, early intervention, and coordinated response, School Counselors play a crucial role in keeping students engaged, safe, and connected to their school community.

Overall, I am supportive of H.817 and its intent as it closely aligns with the work School Counselors do to strengthen protective factors and increase mental health awareness within schools. I am particularly encouraged by the bill's focus on mental health literacy training for all school personnel and its clear language stating that participation is optional and does not require the adoption of a specific curriculum. Ensuring that educators and school personnel receive current and relevant mental health literacy training is a crucial step toward creating more supportive school environments. From my experience, the more knowledgeable and informed we as adults are about mental health, the more effective and proactive we can be in recognizing concerns early, responding with empathy and appropriate boundaries, and helping students access resources when needed. This shared understanding helps normalize conversations about mental health, reduce stigma, and strengthen the overall safety net for students.

Finding connection and a sense of belonging are two critical protective factors for our youth when it comes to their mental health and well-being. This is one of the main reasons I am in support of various student-centered groups within schools. Allowing students space to connect with each other for support, especially within a structured program, can foster leadership skills, and give students a sense of empowerment, while strengthening the school community itself.

Although not exactly the same as the proposed peer-to-peer mental health program, I have witnessed firsthand, from supervising other types of mentorship groups, how effective they can be for middle and high school students. Students get 1:1 attention from another student, they build communication skills, they learn how to connect with someone, they learn perspective

taking, empathy or compassion, they learn how to actively listen, they may get to plan activities, they get to give back to their school community, and they can get a newfound sense of purpose. Space away from adults to interact with each other can potentially bolster more authentic sharing with one another. Students often feel more comfortable with other students and can relate to them in different ways. Having a support program that is peer-to-peer, can be beneficial to our youth.

Successful implementation will depend on a thoughtful, strategic, and purposeful structure along with strong guardrails. I appreciate that the bill places oversight and guidance with the Department of Mental Health and emphasizes developmentally appropriate approaches. Peer-to-peer programs raise important considerations related to safety, liability, confidentiality, professional boundaries, clinical skills, mandated reporting, and the emotional burden potentially placed on student mentors. Peer programs should never position students as responsible for managing serious mental health or substance use crises. H.817's language stating that peer-to-peer programs must be supportive and non-clinical and must not replace services provided by licensed or certified mental health professionals is critical and should be preserved. Clear expectations, adult supervision, and strong referral pathways to school counselors and other professionals are essential components of safe implementation.

If supervision is broadened to include designated school personnel who may not be licensed mental health professionals, it is imperative that those adults be required to receive mental health literacy training prior to overseeing a peer-to-peer group. I also strongly recommend that any youth participating in a peer-to-peer program should also be given developmentally appropriate mental health literacy training. That way they will be better equipped with at least basic knowledge and skills related to mental health, safeguards, confidentiality, boundaries, etc. as well as an awareness of school/community resources to support themselves and others, if more intense topics or emotions arise. A clear, concise, and tiered framework for both mental health literacy training and peer-to-peer programs will be essential to ensuring consistency, safety, and effectiveness across school settings.

Overall, I support what this bill seeks to accomplish and appreciate its careful and flexible approach. By keeping participation optional, emphasizing nonclinical peer support, prioritizing mental health literacy (for both students and adults), ensuring protective factors, H.817 offers schools an additional tool to strengthen student well-being. With appropriate guidance and safeguards in place, this legislation can meaningfully support Vermont's youth while respecting the diverse needs and capacities of school communities across the state.

On a final note, VTSCA supports H.618 which would ensure that Master's Level School Counselors have the capacity (80% of their time) to provide student services. School Counselors are being accessed for other services or duties, including administrative tasks, substituting, etc., which pulls them away from supporting students' academic achievements, college/career pathways, and social/emotional or mental health needs. H.618 would only increase the strength and effectiveness of H.817 by allowing more capacity for School Counselors to provide support for mental health literacy and peer-to-peer programming. I am hoping you would consider merging the two bills to further enhance the support systems for our state's youth. Thank you again for your time, consideration, and taking steps to address the mental health needs facing our students and families.