

Welcome!

Recovery Must Not Leave Young Adults Behind

Icebreaker in the chat:

Name, office/organization, and what pandemic hobby will you keep after the pandemic is over OR what do you most want to learn about today?

Playlist courtesy of Rashaun Bennett,
NYEC



American Youth
Policy Forum

Partners

The Economic Recovery for Young Adults Series is hosted by the American Youth Policy Forum, in Partnership with the Brookings Institute Metropolitan Policy Program, the Center for Law and Social Policy, the Center on Budget and Policy Priorities, The Corps Network, the Forum for Youth Investment, Heartland Alliance, Jobs for the Future, the National Network for Youth, the National Youth Employment Coalition, Opportunity Youth United, the Reconnecting Youth Campaign, and YouthBuild USA

People

Dr. Stephanie McGencey (American Youth Policy Forum)

Thomas Showalter (American Youth Policy Forum)

David Baker (NN4Y National Youth Advisory Council, YMCA of San Diego County)

Rachael Kauss (Senate Finance Committee, Majority Staff)

Dr. Kimberly Hoagwood (New York University Langone Health)

Lenny Bell or Matt Connelly (Des Moines Area Community College YouthBuild)



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Our Time Together Today

Introduction

Panel Dialogue

Q&A

Small-Group Conversation

Close



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Policy Forum



Dr. Stephanie McGencey

American Youth Policy Forum





David Baker

NN4Y National Youth Advisory Council, YMCA of San Diego County





Rachael Kauss

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NYU Langone Health





Lenny Bell

Des Moines Area Community College YouthBuild





HASSENFELD
**CHILDREN'S
HOSPITAL**
AT NYU LANGONE

Youth Mental Health and COVID

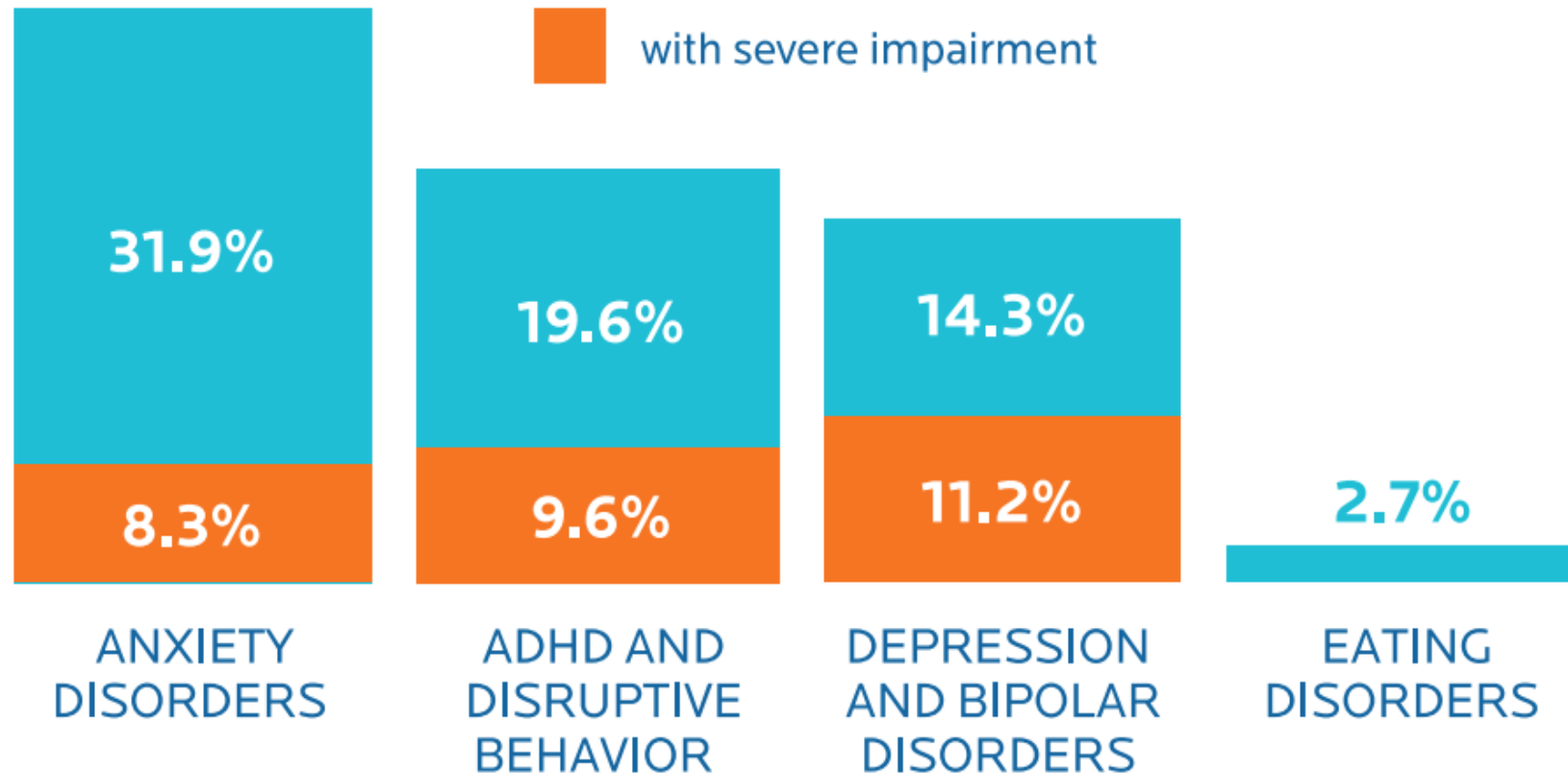
For the American Youth Policy
Forum, May 20, 2021

Kimberly Eaton Hoagwood, PhD

Cathy and Stephen Graham
Professor

Department of Child and Adolescent
Psychiatry, NYU Langone Health

Most Common Mental Health Disorders in Youth

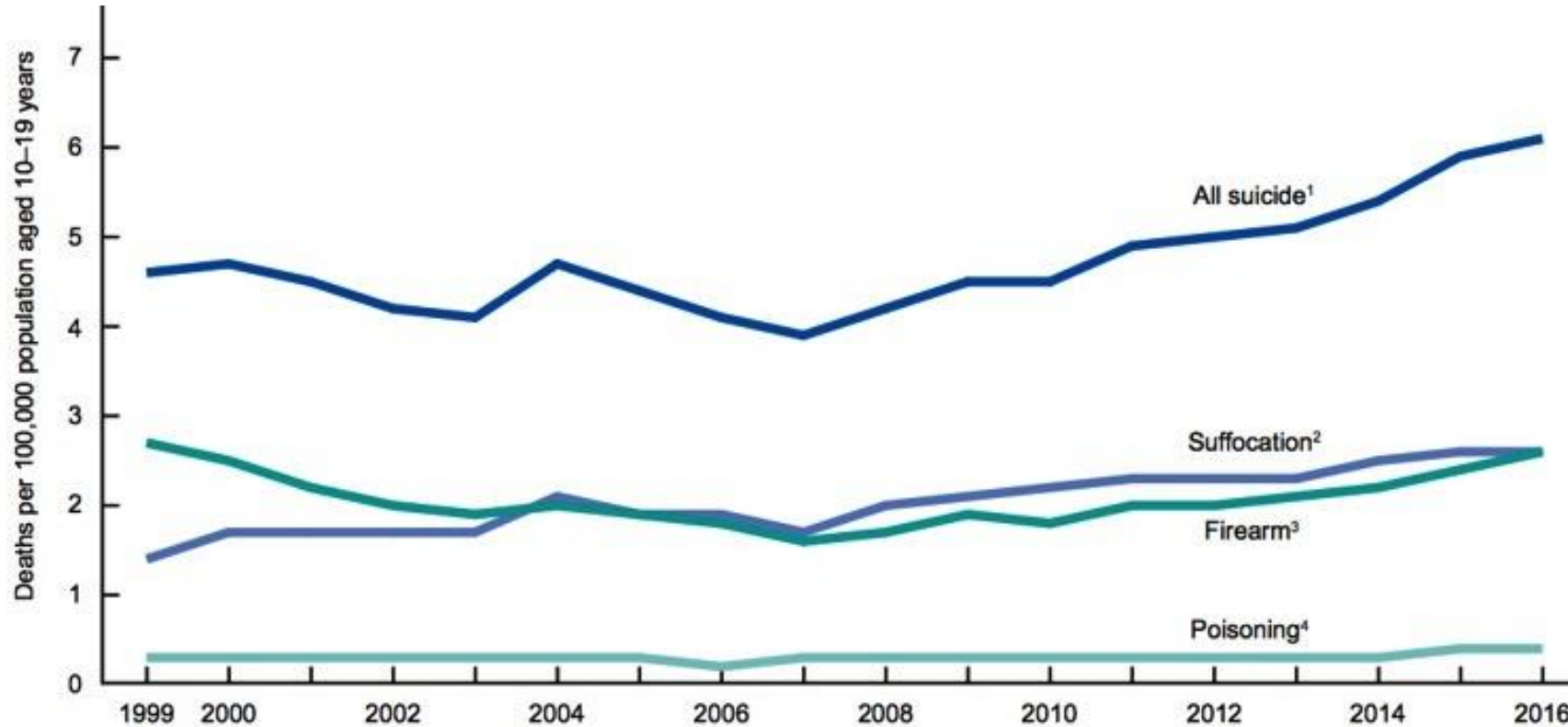


Adolescent Mental Health Pre-COVID

- Prevalence of Mental, Emotional and Behavioral Disorders [3]
 - Prevalence of anxiety disorders in adolescents: 32%
 - Behavior disorders 19.1%
 - Depression 14.3%
 - **Substance disorders: 11.4%**
 - **Co-morbidity: 40%**
 - 6,200 suicide deaths in 2017 among U.S. adolescents and young adults from 15 to 24 years of age
 - **Suicide:** second leading cause of death among individuals 10–34 years of age

Trends in Youth Suicide Rates: 1999-2016

Deaths per 100,000, ages 10-19



¹Significant decreasing trend from 1999–2007; significant increasing trend from 2007–2016, $p < 0.05$.

²Significant increasing trend from 1999–2016, $p < 0.05$.

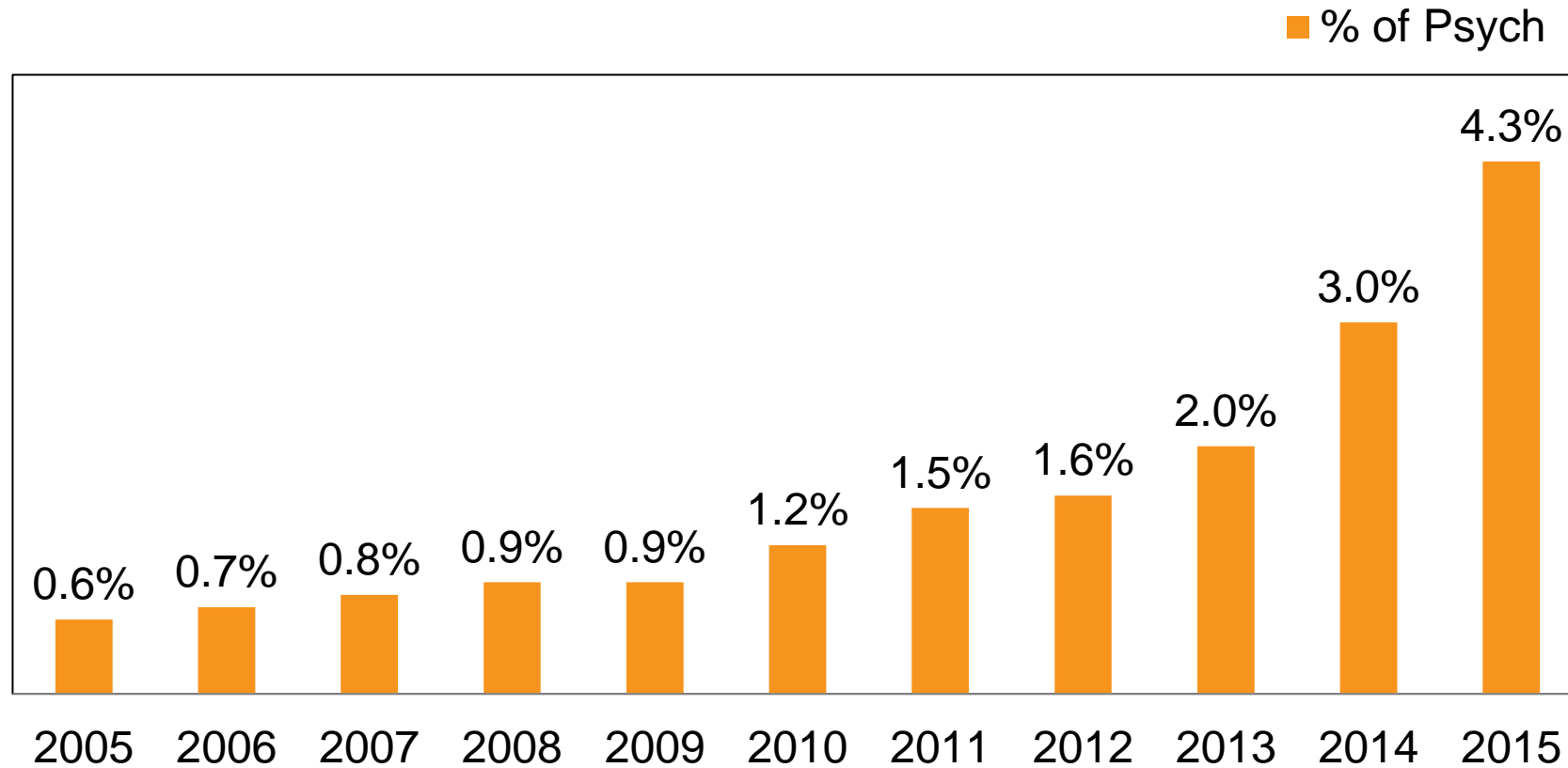
³Significant decreasing trend from 1999–2008; significant increasing trend from 2008–2016, $p < 0.05$.

⁴Significant increasing trend from 1999–2016, $p < 0.05$.

NOTES: Suicide deaths are identified with *International Classification of Diseases, Tenth Revision* (ICD-10) codes *U03, X60-X84, and Y87.0; suicide deaths involving firearms with codes X72-X74; suicide deaths involving suffocation with code X70; and suicide involving poisoning with codes X60-X69.

SOURCE: NCHS, National Vital Statistics System, Mortality. [4]

Trends in Psychiatric-Related Emergency Department Visits by Youth (% of all visits, 2005-2015)



Source: Zima B, et al (2016). Psychiatric Disorders and Trends in Resource Use in Pediatric Hospitals. *Pediatrics*. 138. e20160909-e20160909. 10.1542/peds.2016-0909

Post-Pandemic Impact on Anxiety & Depression

- JAMA (September 2020) showed **depression rates more than tripled post-pandemic (8.5 % reporting symptoms pre-pandemic to 27.8 percent during the pandemic)** [7]
- A CDC and Prevention Survey (December 2020) found **42%** of Americans were experiencing symptoms of anxiety or depression (**up from 11%** pre-pandemic) [7]
 - Unmet need largest among **young adults** aged 18–29 years and those with less than a high school education [8]
- Young people with pre-existing behavior problems are **2x more likely to exhibit behavior problems** of increased intensity and frequency **during the pandemic.** [9]
- **School closures means lack of access to resources.** [10]

Homelessness: Before COVID

Homelessness Before COVID

- More than 35,000 youth experiencing homelessness on any given night in the United States [12]
- These youth also have high rates of psychiatric disorders and substance use [12]
- Population Prevalence: 9.7% of 18- to 25-year-olds self-reported homelessness and/or couch surfing in the last 12 months (2017) [13]
- Higher risk of homelessness among young parents; black, Hispanic, and lesbian, gay, bisexual, or transgender (LGBT) youth; and those who did not complete high school [13]

Homelessness After COVID

- 2.2.% overall increase from 2019 to 2020 [14]
- Link between race and ethnic disparities in homelessness system (78% of homeless families identify as non-White or Hispanic) and similar disparities in COVID-19 mortality rates also disproportionately higher in racial minority groups [15]
- In one study of homeless youth, participants indicated [12] :
 - it was now harder to meet one or more of their basic needs, particularly getting enough food to eat (54%),
 - Harder to get case management (42%),
 - Harder to get mental health (44%) and substance use (32%) services.

Rising Mortality Rates Among Young Adults

- National Academies of Sciences, Engineering, and Medicine: High and Rising Mortality Rates Among Working Age Adults. <https://www.nap.edu/catalog/25976/high-and-rising-mortality-rates-among-working-age-adults>
- Increase in premature death among young adults, all racial and ethnic groups, and both rural and metropolitan areas.
- Much higher than in other developed countries
- “The most troubling themes in our report — higher mortality than our peer countries; major racial and ethnic, socio-economic, and geographic disparities; lack of access to health insurance and care — have all been exacerbated by the pandemic.” Kathleen Harris

Promising Developments for Youth and Young Adults

- A large and growing body of evidence on effective community-based programs to prevent and treat mental health problems and promote wellness
- State-wide training programs to support mental health
- System-wide programs ready for scaling
- Accountability measures exist to track system progress
- Rise in youth peer-to-peer services and credentialing

Number of States with Youth Peer Advocate Services

Total Number of States (Including District of Columbia) that offer Family Peer and Youth Peer Support Services				
Neither	Family Peer Only	Youth Peer Only	Both Family and Youth Peer	Total
18	15	2	16	51

Youth Peer Support: Credentialing Process for States
States with YPS Credentialing Process
18

Advocates Credentialed In New York State		
Family Peer Advocates	Youth Peer Advocates	Total
364	97	461

[18], [19],[20]

Youth Peer Advocate “Core” Training

Level 1 (online modules):
Introduction to YPA Role
Developing Self-Efficacy Skills
Cultural Competence
Professional Expectations
Small Group Facilitation
Navigating the System
Documenting Your Work

Level 2: online + in-person + coaching calls	
Introduction to level 2	Social Systems (2 parts)
Education into career	Marginalized populations
In-Person Training (2 Days)	
<ul style="list-style-type: none"> • Working in alignment with YPA values • Learning more about the YPA role • Practicing skills to build positive relationships • Youth-guided practices and empowerment • Explaining the YPA role to others • Cultural competence • Creating safe spaces • Partnership-building s • Professional expectations and the YPA code of ethics • Self-care and opportunities for support and collaboration 	
Coaching Calls (5 groups calls)	

Continued Education (20 Hour requirement)

Some Straightforward Strategies

SIMPLE

COVER THE KIDS
(What is wrong with us?)

Expand insurance coverage for youth

- Extend Medicaid to at least 21 for all youth, not just foster and SSI
- Extend Medicaid to those without parents who are homeless, incarcerated or otherwise unable to provide an address
- Extend Medicaid to youth immigrants

SIMPLER

COMMUNITIES
CARE FOR KIDS

Expand training in recognizing and caring for youth mental health to more providers and settings

- Promote provision of evidence based care by various professionals (eg teachers, community health workers)
- Allow provision of evidence based care in various settings (eg YMCA, community health centers)
- Allow and reimburse for group and online services with evidence

SIMPLEST

KIDS CARE FOR KIDS

Empower youth: Provide health promotion and prevention services

- Innovative service and community
- Expand service and community opportunities for youth
- Expand training and credentialing
- Expand peer counseling services
- Expand online forums

References

- [1] Institute, C. M. (n.d.). *What's the tie between mental health and juvenile justice?* Speak Up For Kids Mental Health Report. <https://childmind.org/2015-childrens-mental-health-report/>
- [2] Merikangas, K. R., He, J.-ping, Burstein, M., Swanson, S. A., Avenevoli, S., Cui, L., Benjet, C., Georgiades, K., & Swendsen, J. (2010). Lifetime Prevalence of Mental Disorders in U.S. Adolescents: Results from the National Comorbidity Survey Replication–Adolescent Supplement (NCS-A). *Journal of the American Academy of Child & Adolescent Psychiatry*, 49(10), 980–989. <https://doi.org/10.1016/j.jaac.2010.05.017>
- [3] Kalin NH. Anxiety, Depression, and Suicide in Youth. *Am J Psychiatry*. 2021 Apr 1;178(4):275-279. doi: 10.1176/appi.ajp.2020.21020186. PMID: 33789454.
- [4] Centers for Disease Control and Prevention. (2018, October 3). *Products - Data Briefs - Number 330 - September 2018*. Centers for Disease Control and Prevention. <https://www.cdc.gov/nchs/products/databriefs/db330.htm>.
- [5] Zima, B. T., Rodean, J., Hall, M., Bardach, N. S., Coker, T. R., & Berry, J. G. (2016). Psychiatric Disorders and Trends in Resource Use in Pediatric Hospitals. *Pediatrics*, 138(5). <https://doi.org/10.1542/peds.2016-0909>
- [6] Centers for Disease Control and Prevention. (2020, September 3). *ADHD Throughout the Years*. Centers for Disease Control and Prevention. <https://www.cdc.gov/ncbddd/adhd/timeline.html>.
- [7] Staff, A. O. L. (2021, May 18). *Back to normal? Psychologists warn the pandemic could have lasting effects*. Click here to refresh. <https://www.aol.com/lifestyle/back-normal-psychologists-warn-pandemic-203131294.html>.
- [8] Centers for Disease Control and Prevention. (2021, April 1). *Symptoms of Anxiety or Depressive Disorder and Use of Mental Health Care Among Adults During the COVID-19 Pandemic - United States, August 2020–February 2021*. Centers for Disease Control and Prevention. <https://www.cdc.gov/mmwr/volumes/70/wr/mm7013e2.htm>.
- [9] Nearchou, F., Flinn, C., Niland, R., Subramaniam, S. S., & Hennessy, E. (2020). Exploring the Impact of COVID-19 on Mental Health Outcomes in Children and Adolescents: A Systematic Review. *International journal of environmental research and public health*, 17(22), 8479. <https://doi.org/10.3390/ijerph17228479>

References

- [10] Lee, J. (2020). Mental health effects of school closures during COVID-19. *The Lancet Child & Adolescent Health*, 4(6), 421. [https://doi.org/10.1016/s2352-4642\(20\)30109-7](https://doi.org/10.1016/s2352-4642(20)30109-7)
- [11] Whitney DG, Peterson MD. US National and State-Level Prevalence of Mental Health Disorders and Disparities of Mental Health Care Use in Children. *JAMA Pediatr*. 2019.
- [12] Tucker, J. S., D'Amico, E. J., Pedersen, E. R., Garvey, R., Rodriguez, A., & Klein, D. J. (2020). Behavioral Health and Service Usage During the COVID-19 Pandemic Among Emerging Adults Currently or Recently Experiencing Homelessness. *The Journal of adolescent health : official publication of the Society for Adolescent Medicine*, 67(4), 603–605. <https://doi.org/10.1016/j.jadohealth.2020.07.013>
- [13] Morton, M. H., Dworsky, A., Matjasko, J. L., Curry, S. R., Schlueter, D., Chávez, R., & Farrell, A. F. (2018). Prevalence and correlates of youth homelessness in the United States. *Journal of Adolescent Health*, 62(1), 14-21.
- [14] *New Report Shows Rise in Homelessness in Advance of COVID-19 Crisis*. National Alliance to End Homelessness. (2021, March 18). <https://endhomelessness.org/new-report-shows-rise-in-homelessness-in-advance-of-covid-19-crisis/>.
- [15] The 2020 Annual Homeless Assessment Report (AHAR) to Congress. huddler.gov. <https://www.huduser.gov/portal/sites/default/files/pdf/2020-AHAR-Part-1.pdf>. Published January 2021. Accessed May 17, 2021.
- [16] *Prisoners in 2019*. Bureau of Justice Statistics (BJS). (n.d.). <https://www.bjs.gov/index.cfm?ty=pbdetail&iid=7106>.
- [17] *Juvenile Justice Is Smaller, but More Unequal, After First Year of COVID-19*. The Annie E. Casey Foundation. (n.d.). <https://www.aecf.org/blog/juvenile-justice-is-smaller-but-more-unequal-after-first-year-of-covid-19/>.
- [18] Schober, M. and Baxter, K. (2020). *Medicaid Funding for Family and Youth Peer Support Programs in the United States*. Technical Assistant (TA) Network.
- [19] Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS) (2020). *State-by-State Directory of Parent Peer Support Training and Certification Programs*. Substance Abuse and Mental Health Services Administration.
- [20] Kaufman, L., Kuhn, W.B., Manser, S.S. (2017) *Peer Specialist Training and Certification Programs: A National Overview*. Texas Institute for Excellence in Mental Health, School of Social Work, University of Texas at Austin.

Small-Group Conversation

Groups of five, seven minutes

Confidential interaction among participants

Build new connections

Guiding questions:

- What questions remain after this conversation?
- How is your office/organization engaging in this work now?



American Youth
Policy Forum

Save the Date

*What Does Recovery Mean in Community?
Meetings with Local Practitioners and Young
Leaders*

At the All Youth Connecting Forum

June 24, 3-5 p.m. EDT



American Youth
Policy Forum