

Addressing The Teen Mental Health Crisis in Dane County

Building Protective Factors to Enhance Social Connectedness and
Prevent Adverse Mental Health Outcomes

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Scope

The goal of this report is to present key research and data regarding teen mental health in Dane County and posit recommendations to address and support teen mental health in Dane County.

Summary of Recommendations

1. Increase the current funding for the 15 youth centers funded through the Department of Human Services at an additional \$5,000 dollars per youth center per year. Also, recommend that the Department of Human Services monitor the development of future youth centers in Dane County and fund accordingly in coming years.
 2. Recommend the Department of Human Services collaborate with community partners such as Public Health Madison and Dane County, NAMI Dane County, and school districts to implement a Seize The Awkward Media Campaign to elevate current county resources dedicated to teen mental health, encourage peer support, and destigmatize mental health care.
 3. Recommend the Department of Human Services explore the feasibility of participating in community conversations with stakeholders such as school districts, NAMI Dane County, the Healthy Kids Collaborative, Safer Communities, and other community-based organizations and providers regarding the implementation of Sources of Strength throughout Dane County.
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Current Services Provided By Department of Human Services

The Dane County Department of Human Services (DHS) funds \$5,556,668.00 of youth mental health-related services throughout Dane County. Services include In-Home Therapy for Youth 0-12 Years, In-Home Family Counseling for Adolescents 12-17 years, Oasis Family Sexual Abuse Treatment, Steps to Success Day Treatment, Outpatient Counseling/ Family Based Services, Targeted Case Management, Psychiatry/Prescriber Treatment, Adolescent Substance Use Disorder Assessment/Brief Intervention, Brief Treatment, Adolescent AODA Treatment, Youth Court Order Evaluation-Children, and Building Bridges. All services provided by the Department of Human Services fill important gaps of service for youth in Dane County.

Currently, there are limited services provided by the Dane County Department of Human Services to address the gap in preventative, mental health promotion services for teen mental health in Dane County.

Teen Mental Health Definition

The report defines “Teen Mental Health” as the ability of all teens in Dane County to thrive and be the most authentic version of themselves in a community that values them and makes them feel like they belong and are supported through the hard moments of life [1,2].

Protective Factors

The report focuses on social factors that can be strengthened and aid as protective factors in helping promote positive teen mental health outcomes. Protective factors are factors that make it less likely that individuals experience adverse mental health outcomes. Protective factors may be biological, psychological, or social factors in the individual, family, and the environment [2]. The goal of the recommendations outlined in this report is to increase protective factors such as social connectedness, having a trusted adult connection, belonging, reducing stigma, and creating safe spaces for youth of different identities. Research indicates that as protective factors increase, risk factors decrease.

LGBTQ+ youth are at a higher risk of experiencing adverse mental health outcomes due to discrimination and being isolated by their peers. Research from a

scoping review indicated interpersonal and community protective factors from peers are associated with reduced odds of self-injury and reduced odds of suicidal thoughts, symptoms, and attempts. These factors included close friendships and supportive peer relationships. Additionally, Gay-Straight Alliances in schools were noted as an important factor [3,4].

A systematic review of risk and resilience factors for transgender and gender-nonconforming youth found that social support was associated with psychological resilience. Additionally, the study found school belonging was associated with lower mental health concerns among youth. Also, the use of a child’s chosen name was associated with lower depression, suicidal ideation, and suicidality [5].

Immigrant youth benefit when they are able to maintain a strong cultural connection to their country of origin and have social support from friends, schools, and neighborhoods where youth make new friendships [6].

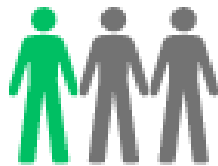
Overall, strengthening protective factors for youth through increased social connectedness and anti-stigma work is associated with better mental health outcomes for youth; with youth experiencing the highest level of adversity

benefitting the most from protective factors at school and in the community [7,8].

National Data

Over the course of the pandemic, youth mental health declined across the nation. According to published results from the Adolescent Behaviors and Experiences Survey (ABES) released by the CDC,

“More than 1 in 3 high school students experienced poor mental health during the pandemic and nearly half of students felt persistently sad or hopeless.”



Additionally, disparities exist within the high school population, as female students and those who identify as lesbian, gay, bisexual, other, or questioning are experiencing disproportionate levels of poor mental health and suicide-related behaviors [9].

Dane County Youth Assessment

Extensive research was conducted to review and obtain local data, identify a target population for the report, review evidence-based practices, and identify strategies to address the poor mental health outcomes of high school youth as outlined in the Dane County Youth Assessment [10].

In Dane County, there are high rates of distress among the youth population with the highest level of distress disproportionately affecting youth with

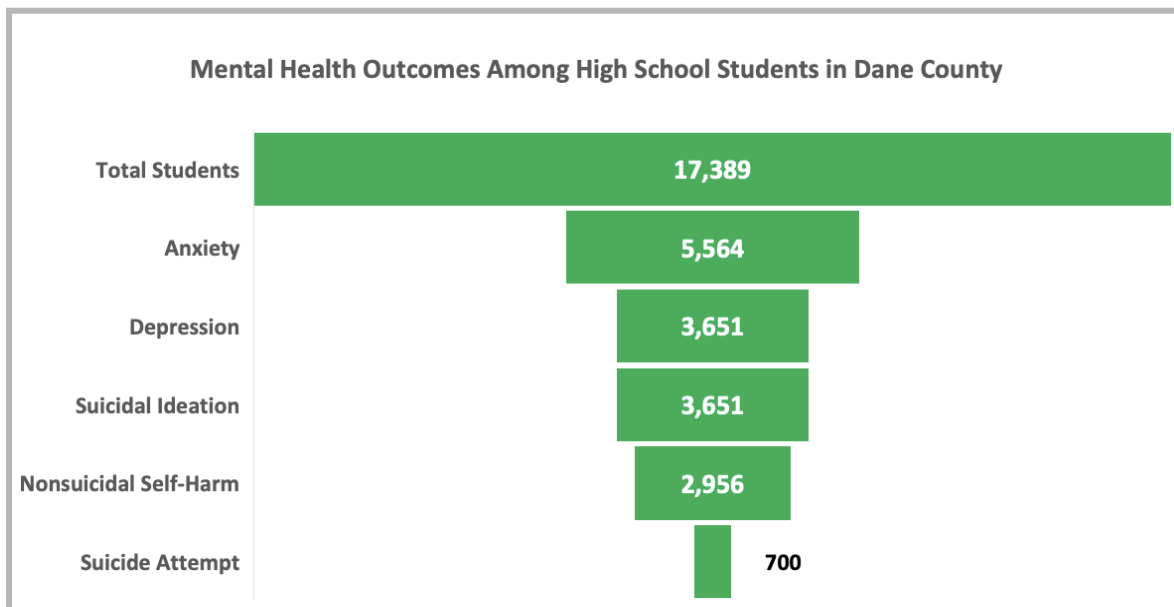
marginalized identities. The data showed high school students collectively carried the highest burden of mental health struggles among teens. As such, the report focuses on high school students.

High school data from the Dane County Youth assessment demonstrated that students with historically marginalized identities (e.g., **Students of Color, female students, and members of the LGBTQ+ community**) are experiencing the largest burden of adverse mental health outcomes. Students experience a higher burden of poor mental health outcomes when they hold multiple historically oppressed identities, as the discrimination they may experience is multifaceted [11]. Although the report provides recommendations for high school youth, it is important to note that disparities within the general high school population exist.

(Based on Dane County Youth Assessment Data [10])

High School Students are experiencing higher proportions of poor mental health outcomes compared to Middle School students.

- Overall, about 5,564 high school youth report experiencing anxiety, about 3,651 high school youth report experiencing depression, about 3,651 high school youth report experiencing suicidal ideation, about 2,956 high school youth report experiencing nonsuicidal self-harm, and about 700 youth report suicide attempts (See chart below).



Low/Lowest income students are experiencing the highest proportions of poor mental health outcomes compared to other middle, high, and higher-income students.

- The lowest-income youth reported the highest prevalence of suicidal ideation, suicide attempt, and nonsuicidal self-harm compared to middle, high, and higher-income students. Additionally, students were asked how they believed others perceived their race, with the options white, BIPOC, and unsure. The lower and lowest income group reported the highest perception of other people seeing them as BIPOC and being unsure of other people's perceptions of them.

LGBTQ+ Youth are experiencing the highest proportions of poor mental health outcomes compared to their Straight/Heterosexual peers.

- Gay, Lesbian, Bisexual, Pansexual, Asexual, and Questioning youth experience a significantly higher burden of adverse mental health outcomes compared to their Straight/Heterosexual peers. Gay, Lesbian, Bisexual, Pansexual,

Asexual, and Questioning youth were over 3x as likely to report experiencing depression, about 3x as likely to report suicidal ideation, and over 3.5x as likely to report nonsuicidal self-harm compared to their straight heterosexual peers. This is similar to the 3x prevalence for Gay, Lesbian, Bisexual, Pansexual, Asexual, and Questioning youth who were about 2x as likely to report experiencing depression.

- Trans/not sure youth were 2.5x as likely to report depression, 2x as likely to report anxiety, about 2.5x as likely to report suicidal ideation, about ~2x as likely to report suicide attempts, and over 3x as likely to report nonsuicidal self-harm compared to non-Trans youth. Nonbinary, gender fluid, and other youth were over 4x as likely to report depression, over 3.5x as likely to report anxiety, about 4x as likely to report suicidal ideation, about 7.5x as likely to report a suicide attempt, and over 5.5x as likely to report

nonsuicidal self-harm compared to male-identifying youth.

Female High School Students are the largest categorical group of students experiencing poor mental health outcomes.

- Female-identifying youth were 2.5x as likely to report depression, about 2.5x as likely to report anxiety, over 1.5x as likely to report suicidal ideation, about 2.5x as likely to report a suicide attempt, and over 2x as likely to report nonsuicidal self-harm compared to male-identifying youth.

Multiracial & BIPOC students are experiencing the highest proportion of poor mental health outcomes among racial categories.

- Racial groups reported disparate adverse mental health outcomes. Race was correlated with income, not gender identity or sexual orientation. Multiracial youth reported the highest level of anxiety, depression, suicidal ideation, and suicide attempts.

Recommendations

The goal of the recommendations is to increase protective factors and boost factors that are associated with promoting positive mental health outcomes. Research indicates that protective factors have the potential to lower population-level indicators of mental distress such as the prevalence rates of anxiety, depression, suicidal ideation, and suicide attempts. By investing in upstream approaches to address the teen mental health crisis in Dane County, the

Dane County Department of Human Services can support the needs of youth throughout the county. The recommendations are listed in order of priority.

RECOMMENDATION 1: *Increase the current funding for the 15 youth centers funded through the Department of Human Services by an additional \$5,000 dollars per youth center per year. Also, recommend that the Department of Human Services monitor the development of future youth centers in Dane County and fund accordingly in coming years.*

Currently, Dane County funds nine youth resource centers in Madison and six youth resource centers in the greater Dane County area. This includes youth centers in Cambridge, Deerfield, McFarland, Oregon, Stoughton, and Middleton. These centers provide a wide range of services for youth. Currently, the County allocates about \$158,000 to all youth resource centers in the county.

Research indicates buildings dedicated spaces for youth to be themselves and come together to build community increases their social connectedness [12]. Social connectedness is important for the adolescent brain and can promote positive mental health outcomes for youth [13]. Additionally, centers provide spaces for teens to contribute to their community in empowering, engaging, and meaningful ways which can improve their mental health [13].

Recently, EQT By Design led a community engagement study in the City of Fitchburg to gather community feedback from

community members and teens from Fitchburg and surrounding communities in Dane County [14] to assess the feasibility and need for a youth center in the Fitchburg area. Data from the community survey indicated that 81% of BIPOC respondents, 83% of LGBTQ+ respondents, 80% of respondents that engage with teens/youth, and 80% of respondents identifying as female indicated they know someone who would be somewhat likely or very likely to utilize the Teen Center. Additionally, the third most valued aspect of the Teen Center was Health/Mental ranked by the Teen Survey [14]. From the preliminary report, funding was a top barrier to creating the center. Therefore, encouraging the Dane County Department of Human Services to monitor and invest in future youth centers is key to supporting positive mental health outcomes of youth from different backgrounds living in various parts of the county.

RECOMMENDATION 2: *Recommend the Department of Human Services collaborate with community partners such as Public Health Madison and Dane County, NAMI Dane County, and school districts to implement a Seize The Awkward Media Campaign to elevate current county resources dedicated to teen mental health, encourage peer support, and destigmatize mental health care.*

Seize The Awkward is a national media campaign by the Ad Council in partnership with The JED Foundation and the American Foundation for Suicide Prevention that aims to teach and encourage young people (ages 16 - 24) about how to talk with their friends about mental health and how to take care of their own mental health [15]. The campaign

provides partners with a toolkit for how to launch their own campaign [16]. The toolkit is free to download and provides best practices for implementation. Potential Partners could be Public Health Madison and Dane County and other local coalitions working to improve youth mental health outcomes.

RECOMMENDATION 3: *Recommend the Department of Human Services explore the feasibility of participating in community conversations with stakeholders such as school districts, NAMI Dane County, the Healthy Kids Collaborative, Safer Communities, and other community-based organizations and providers regarding the implementation of Sources of Strength throughout Dane County.*

Peer-to-peer support programming in high schools across Wisconsin and in comparable counties has proven effective at supporting teen mental health. Two evidence-based programs currently implemented in high schools in Wisconsin are Hope Squad and Sources of Strength training. According to the Wisconsin Safe and Healthy Schools Center, attending school is an important protective factor for students that fosters belonging and puts students in contact with trusted adults.

Through conversations with community organizations, there appears to be interest in pursuing Sources of Strength at high schools throughout Dane County. Sources of Strength is an evidence-based suicide prevention program that uses peer leaders to enhance protective factors associated with reducing suicide across a school population showing effectiveness in both preventative upstream and intervention

outcomes in high school students [17,18]. Sources of Strength is listed on the National Best Practices Registry by the Suicide Prevention Resource Center and The American Foundation for Suicide Prevention. Additionally, Sources of Strength is listed as a recommended evidence-based practice for peer norm programs in schools to improve school norms and beliefs surrounding suicide prevention and help seeking behaviors in the 2017 CDC report, Preventing Suicide: A Technical Package of Policy, Programs, and Practices [19]. This program is currently

being implemented in Hortonville High School in Wisconsin as part of a comprehensive approach to high school youth mental health promotion. The program has demonstrated positive benefits from implementation including more adults and peers trained to support youth in distress, more conversations about mental health in school, an increased sense of belonging, and having a trusted adult at school [20]. These programs can be adapted to serve different demographic groups throughout a school.

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