

## RESULTS FROM MDHHS-CAHS SBHS EVALUATION <sup>iv</sup>

### MENTAL HEALTH NEED WAS HIGHER THAN NATIONAL RATES

- 38% reported issues with anger
- 31% reported depression and/or hopelessness
- 25% reported anxiety or fearfulness

### GIRLS ARE AT HIGHEST RISK

- 42% reporting issues with anger
- 38% reporting depression and/or hopelessness
- 30% reporting anxiety or fearfulness

- ❖ Adolescent Mental Health is a growing public health concern that has been accelerating over the last decade. Recent estimates have indicated that rates of formal diagnoses among children aged 6-17 with anxiety and/or depression have increased from 5.4% in 2003 to 8.4% in 2012.
- ❖ For children affected by poverty the rate nearly triples to 22%.
- ❖ The occurrence of mental health disorders during this period significantly increase the risk of developing life-long mental health problems, have a negative impact on educational, social, and economic outcomes that have a cascading negative effect increasing rates of premature death and impaired quality of life<sup>i</sup>.
- ❖ Nationwide estimates indicate that less than half of students with mental health needs are accessing services<sup>ii</sup>. This rate is even higher for youth in underserved rural and urban areas, and minority adolescents with under-utilization rates as high as 63% of youth in need<sup>iii</sup>.

### PERCENT OF GIRLS REPORTING FREQUENT FEELINGS OF DEPRESSION AND/OR ANXIETY BY AGE



### MENTAL HEALTH UTILIZATION:

#### STUDENTS WITH A MENTAL HEALTH CONCERN:

- ❖ 55% utilization rate (double the national rate)
- ❖ 59% utilization rate for girls
- ❖ Use up to 23 visits per year for mental health needs
- ❖ Have a 100% referral rate to community-based services
- ❖ Cluster multiple visits per week when needed

## WHAT'S THE IMPACT?

### IMPROVED MENTAL HEALTH

- ✓ Significant reduction in levels of depression, anger, and anxiety

### IMPROVED STRESS & COPING

- ✓ Significant improvement in positive stress coping skills
- ✓ Significant reduction in feelings of stress

### IMPROVED SCHOOL PROBLEMS

- ✓ Significant reduction in school disciplinary actions

### IMPROVED ACADEMIC ACHIEVEMENT

- ✓ Significant improvement in school engagement
- ✓ Significant improvement in self-reported grades

### IMPROVED HEALTH LITERACY

- ✓ Significant improvement ability to access services

<sup>i</sup>Vos, T., Barber, R. M., Bell, B., Bertozzi-Villa, A., Biryukov, S., Bolliger, I., ... & Duan, L. (2015). Global, regional, and national incidence, prevalence, and years lived with disability for 301 acute and chronic diseases and injuries in 188 countries, 1990–2013: a systematic analysis for the Global Burden of Disease Study 2013. *The Lancet*, 386(9995), 743-800.

<sup>ii</sup>Costello, E. J., He, J. P., Sampson, N. A., Kessler, R. C., & Merikangas, K. R. (2014). Services for adolescents with psychiatric disorders: 12-month data from the National Comorbidity Survey–Adolescent. *Psychiatric Services*, 65(3), 359-366.

<sup>iii</sup>Hodgkinson, S., Godoy, L., Beers, L. S., & Lewin, A. (2017). Improving mental health access for low-income children and families in the primary care setting. *Pediatrics*, 139(1), e20151175.

<sup>iv</sup>Our evaluation collected comprehensive school-wide global health information and clinic utilization data in four representative schools across the State from 2015 - 2017. Our sample was comprised of over 2,000 students that were balanced for gender, ethnicity, and geographic location (urban, rural, semi-rural).