

2017 YRBS/YHS: MENTAL HEALTH



Mental health is an important part of overall health and includes our emotional, psychological, and social well-being. Mental health is important at every stage of life.¹ Most adolescents experience positive mental health, but one in five has had a serious mental health disorder at some point in their life, and most problems start early in life. Half of all mental health problems begin by age 14.² According to the 2016 National Survey of Children's Health (NSCH), among children aged 3-17 years, 7.1% had current anxiety problems, 7.4% had a current behavioral/conduct problem, and 3.2% had current depression.³

Nonsuicidal self-injury is most common among adolescents and young adults. Lifetime rates in these populations are about 15% to 20%, and onset typically occurs around age 13 or 14.⁴

Suicide is the second leading cause of death among people aged 10-19.⁵ Suicide rates among young people in the United States have been on the rise for almost 10 years, with the sharpest increase found among girls. Rates of suicide in children aged 10 to 14 went down between 1993 and 2007. After that they rose 12.7 percent per year among girls and by 7.1 percent among boys.⁶

Suicidal thoughts and behaviors among youth are a serious public health challenge. Nationally, 17.2% of high school students reported seriously considering suicide, 13.6% reported making a plan and 7.4% reported attempting suicide in 2017.⁷

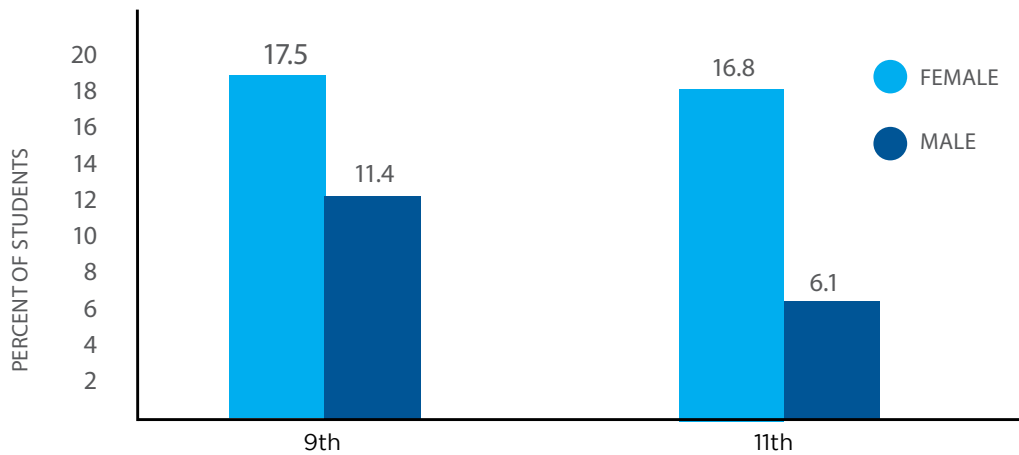
2017 SURVEY HIGHLIGHTS

- In 2017, fewer high school students reported that they seriously considered attempting suicide in the past 12 months than in 2015 (12.4% vs. 14.9%, respectively).
- Female high school students were almost twice as likely to report feeling sad or hopeless than male high school students (36% vs. 19% respectively).
- Students with a physical disability were almost twice as likely than those without to purposely harm them self without wanting to die (23.7% vs. 12.4%, respectively).
- Students with a learning disability were three times more likely to attempt suicide than those without a disability (9.4% vs. 3%, respectively).
- In 2017, lesbian, gay, and bisexual students were more likely to report seriously considering suicide (35.6% vs. 9.4%) and feeling sad or hopeless for two or more weeks in the past 12 months (56% vs. 23.7%) compared to heterosexual students.

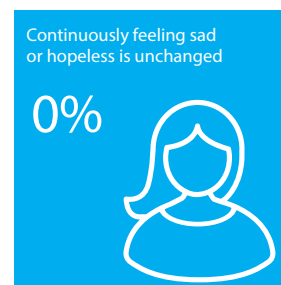
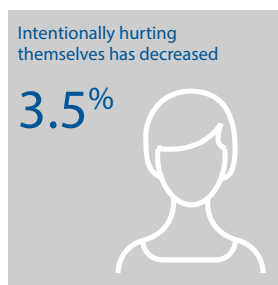
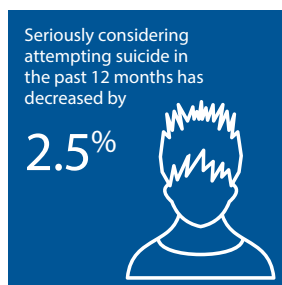
Percentage of Massachusetts youth who reported in the past 12 months:	GRADE LEVEL	2009	2011	2013	2015	2017	Trend [†] '09-'17	Change '15-'17‡
Feeling so sad or hopeless almost daily for 2+ weeks in a row that they stopped doing some usual activities	MS	18.0	15.4	16.1	18.1	18.9	↔	↔
	HS	24.0	25.2	21.7	27.4	27.4	↔	↔
Seriously considered attempting suicide in past 12 months	MS	9.2	7.2	8.4	8.0	8.6	↔	↔
	HS	13.5	13.3	12.0	14.9	12.4	↔	↓
Made a plan about how they would attempt suicide	HS	11.1	12.2	11.0	11.9	10.9	↔	↔
Attempted suicide 1+ times	MS	5.2	4.2	4.1	4.0	4.2	↔	↔
	HS	6.8	6.8	5.5	7.0	5.4	↔	↔
Making a suicide attempt that resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse	MS	1.3	0.9	1.0	1.2	0.8	↔	↔
	HS	2.6	2.3	1.9	2.8	1.9	↔	↔
Intentionally hurting themselves (e.g., cutting, burning) without wanting to die 1+ times	MS	14.8	13.4	14.3	15.8	16.8	↔	↔
	HS	17.0	17.8	14.2	18.0	14.5	↔	↓

Source: Middle school (MS) – MYHS, High school (HS) – MYRBS, unless (^) in which case data is from MYHS
 Symbols: (N/A) not available, (↑) significantly higher, (↓) significantly lower, or (↔) no difference
 †Based on trend analyses using a logistic regression model controlling for sex, race/ethnicity, and grade, p < 0.05.
 ‡Based on a t-test analysis, p<0.05.

STUDENTS WHO SERIOUSLY CONSIDER ATTEMPTING SUICIDE IN THE PAST 12 MONTHS (DISPARITIES BY GENDER AND GRADE)



CHANGES IN MENTAL HEALTH INDICATORS FROM 2015 TO 2017



WHAT'S HAPPENING IN MASSACHUSETTS

- **State Supplemental Budget Mental/Behavioral Health Initiative:** In the Fall of 2018, \$7.5 million in state supplemental funding was allocated to support schools and districts to better prepare students for success, through efforts to improve students' behavioral and mental health outcomes. As part of broader efforts to create safe and supportive learning environments, informed by the **Safe and Supportive Schools Framework**, these efforts will build the capacity of school districts and community based providers to develop and implement comprehensive, integrated systems for student support.
- **DPH Suicide Prevention Program:** The goal of the Suicide Prevention Program is to reduce the number of suicides and suicide attempts and promote the mental health and well-being among Massachusetts residents. The Program provides support to community agencies, education and training for professionals and caregivers, and funds programs working with youth, veterans and older adults. Additionally, high schools and middle schools in MA can obtain Signs of Suicide (SOS) Kits and online suicide prevention training at no cost.
- **Massachusetts School Mental Health Consortium (MASMHC):** The Massachusetts School Mental Health Consortium is comprised of Massachusetts school districts committed to improving the mental health services and supports available to students across the Commonwealth.
- **Act to Reduce Gun Violence (M.G.L. c71 s95a):** Passed in 2014, this law requires all public-school districts and Commonwealth charter schools to provide at least 2 hours of suicide awareness and prevention training every 3 years to all licensed school personnel, subject to appropriation.
- **National Suicide Prevention Lifeline:** By fall 2019, all five crisis centers in MA will be taking calls from the National Suicide Prevention Lifeline number. (1-800-273-TALK)
- **School Improvement Plans and Mental Health Objectives:** Among middle and high schools in MA with school improvement plans, 63% included objectives that addressed counseling, psychological and social services and 82.2% included social and emotional climate related objectives as reported on the 2016 School Health Profiles (Profiles).
- **Mental Wellness and Suicide Prevention Education in Schools:** According to the 2016 Profiles, increasing student knowledge regarding emotional and mental health and suicide prevention are part of the curriculum in a required course in 87.5% and 70.5%, respectively, of middle schools and high schools. Additionally, health education teachers in middle and high schools expressed wanting to receive professional development regarding emotional and mental health (85.1%) and suicide prevention (78.9%) as only 60.3% (emotional and mental health) and 45.7% (suicide prevention) indicated that they had received professional development on these topics in the past two years.

References: 1. Centers for Disease Control and Prevention (CDC). Mental Health Information. Available at <https://www.cdc.gov/mentalhealth/>
2. U.S. Department of Health & Human Services: Office of Adolescent Health (OAH). Mental Health Information. Available at <https://www.hhs.gov/ash/oah/adolescent-development/mental-health/adolescent-mental-health-basics/index.html> Accessed on June 11, 2019. 3. Ghandour RM, Sherman LJ, Vladutiu CJ, Ali MM, Lynch SE, Bitsko RH, Blumberg SJ. Prevalence and treatment of depression, anxiety, and conduct problems in U.S. children. *The Journal of Pediatrics*, 2018. 4. Klonsky E.D., Victor S.E., Saffer B.Y. Nonsuicidal Self-Injury: What We Know, and What We Need to Know. SAGE Publications; Los Angeles, CA, USA: 2014. 5. National Center for Injury Prevention & Control. Web-based Injury Statistics Query & Reporting System. 2017 data query. Accessed: <https://webappa.cdc.gov/sasweb/ncipc/leadcause.html> 6. Trends in Suicide Among Youth Aged 10 to 19 Years in the United States, 1975 to 2016 Donna A. Ruch, PhD; Arielle H. Sheftall, PhD; Paige Schlagbaum, BS; Joseph Rausch, PhD; John V. Campo, MD; Jeffrey A. Bridge, PhD *JAMA Netw Open*. 2019;2(5):e193886. doi:10.1001/jamanetworkopen.2019.3886 7. Centers for Disease Control and Prevention (CDC). 1991-2017 High School Youth Risk Behavior Survey Data. Available at <http://nccd.cdc.gov/youthonline/>
