SAFE, SUPPORTIVE & RESPONSIVE APPROACHES TO YOUTH MENTAL HEALTH

BACKGROUND

Prior to the COVID-19 pandemic, mental health challenges among youth have been rising steadily for many years. The Center for Disease Control and Prevention (CDC) found that between 2009 to 2019, the proportion of high school students reporting persistent feelings of sadness or hopelessness increased by 40%, those seriously considering attempting suicide increased by 36%, and the share creating a suicide plan increased by 44%.[1] Since the pandemic began, rates of psychological distress among young people, including symptoms of anxiety, depression, and other mental health challenges have increased significantly. Recent research from the Journal of American Medical Association (JAMA) covering 80,000 youth globally, identified a substantial continual decline in youth mental health. The study found that depressive and anxiety symptoms doubled during the pandemic, with 25% of youth experiencing depressive symptoms and 20% experiencing anxiety symptoms.[2] In the U.S., this crisis has prompted a U.S. Surgeon General's Advisory regarding youth mental health and increased resources directed towards prevention and intervention.

Programs serving youth experiencing homelessness have also identified a significant increase in both the number and intensity of youth mental health needs over the past two years. Across regions, youth are experiencing high rates of anxiety, depression, and other mental health challenges, and programs often support youth through situations of intense crisis. Responding to the urgent mental health needs of youth experiencing homelessness requires us to look at practices and policies to ensure that they are trauma-informed, culturally responsive, and youth-led. This resource was developed to provide practical strategies and resources to support youth mental health through prevention, crisis intervention, and restorative practices.

[1] Centers for Disease Control and Prevention. (2020). Youth Risk Behavior Surveillance Data Summary & Trends Report: 2009-2019. Retrieved from https://www.cdc.gov/nchhstp/dear_colleague/2020/dcl-102320-YRBS-2009-2019-report.html

[2] Racine, N., McArthur, B. A., Cooke, J. E., Eirich, R., Zhu, J., & Madigan, S. (2021). Global Prevalence of Depressive and Anxiety Symptoms in Children and Adolescents During COVID-19: A Meta-analysis. JAMA Pediatrics, 175(11), 11421150. https://doi.org/10.1001/jamapediatrics.2021.2482

KEY POINTS OF PRACTICE WHEN SUPPORTING YOUTH WITH MENTAL HEALTH NEEDS

PREVENTION

Community-Based Prevention:
Youth mental health is a shared challenge happening in homes, schools, programs, and communities. Educating the community on how to recognize youth mental health needs and providing resources to address those needs is essential for a community-based approach. Sharing accessible mental health screening assessments, distributing a list of local or online affordable mental health services, and holding open events around the topic, where people can ask questions and receive answers from a trusted source, (i.e., community health professionals) are strategies to begin this process.

Create Strong Policies and Procedures:
Having clear policies, procedures, and staff training on managing mental health crises are essential for effective prevention and intervention. This should include the program/organization's procedures, protocols, and strategies for prevention (i.e., assessment, safety planning), crisis intervention (i.e., de-escalation, contacting supervisor, calling 911), and post-crisis (i.e., incident report, debrief). Ensure that all staff receive initial and ongoing training on effectively implementing the policies and procedures.

Start the Process Early:
Utilize mental health and other assessments to accurately capture youth needs to guide next steps. Normalize crisis and safety planning as a universal practice and partner with youth to develop strategies to keep themselves safe. Support youth in creating a proactive and individualized plan that works for them on all three levels: pre-crisis, during crisis, and post-crisis/restoration. This can be developed using a formal crisis plan or informal conversation where staff ask essential questions such as, "What can staff do to best support you if you are triggered, stressed, etc.?" or "What current coping skills/tools do you use and find helpful?" This language provides ways to identify needs even when youth are not explicit about their challenges. Be attentive, write it down, and implement proactive steps in the plan when youth exhibit warning signs. If conflict is present, address it through restorative practices.

PREVENTION CONTINUED

Train In and Utilize Prevention Models:
Direct care staff need training and support in preventing and managing mental health needs and crises. Staff are better able to utilize skills learned in training when there is a culture of care: self-care and collective care. This helps mitigate staff from being triggered or harmed during a situation. Youth also benefit from seeing care modeled and participating in an environment that promotes self-care as an accessible practice.

Build Trusting Relationships with Youth:
Evidence-based models such as Trust-Based Relational Intervention (TBRI) have been developed around this concept and focus on meeting the needs of youth through connection and relationships. Working in partnership with youth to create a physically and emotionally safe environment helps strengthen that relationship. Authentic partnership centers youth in the discussion surrounding their healing and safety and helps keep the safety plan relevant and adaptive to changing needs.

Utilize a Strength-Based Approach:
Youth often have cultural strengths that can support their mental health. Discover ways to increase access for Black, Indigenous, and all youth of color to culturally responsive services that support their holistic well-being. Create space for youth to be involved in beliefs and practices that bring them strength, joy, or peace. These may include alternative interventions outside of therapy, such as acupuncture, prayer/meditation, cultural healing, etc. Engage staff and youth in authentic sharing of culture to promote connectivity and resilience. In addition, partnering with organizations that provide culturally specific support, and creating a listening and learning culture can strengthen the program's capacity to support youth during crises.

CRISIS

Be Flexible:
Crisis situations can be unpredictable. Youth needs vary and change rapidly during crises and staff should be prepared to shift along with those needs. The most organic way to do this is by simply being present and flexible. This could mean yielding the process until youth are able to respond in a healthier manner. Asking youth what they need in the moment helps ensure the best result. Most crisis situations can be de-escalated when youth feel heard, understood, and connected.

Bring the Energy Down:
When a youth is in crisis, they are often overwhelmed by situations in their life, their immediate surroundings, or internal feelings. When there is tension building, work to minimize the stimulation. This may mean lowering the music volume, walking outside, encouraging youth in conflict to go to separate rooms, or other strategies. In a group situation, the escalation of one youth can often cause distress for other youth. Providing options for separation will allow de-escalation to occur and provide support for all youth.

CRISIS CONTINUED

Utilize Staff Relationships with Youth:
While in crisis, youth are processing with their survival brain. Each person will react differently: mentally, physically, and emotionally. This can look like a variety of responses such as fight, flight, or freeze. Though all staff should be well equipped to handle crisis situations, if a staff member that has established trust with the youth is present they can be a catalyst for de-escalation. This person is often best positioned to offer options like deep breathing, walking together, or other identified coping strategies, by leaning on the relationship already built.

Prioritize Safety:
Take action to maintain the safety of youth and staff. Staff should have access to 24/7 support to address mental health and other intensive crisis needs and be aware of organizational and program procedures. Youth should be aware of and encouraged to access mental health/suicide crisis lines, such as the Suicide Prevention Lifeline, NAMI Helpline, The Trevor Project, and other resources outside of your organization (even outside of typical phone hours).

Things to Avoid:
During a crisis avoid giving unwanted advice, discussing consequences, arguing your point, or rushing the process. Instead - give personal space, offer safe options, and meet immediate needs.

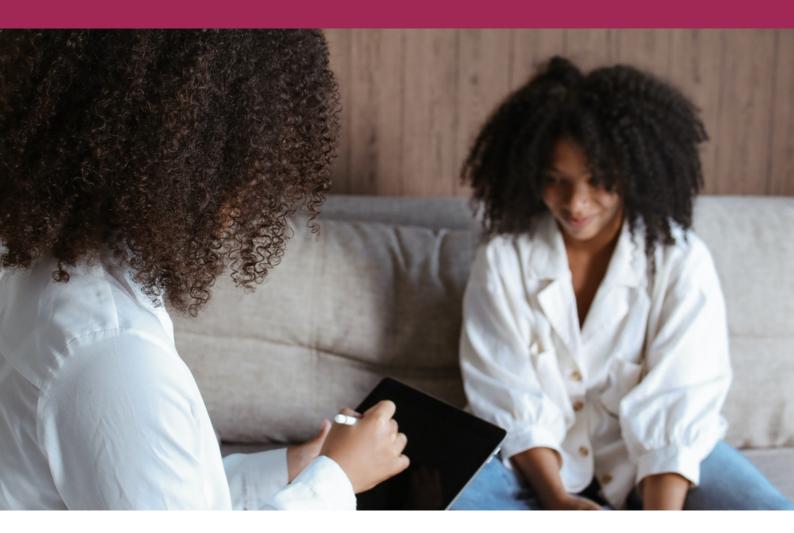# POST CRISIS/ RESTORATION

Be Understanding:
Youth may use a lot of energy during a mental health crisis. Allow space for the youth to rest and meet current needs (food, shower, etc.) following the crisis. Remember that post-crisis depletion happens before recovery. Wait to reflect with youth until they are in a stable space to effectively engage.

Youth Reflection:
Create a calm environment for reflection. Allow youth to lead this process, and offer guidance by asking questions like "What happened from their perspective? How did they cope? What repair/restoration is needed to relationships, property, etc.? What do they want to put in place to prevent or minimize future crises?"

Program Reflection:
Assess how the organizational/programmatic crisis intervention plan was implemented. Consider questions like "Was this process effective at responding to this crisis? What challenges arose? What went well and how did that improve the outcome? Was the plan easily executed? How do we better prepare staff to ensure positive results in the future?" Reflect on these questions, and more, to adapt and strengthen the plan as needed.

YOUTH MENTAL HEALTH RESOURCES

- Protecting Youth Mental Health – U.S. Surgeon General's Advisory
- Black Emotional and Mental Health (BEAM): Toolkits and Resources
- Mental Health Outcomes Among Runaway, Homeless, and Stably Housed Youth
- Addressing Intersecting Social and Mental Health Needs among Transition-Aged Homeless Youth
- Child Welfare Webinar | The Promise of Adolescence: Realizing Opportunity for All Youth
- Accessible Mental Health - National Runaway Safeline

RESOURCES ON OTHER RELATED TOPICS

Trauma-Informed Care

- Trauma-Informed Organizational Assessment – National Center on Family Homelessness
- Language Matters – Trauma Infographic
- Building Trauma-Informed Runaway and Homeless Youth Programs

Social Emotional Learning

- Tools for Supporting Emotional Wellbeing of Children and Youth

Additional Resources

- National Child Traumatic Stress Network
- Me and My Emotions
- In Brief: Resilience Video Series