BARRIERS to supporting adolescent mental health

According to the 2021 Youth Risk Behavior Surveillance Survey (YRBSS), over one third of high school-aged youth felt sad or hopeless every day for the past two weeks[1]. The COVID-19 pandemic has further exacerbated poor mental health among adolescents, leading to an increase in anxiety, depression[2], and suicide attempts[3]. Having a trusted adult to talk to about serious problems can reduce the occurrence of mental illnesses and suicidality in young people, however more than 20% of 12–17-year-olds stated they did not have this connection with an adult. Medical providers have a unique opportunity to provide support for young people, help identify signs of mental illness early and connect youth to life-saving treatment and resources.

STRATEGIES to address mental health in primary care

Consider mental health as an integral part of health care

- Normalize talking about mental health with adolescents and their families to break down the stigma surrounding mental health.
- Include brochures and posters in waiting areas and exam rooms that address mental health services or topics such as these two from the Adolescent Health Initiative (AHI), these from the National Alliance on Mental Illness, or this one that is specific to students.
- Offer on-site, integrated behavioral health services (can include social work, psychology, and/or psychiatry). An integrated approach allows adolescents experiencing substance misuse and behavioral health issues to receive care when they previously may not have had access to it and can allow healthcare providers to intervene before issues worsen.
  - Consider implementing established models or earning a certificate to integrate behavioral health into your primary care setting.
  - Ensure that your clinic also has protocols in place for managing psychiatric emergencies. Here is a *Guide for Developing Primary Care Protocols for Psychiatric Emergencies (page 18)*.

[1] www.cdc.gov/healthyyouth/data/yrbs/pdf/trendsreport.pdf

[2] www.kff.org/coronavirus-covid-19/issue-brief/mental-health-and-substance-use-considerations-among-children-during-the-covid-19-pandemic/

[3] www.cdc.gov/mmwr/volumes/70/wr/mm7024e1.htm

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Universally screen for mental health issues

- Use an evidence-based screening and tracking tool such as the PHQ-9, GAD-7, or SCARED to identify persistent mood symptoms that may not be evident through informal conversation and questioning. These tools allow for tracking and monitoring illness severity over time.
- Standardize the use of a universal screening tool, which can identify risk factors in an adolescent's life that may put them at high risk for mental health conditions and suicidality. AHI has curated an Adolescent Risk Screening Directory that compiles risk screening tools across a wide array of topics to be used with adolescent patients. Access it here.
- If your practice administers more in-depth screening tools, or would like to do so, consider the following adolescent appropriate tools:
  - Computerized Adaptive Screen for Suicidal Youth (CASSY)
  - Columbia Suicide Severity Rating Scale (C-SSRS)
  - Reactive Attachment Disorder Rating Scale
  - Multidimensional Anxiety Scale for Children (MASC)
  - NICHQ Vanderbilt Assessment Scales
  - Center for Epidemiological Studies Depression Scale for Children (CES-DC)

Discuss confidentiality for mental health care for adolescents

- Learn about confidentiality and minor consent laws in your state related to mental health services. Browse AHI's Confidentiality Laws Spark library, which features 15-minute ready-to-use trainings that are easily accessible and tailored to specific state laws, or review the Guttmacher Institute's guide to state laws and policies.
- AHI also has state specific *Teens, Privacy, and Health* posters that outline confidentiality laws and can be displayed in clinic spaces. Contact us at adolescenthealth@med.umich.edu for a poster specific to your state.
- Emphasize with adolescent patients' situations in which confidentiality must be broken according to your state laws. Consider using a phrase like "What we talk about will stay between you and me except if I hear that you might hurt yourselves or others, or that others are harming you."
- If confidentiality must be broken because the young person has disclosed any of the information laid out above, let them know in a respectful manner and guide them through next steps. Consider these phrases:
  - I heard that you are thinking of hurting yourself and as your provider, I cannot let you leave the office without seeking help. We are going to work on a plan together, who can I contact for you?
  - You disclosed that someone close to you has abused you and that is something that I am mandated to report. Here is what will happen next (police report, etc.). How can I help you feel safe during this process?
- Ensure that adolescent patients have time alone with the provider, without a caregiver present. Discuss mental health during this time. You can draw from their screening responses to elicit a conversation. Here are some examples of questions to ask:
  - I see from your survey that you have felt sad, down, or hopeless recently. Would you like to tell me a little more about that?
  - What is the hardest part about being you right now?
  - Do you ever think about harming yourself?

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- Talk to adolescent patients about who they would like to have access to information about their mental health. This may change depending on the situation and their age, so it can be valuable to revisit consent documentation regularly.

Understand and respect developmentally appropriate behaviors and emotions

- Actively listen without judgment to the issues adolescent patients are facing, validate their concerns, and provide resources and referrals when appropriate.
- Talk through common barriers to therapy for adolescents. Some teens may feel like they cannot go to therapy because of cost, schedules, confidentiality, transportation, or other reasons.
- Telehealth for therapy can be a great option for some teens. MC3 offers psychiatry support to primary care providers in Michigan who are managing patients with behavioral health problems. For more information on effectively using telehealth with adolescent patients check out this resource and AAP and AHI's Providing Adolescent-Centered Virtual Care Starter Guide.
- Connect youth with an insurance provider or patient navigator if coverage or cost is an obstacle.
- Create and reference a list of local mental health providers who offer services on a sliding fee scale or at low cost.

Focus on strengths

- Identify potential protective factors in a young person's life that can support their mental health such as participation in extracurricular activities, connection to the community, positive relationship with caregivers, spirituality, etc.
- Consider asking adolescent patients questions, like the following to draw out some of their strengths:
  - What's something you like about yourself, your family, your school?
  - Who's an adult you can talk to when you are feeling down?
  - What's your favorite thing to do outside of school?
  - What's something you're good at?
  - Where do you feel the safest?
  - How would your best friend describe you?

Have a robust, up-to-date list of youth-friendly mental health referrals and resources

- Ensure that any community organizations on your referral list are youth-friendly.
- Provide adolescents with a variety of online and electronic resources, including websites, apps, and crisis lines such as those listed below:
  - Crisis Text Line for emergency support
  - JED's Mental Health Resource Center
  - TheTrevorProject.org provides crisis intervention and suicide prevention services to lesbian, gay, bisexual, transgender, and queer or questioning (LGBTQ+) youth
  - HalfOfUs.com raises awareness about mental health and connects young people to resources
  - Talkspace for Teens or 7 Cups for online therapy

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- Calm and Headspace apps for meditation
- ADAA's Mental Health Resources for the Black Community and MHA's resources on Black and African American Communities and Mental Health

Recognize the role that systems of power and oppression play in the mental health of youth with marginalized identities and practice equitable care

- Commit to continual growth at the individual, institutional, and systemic levels to dismantle discriminatory practices.
- Seek ongoing professional development opportunities, including developing a Diversity, Equity, and Inclusivity workgroup, and auditing current policies and procedures, including hiring practices, etc.
- Reference SAHM's Anti-Racist Toolkit for suggestions on how to address racism and its harmful effects in your practice.
- Familiarize your staff with caring for LGBTQ youth using Learning Modules from The National LGBT Health Education Center/Fenway Institute, LGBTQ+ Care: Training and Resources for Nurses, and the AHI's LGBTQ+ Spark mini-trainings.
- Engage regularly in training on the history of discrimination and racism in health care, health equity, and bias. Below are a few resources that examine implicit bias among health care professionals and medical staff and provide strategies to address the issue.
  - American Academy of Family Physician's Implicit Bias Training Guide
  - Healthcare Education & Training's (HCET) Addressing Implicit Bias to Better Serve Youth

Support caregivers

- Discuss the warning signs of poor mental health and suicidal ideation with caregivers. Caregivers often have the capacity to identify risk factors early and help youth seek support.
- Share strategies with caregivers for discussing mental health with their child. Research has shown that teens with high levels of caregiver support have better mental health outcomes[4].
  - MentalHealth.gov - For Parents and Caregivers
  - MakeItOk.org - What to Say
  - Mental Health America's Talking to Adolescent and Teens: Starting the Conversation
  - GLAD-PC A Guide to Speaking with Adolescents and Parents (page 107)

[4] https://www.sciencedaily.com/releases/2018/10/181025141007.htm

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Additional **RECOMMENDATIONS**

- AHI has two Timely Topic Modules that can support teams in helping youth manage and understand their mental health:
  - Trauma-Informed Care with Adolescent Patients
  - Exposure to Bullying
- Guidelines for Adolescent Depression in Primary Care (GLAD- PC) Toolkit

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