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# Current Crises' Impacts on Youth Mental Health

## Research Brief

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Youth mental health has been a growing concern in Wisconsin and beyond for some time. Rates of anxiety, depression, and self-harm reported by young people have been increasing. Suicide rates remain steady, while only one in four Wisconsin youth report that they receive the help they need when they feel distressed (McCoy, 2018, 2020). Many factors can impact these mental health challenges, including gender, racial and cultural identity, family dynamics/support, prior mental health concerns, and socio-economic status, among others.

The pandemic and resulting changes to people's lives are a new factor in youth mental health. Young people report that COVID-19 has led to a host of stressors for them, such as social isolation, worries about illness, attending school online, and cancellation of many normal activities (National 4-H Council & The Harris Poll, 2020). The acute stressors of the early pandemic are becoming chronic stressors as the pandemic continues with no defined end date. Recent studies on adolescent mental health consistently show increased rates of depression, anxiety, and post-traumatic stress disorder (PTSD) related to the pandemic. However, many youths are also reporting positives, such as reduced substance abuse and a deeper connection with family (Cribb, 2020). In their stage of social and emotional development, young people calculate risk differently. Many youths believe that social isolation poses a greater threat to their health than COVID-19 (Noguchi, 2020). This may be a result of teens' degree of confidence in their physical health versus their emotional health. At this time, while two in three young people believe "mental health is a more important issue than physical health," only one in three say their mental health is good (National 4-H Council & The Harris Poll, 2020). The combination of threats to both physical and mental health is cause for grave concern.

Yet, in the midst of all this, according to the National 4-H Youth Mental Health Survey, nearly 70% of teens consider themselves to be resilient (National 4-H Council & The Harris Poll, 2020). The burden of resilience does not fall only on individuals; it falls on social networks and communities as well. Youth—more specifically, youth from certain racial and cultural groups—rely on other members of their community, however they define community, for support and advice about mental health (Kilsz-Hulbert, 2020).

## Youth Interrupted

Every generation has a defining event that impacts how they look at and approach the world, and COVID-19 seems likely to be the event that impacts today's youth throughout their lives. Because of COVID-19, youth are experiencing the following:

- Acute and chronic stress
- Disruptions in education and career plans

- Worry about the economic impact on their families and future
- Cancelled extracurricular activities and rites of passages
- Concerns about the virus and its potential or real impact on loved ones

Their routines and social relations have been disrupted, and the lack of typical structures add to stress levels.

Schools and extracurricular activities provide youth with structure and opportunities for skill building. The impact of prolonged uncertainty and lack of socialization, skill-based learning, social support, and reduced physical activity may increase children's emotional distress (Stark et al., 2020).

A recent study by the University of Wisconsin School of Medicine and Public Health (SMPH) found symptoms of depression and anxiety in two-thirds of high school athletes due to the spring shutdown of Wisconsin high school sports. They found the physical activity levels of the athletes had declined by 50% when the survey was taken in May. The loss of these activities reduces the powerful antidepressant, anti-anxiety, and endorphin effects as well as the loss of structure in the athletes' lives (Smith, 2020).

Adolescence is the brain's last period of significant development, which doesn't only permit change for the better but allows change for the worse. During adolescence, young people have a heightened perception of experiences as being stressful. This, along with a low distress tolerance, leads to more avoidant coping and more internalizing of symptoms, thus making adolescents more susceptible to mental health concerns (Birklin, 2014).

Several studies have shown the impact of loneliness on mental health which is particularly concerning with our current need for physical distancing and isolation. Loneliness impacted youth before the arrival of COVID-19 and changes in interactions are enhancing this. Relating to peers in adolescence is important to their social development, determining beliefs and forming healthy relationships with people outside of their home. Young brains need social connection to feel secure about their identity and place in the world (Noguchi, 2020). Feeling cut off from social groups may lead youth to feel vulnerable and pessimistic, producing negative mood states and anxiety that are further heightened during a pandemic. Lockdown, for some adolescents, is experienced as insufferable. In normal times, excessive social withdrawal is considered as a psychiatric symptom (Liu et al., 2020).

Some may believe that virtual connection is a substitute, especially for a digital generation. Intentional virtual connections can help many individuals fulfill an otherwise unmet need for social support. However, virtual connection does not replace human touch and the necessity of mask wearing does not allow for interpreting facial expressions (Noguchi, 2020). Further, overuse of the internet and social media can be isolating factors that may negatively influence youth mental health. Time and attention spent on social media correlate with levels of depression, anxiety and psychological distress and may be associated with sleep problems. Studies suggest that internet addiction may be influenced by stressful and traumatic experiences and is associated with depression (Guessoum et al., 2020).

All of this contributes to significant impacts on adolescent mental health. Prior studies of American families exposed to quarantine measures reported PTSD in 30% of children, with girls estimated to be twice as likely to suffer from post-traumatic stress disorder. Post-traumatic stress disorders in children have an impact on brain development, most concerning alterations in the fronto-limbic circuits, which may contribute to increased threat reactivity and weaker emotion regulation (Guessoum et al., 2020).

In a survey among 8079 Chinese adolescents aged 12–18, Zhou et al. (2020) reported a high prevalence of symptoms of depression (43%), anxiety (37%), and combined depression and anxiety (31%) during the COVID-19 outbreak. Female gender was the highest risk factor for these symptoms. These studies on adolescent mental health during the COVID-19 outbreak support the hypothesis of a risk of PTSD, depressive, and anxiety symptoms related to this pandemic (Guessoum et al., 2020).

## Doubly Vulnerable

Some groups of young people were already vulnerable to mental health issues prior to the pandemic, and the impacts of COVID-19 on their everyday lives exacerbate their risk. These groups include youth with pre-existing mental health conditions, youth with physical or developmental disabilities, youth of color, LGBTQ youth, and youth who were living with domestic abuse and/or neglect.

Worldwide, half of all mental illnesses begin before young people reach the age of 14; three-quarters begin before young adults reach their mid-20s (World Health Organization [WHO], 2013). While many youths have previously sought support for mental health issues, many others haven't. All are impacted by COVID-19, but evidence shows that those who have pre-existing conditions are affected more significantly (Cribb, 2020). Nearly one in five youth reported having considered suicide in the early stages of the pandemic, with a much higher percentage of those being young people who had previously sought mental health care. Negative emotions, mood changes, and shifts in sleeping and eating patterns increase existing risks to these youth (Patel, 2020). Early interventions are vital to decreasing the severity and outcome of mental health issues; access to those interventions can be further complicated by COVID-19 (McGorry & Mei, 2018).

Likewise, young people who have pre-existing mental and/or physical disabilities are at greater risk as a result of the pandemic. For example, youth with Autism Spectrum Disorder already struggle with developing social skills. Shifts in routine, restricted access to typical activities, cancellation of supportive therapies, and added uncertainty resulting from physical distancing can lead to anxiety and other emotions that are difficult to process. For those youth experiencing developmental or intellectual delays, it can be even more difficult to understand why changes (such as staying home from school and physical distancing) have taken place in their lives leading to frustration, uncertainty and anxiety (Patel, 2020).

Many young people of color are already additionally stressed as a result of racism, discrimination, acculturation, and historical trauma. While racial socialization and cultural community supports are also assets for these youth, the pre-existing risk is high. Families from minoritized communities are also disproportionately affected by the pandemic—regarding crowded housing conditions, essential jobs on the front lines, as well as pre-existing medical risks. Further challenges include inequitable access to health care services, distrust of medical systems, stigma, and isolation from cultural and social supports. All these factors can contribute to mental health issues among youth (Stark et al., 2020).

More than half of youth who identify as LGBTQ do not feel their identities are supported by their families. They may additionally hear negative comments at home about their identities (Rothstein, 2020). As a result, these young people were already at greater risk for depression, anxiety, substance abuse, and suicidality (Russell & Fish, 2016). Requirements of physical distancing as a result of COVID-19 decreases the number of positive social interactions while potentially increasing the negative or non-supportive messages they may be receiving

(Green et al., 2020). These effects lead to feelings of isolation, loneliness, and can activate more serious mental health issues for this group.

In homes where abuse and neglect (and other adverse childhood experiences (ACEs) were occurring before the pandemic, youth frequently lacked important emotional supports from their families (McMaster, 2020). If these homes also represent low socio-economic circumstances, additional financial strains may exacerbate the issues in the home, and youth access to support structures through technology may be further limited. These youth are more likely to be emotionally reactive and have more limited abilities to emotionally regulate, which puts them at greater risk for developing more serious mental health issues (Fegert et al., 2020).

For youth in all of these groups, as their emotional responses increase, regulation decreases and maladaptive coping strategies (such as self-harm or suicidal behaviors) may develop (Fegert et al., 2020). Despite this compilation of adversity, behavioral health providers—many of whom are part of coalitions supported by Extension—are reporting a decrease in the numbers of referrals since the same time period last year. This does not suggest a decreased need. Rather it points to diminished referrals and increased barriers to mental health services for those who need them most, as a result of decreased contact with trained adults who have typically made those referrals and helped to remove those barriers (H. Hainz, personal communication, August 17, 2020). Often, the adults who continue to have regular contact with youth do not have the training needed to know what to look for and how to support the youth.

## Compounding Effects of Racism and Discrimination

For many young people, the various impacts of the Coronavirus pandemic were not the only significant stressors. Racism—experiences ranging from discomfort with someone because of their race to slurs or jokes to racist attacks—compounded the effects of stresses they were already feeling (Ruiz et al., 2020). In fact, youth are reporting 10% of the thousands of pandemic-time racist attacks on Asian Americans, nationally (Asian Pacific Policy and Planning Council [A3PCON] et al., 2020). As a result of increased racism during this time, Asian Americans have reported anxiety or depressive symptoms up to seven times their typically low rates (Fowers & Wan, 2020). Further complicating the situation, this diverse group is much less likely to seek help than people of other races (Fowers & Wan, 2020).

Among African Americans, the police killings of people of color during this time resulted in significant increases of anxiety and depression (Fowers & Wan, 2020). It's not surprising. Studies show a close association between viewing traumatic events online and both PTSD and depressive symptoms among African American and Latinx youth (Tynes et al., 2019). However, it is important to distinguish between trauma and mental illness. The trauma that youth experience when they view traumatic events online activate normal human emotions, such as fear and sadness. Repeated experiences of this kind of trauma contribute to anxiety and depression, which can be characterized as intense fear and sadness extending over a period of time and are mental illnesses that can be treated (Raman, 2020; Substance Abuse and Mental Health Services Administration [SAMHSA], 2020b). Further exacerbating the mental health challenges being faced, physical distancing can make it more difficult to access the family and community supports that are a strength of African American and Latinx communities (Newman, 2020).

For Asian American, African American, and Latinx youth, stigma around mental health can be a barrier to seeking help. For some, this stigma is cultural. For others, the stigma is systemic. For example, African American teens are less likely to receive appropriate care, but rather be involuntarily hospitalized or sent into

the juvenile justice system (Klisz-Hulbert, 2020; Thomas, 2020). Furthermore, the limited cultural competence of most mental health services can increase youths' risk of suicidal thoughts (Walker, 2020).

## Growing Need for Mental Health Services

Early intervention into mental health issues has been shown to be both therapeutic and essential for long-term mental health (Landau, 2020). However, behavioral and public health professionals, schools, and researchers universally point to the concern that mental health, especially among young people, was already at near epidemic rates prior to COVID's amplification. There is also widespread agreement that COVID will have a ripple effect leading to a mental health crisis of untold proportions. Calls have already gone out for proactive policy change to meet the coming need (Thomas, 2020; University of Wisconsin-Madison Population Health Institute [UWPHI], 2020).

Lack of access to mental health services has been an issue in the past and threatens to become an even greater challenge in the future (Landau, 2020). Youth report seeking mental health information from a variety of sources, including schools, peers and caregivers, doctors, the internet, and a variety of other media (National 4-H Council & The Harris Poll, 2020). This creates a wide range of opportunities to meet them where they are. The pandemic has certainly pressed innovation, and some young people who were previously reluctant to seek help are more open to engaging in online spaces (Cribb, 2020). Proposed opportunities to help meet the need include increased availability of and access to services such as culturally responsive and relevant crisis response lines, grief counseling, and PTSD therapy, as well as innovative models of community mental health systems, which build on the strengths of communities (UWPHI, 2020).

A recent article published by the American Psychological Association says, "supporting children's positive adaptation in the context of the pandemic requires immediate and planful alignment of mental health practices and policies that support children and their caregiver(s) and the multiple systems (e.g., schools) within which they live and develop." Community and state coalitions can play a pivotal role in identifying needed changes and advocating for policies that provide flexibility in how supports are delivered; the public health implications of family-centered, whole-child, and whole-person approaches to health, that include both mental and physical health; as well as a range of short- and long-term solutions to access and delivery methods (Stark et al., 2020).

## Building on Youth Resilience

Resilient youth grow from resilient, inclusive communities. When knowledgeable, caring adults create safe spaces for open dialogue, they create opportunities for youth to debrief what they are seeing and experiencing, express how they are feeling, and understand how those emotions might affect their bodies (Walker, 2020; Raman, 2020; Johnson, 2020). Many parents and caregivers are coping with their own strong emotions and trying to model coping strategies to the young people in their lives. As a result, familial and interpersonal relationships, in many cases, have grown stronger during the pandemic. However, for youth who do not have these existing supportive, in-person connections, technology—including phone and text lines, web-based supports, and social media—is helping to fill the gap (McMaster, 2020; Tynes et al., 2020; Hamayoun, 2020). It is most important for youth to feel they are not alone, focus on things they can control, and have opportunities to talk about their feelings with someone they trust (Green et al., 2020).

When asked, youth, especially those who believe they are resilient, "want everyone to take more action to reduce stigma and open conversations around mental health." (National 4-H Council & The Harris Poll, 2020).

Building on young people’s sense of resilience and their desire to open the conversation more fully is a vital leverage point in supporting the mental health of young people. As academics and health leaders predict a need for policy and practical changes to help address the growing demand for mental health services (especially culturally competent services), youth can play a critical role in advocacy (SAMHSA, 2020a; Trent et al., 2019; UWPHI, 2020).

Many youth want the opportunity to contribute in some way to improve in and increase equitable access to mental health care systems (National 4-H Council & The Harris Poll, 2020). Asset-based positive youth development approaches to youth leadership and empowerment—such as social justice youth development (Fields, 2018; McDaniel, 2017) and youth advocacy for community health (University of Wisconsin-Madison Division of Extension, n.d.)—can help young people think through how they want to respond to these challenges. Youth voice in typically adult venues diversifies perspective in the local, state, and national conversations, and youth feel empowered and valued within their own lives and communities.

## Recommendations

Recommendations for how to address youth mental health resulting from COVID and racial injustice during this time focus on strengthening protective factors in multiple realms for young people in the short-, medium-, and long-term. Extension has multiple roles within communities—some in promoting existing partner resources; some in direct program delivery; and others in developing the capacity of a community to address the mental health needs of youth at a policy, systems or environmental level.

### Short-term, Individual Recommendations

- **Provide extracurricular activities in accessible and safe ways during this time.** Extension has pivoted and partnered with others to develop educational opportunities in alternative formats, including [Virtual Learning Community](#) offerings, Take & Learn Activities, and [Fun Hands-on Learning to do at Home](#). By providing such extracurricular activities, young people will continue to have access to positive, meaningful opportunities outside the school day, thereby expanding the capacity of the schools and communities to support the health and well-being of young people.
- **Help youth make high-quality connections that support their mental health in virtual spaces.** Early interventions are vital to decreasing the severity and outcome of mental health issues; however, typical in-person access to those interventions can be further complicated by COVID (McGorry & Mei, 2018). Extension continues to partner with community coalitions to promote hotlines, warmlines, and other early intervention strategies as well as telehealth where it’s currently accessible and safe for individual settings/situations.

### Medium-term, Relational Recommendations

- **Provide education and support to individuals and institutions to create a culture of ongoing skills practice and competency.** Extension has worked to create a strong niche in the use of a range of educational delivery methods. Educators will leverage that base of knowledge, skills, and tools to meet youth and their parents/caregivers where they are to provide education and support ongoing skills building. Youth will have opportunities to learn strategies to be more intentional about making positive, supportive virtual connections, and they will also be offered mindfulness education, such as Learning to BREATHE. Likewise, the parents and other adult caregivers of youth will be offered self-care and stress reduction education, such as Taking Care of You, so they can maintain their own mental health and model healthy coping.

- **Expand or develop the capacity of adults to act as positive supports for youth mental health and well-being.** The presence of supportive adults in a young person’s life is an important protective factor. Extension is initiating several efforts to increase the skills and competency of an adult support network in young people’s lives. These include Youth Mental Health First Aid (YMHFA) and the Youth in Crisis Training for volunteers (currently in development) to understand and address youth mental health. In addition, parents and guardians are offered brief and longer-term training and skill-building opportunities, such as Mindfulness-enhanced Strengthening Families Program (MSFP), Raising a Thinking Child, Emotion Coaching, and other similar parent education programs.
- **Collaboratively research, identify, and develop evidence-based strategies to address the specific needs of vulnerable groups of youth.** How Extension addresses issues requires sensitivity to specific needs of individual audiences. As the Division expands its understanding and capacity to adapt educational programming to meet the needs of specific audiences, educators must be intentional about developing effective, culturally competent responses to the mental health needs of youth who have specialized needs that make them doubly vulnerable to mental health issues. Extension is in a unique position to explore and leverage partnership and funding opportunities with UW-Madison schools, community-based cultural experts, and youth leaders to be effective in identifying appropriate strategies that meet the needs of our most vulnerable young people.

#### Long-term, Community Recommendations

- **Collaborate with partners to conduct a statewide qualitative youth mental health survey.** In seeking information and data for this research brief, we identified a gap in timely knowledge about the mental health experiences of youth during this time. Extension’s questions sparked a larger state-level discussion with key partners who acknowledged that gap as well. Those partners are moving forward with a qualitative study of youth resilience in the time of COVID related to substance use and mental health challenges. Extension has an important advisory and support role in that study as well as a role in providing opportunities for youth voice in using the data to help identify potential solutions.
- **Facilitate efforts that involve individuals and organizations in policy, systems, and environmental (PSE) change around mental health.** Through our relationships and partnerships in communities and across the state, Extension facilitates the necessary collaborations by involving key stakeholders in PSE efforts. Educators:
  - Incorporate youth voice through implementation of National Alliance on Mental Illness’s Raise Your Voice Club and Youth Advocates for Community Health programming.
  - Continue to promote a system of professional development that is offered by Extension or partner organizations for mental health practitioners/providers and other support professionals. Offerings include evidence-based interventions for best practice; cultural competence; and self-compassion training, which increases provider effectiveness and minimizes secondary trauma.
  - Support advocacy for PSE change around mental health delivery by partnering with youth and community partners, including expansion of broadband and increased access to mental health, and counseling offered on-site in schools that are meeting in person.

COVID-19 and incidents of racial injustice have amplified the inequities that exist across Wisconsin. Youth—especially certain groups of youth—experience even greater vulnerability to the ripple effects of the virus. Extension plays a key role in improving health outcomes around youth mental health. By developing, enhancing, and leveraging our resources and partnerships, we can make a difference in the health and well-being of all young people and those who support them across the state.

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