

2024 Youth Mental Health Report

KIDS IN CRISIS



Introduction

Growing up is a challenge on its own, but when you factor in the pressures from social media, incidents of mass violence and various societal issues, the toll on youth's mental well-being becomes increasingly evident. And experts are still working to quantify the added impacts children experienced during the COVID-19 pandemic.

But there is hope. The vast majority of U.S. children have shown signs of positive mental health, according to the latest [CDC data on the subject](#). Parents most recently reported that their child [mostly or always showed](#):

- Affection (97.0%), resilience (87.9%), positivity (98.7%) and curiosity (93.9%) among children ages 3-5 years
- Curiosity (93.0%), persistence (84.2%), and self-control (73.8%) among children ages 6-11 years
- Curiosity (86.5%), persistence (84.7%), and self-control (79.8%) among children ages 12-17 years

At the same time, many youths are facing serious and growing challenges. The [CDC's 2021 Youth Risk Behavior Survey](#) shows that many issues related to the mental health and well-being of our youths have worsened over the past decade.

- 42% of all high school students struggle with persistent feelings of sadness or hopelessness
- Among female students, nearly 6 in 10 reported feeling persistently sad or hopeless and nearly 7 in 10 LGBTQ+ students felt the same
- Across every racial and ethnic group, feelings of sadness or hopelessness increased
- 29% of high school students said they'd experienced poor mental health in the past 30 days
- Over 1 in 5 high school students (22%) seriously considered attempting suicide
- 1 in 10 (10%) attempted suicide
- 1 in 40 (3%) had made a suicide attempt requiring medical treatment

Data in Missouri also shows many of our children are struggling. The [2022 Missouri Student Survey](#), a survey of 1,804 students in grades 6-12, found:

- 11% of respondents seriously considered suicide, while 8.4% of respondents had planned suicide and 4.3% said they had attempted suicide
- Across Missouri, 15.5% of students surveyed said they often or always had felt hopeless about the future in the month prior to completing the survey
- About a quarter of respondents (24.3%) felt like not eating or eating more than usual in the past month and over a third (37.4%) were having difficulty focusing on school work
- 27.7% said they were often or always very sad

According to the CDC, 1 in 6 children, ages 6-17, experience a mental health disorder each year, but only 20 percent of those kids receive care from a mental health provider. And for youth who display warning signs of a mental health illness or need, there is an average of an 8- to 10-year gap between when kids start to show symptoms and when they start to receive care.

Early intervention is critical, as 50 percent of all lifetime mental illness begins by age 14 and 75 percent by age 24.

The Stressors

Social Media

In 2022, U.S. Surgeon General's Office [issued an advisory](#) regarding social media and youth mental health. While there is not yet enough evidence to say that social media use is sufficiently safe for children and adolescents, there are a number of studies pointing to numerous negative impacts.

Excessive time spent online exacerbates issues. The advisory [cites a 2019 study](#) that found children and adolescents who spend over three hours per day on social media are at double the risk of poor mental health, experiencing symptoms of depression and anxiety. The average teenager, the advisory notes, spends [3.5 hours a day on social media](#).

Studies have pointed to adolescent social media users experiencing body dissatisfaction, eating disorders and low self-esteem. At the same time, social media can offer important opportunities for connection, particularly for marginalized populations, the advisory states. The U.S. Surgeon General [offers sets of tips](#) for parents and caregivers, children and adolescents and other key stakeholders with regards to social media use.

Mass Violence

When a high school student experiences an act of violence in their community, they are at a higher risk of experiencing suicidal thoughts and behaviors. And, according to a [2023 CDC report](#), one out of five high school students have witnessed community violence in their lives. The report notes that “different communities, populations and racial and ethnic groups face disproportionate exposure to community violence related to structural racism and inequities that might have increased during the COVID-19 pandemic.”

Societal Issues

According to the [American Psychological Association](#), other societal factors leading to mental health challenges among children in the U.S. include poverty, food insecurity, homelessness and lack of access to health care and education.

Lack of Access in Schools

Missouri ranks among the lowest states in the U.S. (43rd) for youth who have experienced a major depressive episode who have not received treatment, [according to Mental Health America](#). A growing number of school districts and behavioral health systems are partnering to meet children where they spend much of their time – in school buildings. [Seventy percent](#) of kids needing mental health support receive mental health services in a school setting. However, a shortage of mental health providers across the U.S. is causing a strain on support for schools. [About 55% of U.S. public schools offer mental health assessments](#) and even fewer (42%) offer treatment services. Mental health services in

schools not only impact mental health issues, such as anxiety and depression, but also have a direct impact on overall behavior, attendance, substance use, risky sexual behaviors, and suicidal thoughts.

Helping Our Kids

As previously stated, of the millions of kids who experience mental health concerns each year, only 20 percent are getting the care they need. In the latest Youth Risk Behavior Survey, the CDC began collecting survey data on three new variables tied to better protecting our children and determining how many are among the most vulnerable. The survey now measures school connectedness, parental monitoring and unstable housing.

School connectedness and parental monitoring are factors that the CDC says help “improve health outcomes or reduce the effects of stressful life events,” while youths with unstable housing are more likely to experience violence, use substances or experience higher rates of poor mental health. According to the CDC:

- 61% of high school students surveyed said they felt close to people at school
- 86% said their parents or guardians most of the time knew who they were with and where they were going
- 3% said they experienced unstable housing in the past month

One of the best things parents can do is know the warning signs that their kids may need help, and then intervene as early as possible.

Warning Signs

Here are some signs and symptoms to look for when considering if your child needs mental health support:

- Changes in sleeping or eating patterns
- Changes in mood, including outbursts or extreme irritability
- Persistent sadness
- Losing interest in or withdrawing from activities they normally enjoy
- Starting or increasing substance use
- Hurting oneself or talking about hurting oneself
- Talking about death or suicide
- Frequent headaches or stomachaches
- Difficulty concentrating
- Changes in academic performance
- Avoiding or missing school

Talking About Mental Health

We know kids don't always show signs of mental health concerns and can be good at hiding what they are going through or feeling. That's why it's important to have conversations about mental health and ask about their mental health.

For example, you could mention reading this report and ask your child, “Have you noticed an increase in feelings of sadness or stress among your friends? Do you ever feel that way, too?” You also can encourage further conversation by sharing your mental health status. For example, “All the news about school violence makes me feel so anxious. How have you been feeling about it?”

Another tip is a daily mental health check-in with your family. This could be done using weather terms. For example, everyone can take turns at dinner describing their mental health by selecting appropriate weather conditions. For happiness, you could say you are feeling sunny. For sadness, you could say you are feeling rainy. For a really bad day, you could say you are experiencing severe thunderstorms. Having these conversations normalize mental health for your kids and also clues you into any issues your kids might be experiencing.

Screenings

The U.S. Preventive Service Task Force is made of up health professionals and psychologists who evaluate evidence on various preventive health services. The [task force now recommends](#) regular anxiety screenings for youth ages 8 to 18 and regular depression screenings for adolescents ages 12 to 18. This can be done with your primary care physician, school counselor, or mental health professionals.

Getting Help

It's hard to know when to ask for professional help. Dr. Garima Singh, a child and adolescent psychiatrist and Chief Medical Officer at Preferred Family Healthcare (PFH) says, if you are wondering if you should seek care for your child, the answer is yes. By the time you are considering this, it is time to seek support. Here is how PFH can help:

School-Based Services

PFH provides services inside schools. These services are provided to kids who have a mental health diagnosis and they receive these medically-necessary services onsite. This allows kids to receive the necessary treatment while preventing barriers to care such as transportation. As previously stated, 80 percent of kids who receive mental health care receive it in a school setting. This program is vital in providing early intervention and helping kids get the help they need. In addition to mental health benefits, partnerships between schools and community partners have proven to:

- Enhance the academic success of individual students
- Significantly improve attendance rates
- Help create a positive school climate
- Improve discipline rates
- Increase graduation rates

Learn more [here](#) or contact your school's school counselor to get started.

Outpatient Therapy and Counseling

Sometimes talking to an expert, who can remain objective and provide sound advice and guidance, can be a great launching pad toward progress. We work with children as young as three through their adolescent years and can provide individual or family therapy support. Learn more [here](#).

Youth Psychiatry

PFH's psychiatry team can work with your child to help manage symptoms through medication. The team works closely with your child's other providers to make sure medications are working well and adjusted as needed over time. Learn more [here](#).

Youth Community Services (Case Management)

PFH's youth support services provide community-based services for kids and families with serious emotional disturbances and mental health disorders. We partner with youth, families, and various community agencies involved in the family's life to identify and build on the youth and family's strengths and supports. We also provide evidence-based interventions, skill-building, access to and coordination with community resources, education about mental health symptoms and treatment, and crisis prevention, response and post-vention. Learn more [here](#).

Youth Recovery Services

Our team provides individualized care to help your child overcome substance use concerns and addiction. We offer several levels of care, including residential support. Learn more [here](#).

Getting Started

To get started, call us at 660-665-1962 or visit pfh.org to submit a contact form or to learn more.

If you or a loved one are in crisis, please call or text 988 to reach the Suicide and Crisis Lifeline.