

Mental Health Inequities Among Springfield Teens

Preliminary findings from the 2017 Youth Health Survey and forthcoming 2018 Springfield Health Equity Report

In 2013, the Public Health Institute of Western Massachusetts released the first Springfield Health Equity Report to provide our community and its leaders with information about the social and economic factors influencing health in Springfield. The report highlighted findings showing how many poor health outcomes inequitably affect people of color and Springfield residents more broadly compared with those of Massachusetts overall.

As we work to update this report for 2018, we strive to understand what drives health inequity in our community and how we can work together to address it. We can spread a culture of health in Springfield and advance effective solutions to our community's health challenges by:

- Promoting collaboration;
- Advocating for policy changes to promote equity;
- Highlighting inequities through data;
- Engaging and including community members in all parts of our processes to improve health;
- Building off our collective strengths; and
- Making health and well-being a shared value.

This briefing provides a preview of some of our preliminary findings from the 2017 Youth Health Survey (YHS) conducted in Springfield Public Schools.* This spotlight on youth illuminates mental health inequities affecting Springfield's teens, particularly, those who are female; identify as lesbian, gay, bisexual, and/or transgender (LGBT); or are students of color.

Select Findings on Mental Health Inequities

The 2017 Springfield YHS revealed substantial mental health concerns among eighth-graders in Springfield, and inequities when disaggregating the data by sex; gender identity and sexual orientation; and race and ethnicity. Over the 12 months prior to the survey, students who identified as LGBT demonstrated substantially higher rates

of suicide ideation, self-harm, and feelings of hopelessness than students identifying as heterosexual. These concerning self-reports of less optimal mental health were also higher among female students than male students.

Students who identified as LGBT had more than double the rates of sustained hopelessness (60%) compared to heterosexual students (27%). LGBT students also reported high rates of suicide attempts (20%), suicide ideation (28%) and self-harm (38%) (Figure 1).

Self-reported mental health indicators, by gender and sexual identity/orientation

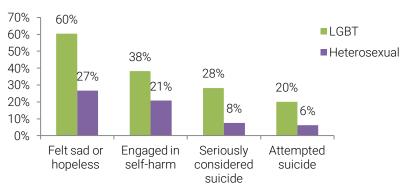


Figure 1

^{* *}The 2017 Youth Health Survey (YHS) was self-administered electronically with eighth grade Springfield Public School students in 2017; 1,277 students completed the survey. The Public Health Institute of Western Massachusetts led the implementation of the YHS in collaboration with Springfield Public Schools, Springfield Department of Health and Human Services, Gándara Mental Health Center, Stop Access Springfield Coalition, and Martin Luther King Jr. Family Services Drug Free Coalition. For more information about the 2017 YHS and to access our interactive website, visit http://www.partnersforahealthiercommunity.org/youth-survey.

Self-reported mental health indicators, by sex

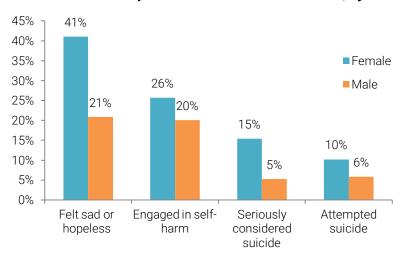


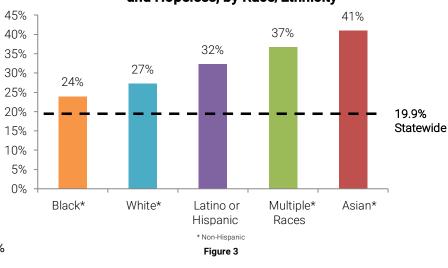
Figure 2

• Female students also experienced double the rates of sustained hopelessness (41%) compared to males (21%) and were more likely to report needing to talk with an adult about their feelings or problems (50%), engaging in self-harm (26%), and having seriously considered attempting suicide (15%) than males (Figure 2).

When disaggregating YHS mental health data by race/ethnicity, most of the indicators do not demonstrate overt or obvious disparities. However, some research suggests a need to examine the wording of questions to adequately understand cultural differences in interpreting wording of mental health questions.

- When compared to all students in Massachusetts (20%), 8th graders in Springfield, across races/ethnicities, report higher rates of feeling sad or hopeless every day for two weeks or more in a row. The rate for all 8th graders in Springfield in 2017 (31%) has decreased only slightly from the 2015 YHS (34%).
- Students who identified as Latino, Multiple Races, and Asian[†] reported some of the highest rates of feeling sad or hopeless every day for at least two weeks in a row (32%, 37%, and 41% respectively), compared to 27% of non-Hispanic white students, and 24% of non-Hispanic black students (Figure 3).

Percent of 8th Graders Who Reported Feeling Sad and Hopeless, by Race/Ethnicity



Statewide data from 2015 Massachusetts Youth Health Survey. Available at: http://www.mass.gov/eohhs/docs/dph/behavioral-risk/youth-health-risk-report-2015.pdf

Help Seeking Behaviors and Reaching/Supporting Youth

Preliminary analysis also shows that despite the high prevalence of depressive symptoms and self-harm behaviors, 71% of youth who reported feeling they needed to talk to an adult about their feelings or problems reached out to trusted adults in their lives: family members (70%), teachers (29%), school psychologists/counselors (34%), non-school psychologists (28%), and other adults in their communities (22%). Additional analyses of these data may provide much-needed context and further insight into understanding which youth need help and support and which are reaching out to trusted adults. We need to ensure these adults are receptive to youth reaching out and are able to provide them the unbiased, non-judgmental support they deserve and need. They also need to be equipped with the skills to identify and address depression among the youth they know, teach, serve, and support.

[†] These data should be interpreted with caution given the small number of respondents who identified as Asian (n=29).