

# Fairfax County Youth Mental Health

Pandemic and Post Pandemic Response

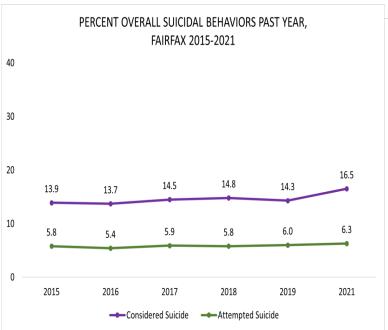
Daryl Washington, LCSW
Fairfax-Falls Church CSB Executive Director

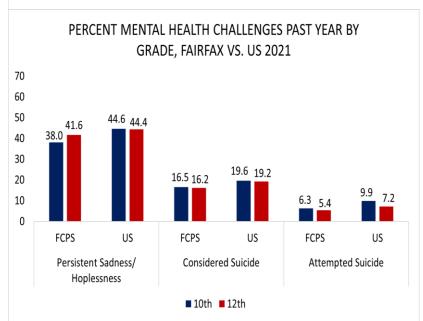
January 13, 2023

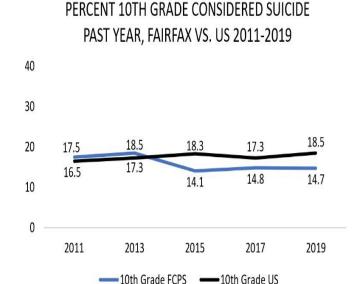
## **National Data on Pandemic Impact**

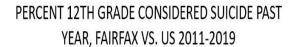
- Estimate that more than 140,000 children have lost a parent or grandparent caregiver to COVID-19.
- The proportion of mental health-related ED visits for children ages 5-11 increased 24% and for youth 12-17, 31% (CDC).
- ED visits for suspected suicide attempts by teenage girls increased 50% (Dartmouth study).
- More than 25% of high school students nationally report worsened emotional and cognitive health; and more than 20% of parents with children ages 5-12 report their children experienced worsened mental or emotional health (Kaiser Family Foundation).
- One in four young adults has struggled with suicidal thoughts (CDC).
- Increases in distress symptoms are common during disasters, but most people cope well and do not go on to develop mental health disorders. 2

FAIRFAXCOUNTY



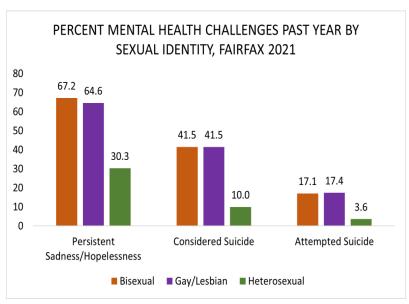


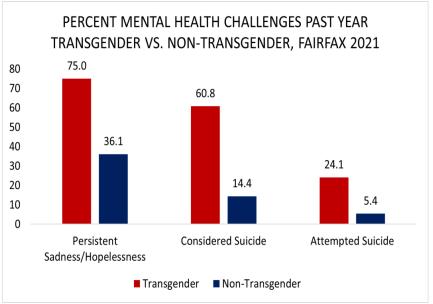


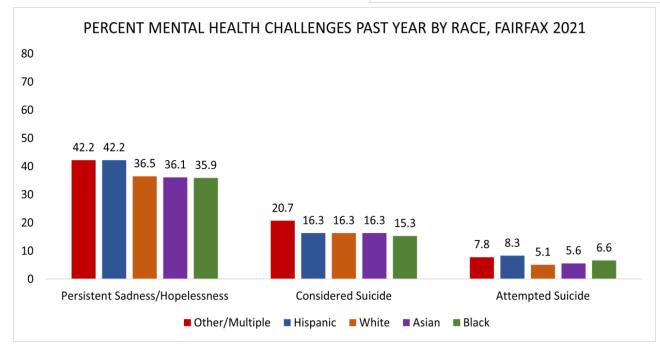




#### FAIRFAXCOUNTY





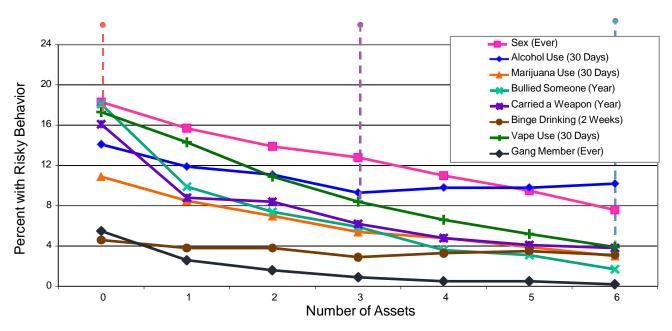


## **Addressing Local Mental Health Needs**

- CSB Clinicians placed in 14 FCPS schools.
- Healthy Minds Fairfax Short-term Behavioral Health Services focus on youth with emerging mental health concerns.
  - All middle and high schools are potentially eligible for this service.
  - In School Year 22-23, students in 25 high need elementary schools added.
- CSB and clinicians in the private sector offer in-person and telehealth services.
- Increase of peer support services for parents/caregivers of youth with mental health needs.
- FCPS conducted the Signs of Suicide program and screener with 7<sup>th</sup>, 9<sup>th</sup> and 11<sup>th</sup> grades.
- FCPS added 13 social workers and 5 psychologists.

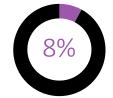
# Three to Succeed Asset Graph for Fairfax County Youth (Grade 8, 10, 12)



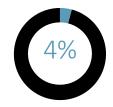




Of the students with 0 assets vaped in the past 30 days



Of the students with 3 assets vaped in the past 30 days

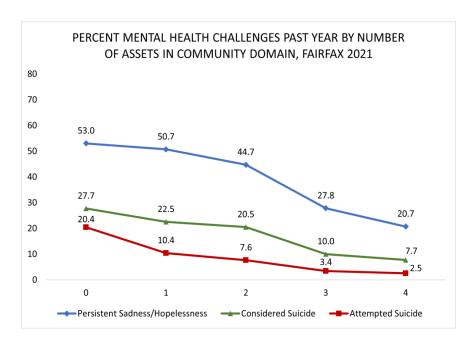


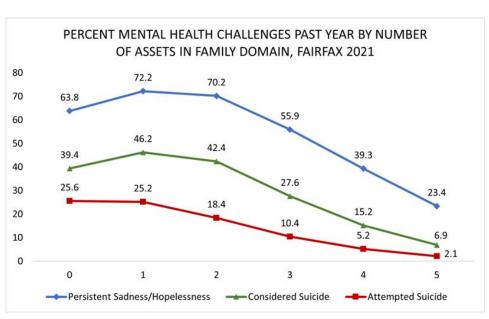
Of the students with 6 assets vaped in the past 30 days

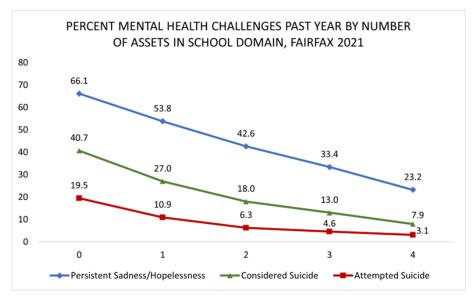
- Accepting Responsibility for One's Actions
- · Performing Community Service
- · Having Teachers Recognize Good Work
- Having Community Adults to Talk to
- Participating in Extracurricular Activities
- Having Parents Available for Help











### **Assets**

#### **School Assets:**

- Teachers noticing a good job of students
- Opportunities to talk to teachers one-onone
- · Feeling safe at school
- School communication with parents when students do well

#### Family Assets:

- Parents available to help
- Parents who know whereabouts of their children
- Parents' disapproval of marijuana use by youth
- Family members respectful of each other
- Having youth's input in family decisions

#### **Community Assets:**

- Availability of extracurricular activities
- Adults' disapproval of youth marijuana use
- Adults in community to talk to
- Neighbors noticing a good job of students

#### **Individual Assets:**

- Regular participation in extracurricular activities
- Regular volunteer activities
- Following rules
- Thinking through possible results before making a decision
- Accepting responsibility for actions and mistakes
- Doing their best even for jobs they dislike

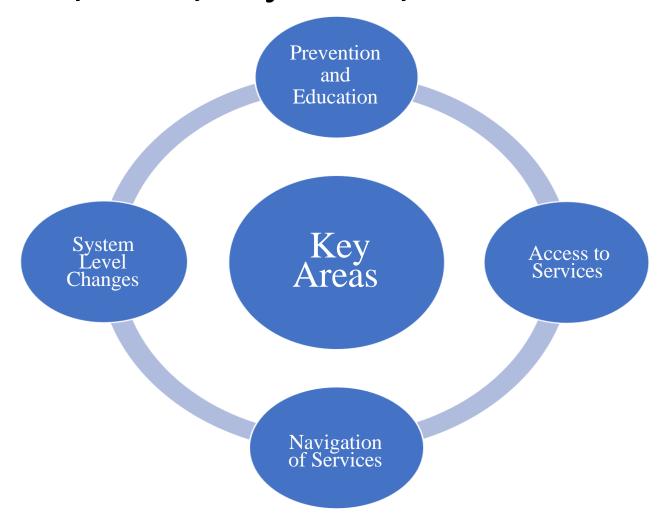


## What's Next for Youth Behavioral Health?

- Focus on workforce issues.
- Continue to focus on preventive measures (e.g., Three to Succeed).
- Development of new community plan for children's behavioral health services.
- Countywide opioid response plan for FY 23-25 coming very soon.



# Children's Behavioral Health Plan Key Areas, Goals, Objectives, and Action Steps



#### Key Areas and Goals

**Key Area: Prevention and Education:** To raise awareness of behavioral health, reduce the stigma that is associated with behavioral health, and to promote the development of protective factors.

Goal 1: Fostering connection and belonging among children and youth.

Goal 2: Equipping trusted adults to build social-emotional skills in the children and youth they work with.

Goal 3: Raising awareness of mental health and substance use.

**Key Area: Access to Behavioral Health Services:** To utilize a family-centered approach to connect children, youth, and their families to a complete range of behavioral health services that are equitable and affordable.

Goal: Expanding access to quality family-centered behavioral health services across the continuum of services.

<u>Key Area: Navigation of Children's Behavioral Health Services:</u> To reduce barriers and length of time to receive services by developing strategies to connect children, youth, and their families to appropriate levels of behavioral health services.

Goal: Developing an easier way for youth, their family members, and community members to navigate the children's behavioral health system.

**<u>Key Area: System Level Changes:</u>** To infuse equity and <u>trauma-focused</u> care throughout the behavioral health system for children, youth, and their families.

Goal 1: Ensuring that children's behavioral health services is seen through an equity lens.

Goal 2: Continuing to integrate <u>trauma-informed practice</u> into all public and private child serving agencies.



# **Questions?**