The Partnership Center

Center for Faith-based and Neighborhood Partnerships
U.S. Department of Health and Human Services

Youth Mental Health and Well-being
in Faith and Community Settings:

PRACTICING CONNECTEDNESS

A toolkit of the HHS Partnership Center

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INTRODUCTION

Mental Health is at a crisis level for today's youth. From the Surgeon General for the United States to parents in homes across the country, people are recognizing that our nation's youth are experiencing unprecedented mental health challenges. Data supports this growing concern. More than 40 percent of teenagers state that they struggle with persistent feelings of sadness or hopelessness, and more than half of parents and caregivers express concern over their children's mental well-being. The first section of this report paints a picture of the status of mental health for youth in the U.S., as well as defining key terms related to mental health. The guide also works to put the challenges for youth mental health in context of different communities, cultures, and diverse experiences.

While the challenge is great, faith and community leaders are addressing this crisis through awareness and training. Some key points and resources are outlined in the next section of this guide empowering these leaders to be part of the solution in their community. This guide also points out how faith and community leaders can promote health and wellbeing in their community to provide youth with a strong start and reduce risk factors that increase the likelihood of mental health challenges in their future.

One of the best ways that faith and community leaders are increasing protective factors for youth is by leveraging the power of *connectedness through community* to prevent and address mental health challenges in youth. Communities can offer connectedness, an asset that congregations and communities have in abundance, as a strong protective factor for youth reducing the likelihood of a variety of health risk behaviors. Specifically, connectedness can reduce the risk of suicide and emotional disorders for youth.[1]

Faith and community leaders have an important opportunity to help youth feel connected to their community, as well as to their family and to their schools.

This toolkit seeks to support youth through and in faith communities and families. Here at the introduction, it is important to acknowledge that both faith and family can take many forms in every community. Both the terms "faith" and "congregations" are used and are meant to be interpreted as inclusive of all faith traditions and communities. The same for families and the diversity of family units in all communities. Every family is unique, and this toolkit seeks to encourage families in all their forms; chosen family,

extended family, guardians, and households. It includes biological parents but also is inclusive of stepparents, foster families, grandfamilies, kinship families, or other caregivers.[2]

In total, this toolkit aims to provide the information, tools, and strategies that will help increase awareness about youth mental health, foster connection for youth, and support the actions that families, faith and community organizations can take to promote youth mental health and strengthen resilience through the power of connection and community.

INCREASE AWARENESS

The Struggle is Real Among Youth

According to the U.S. Surgeon General's Youth Mental Health Advisory, mental health challenges are the leading cause of disability and poor life outcomes in young people. In recent years, there have been significant increases in certain mental health disorders in youth, including depression, anxiety, and suicidal ideation.

Understanding the current state of the mental health of young people will be helpful to faith and community leaders seeking to support youth in their community.

Consider the following data provided by the Surgeon General in his Youth Mental Health Advisory:[3]

➤ From 2009 to 2019, the proportion of high school students reporting persistent feelings of sadness or hopelessness increased by 40 percent;

➤ Those seriously considering attempting suicide increased by 36 percent; and

➤ Young persons creating a suicide plan increased by 44 percent.

➤ Between 2007 and 2018, suicide rates among youth ages 10-24 in the U.S. increased by 57 percent.

➤ Girls are much more likely to be diagnosed with anxiety, depression, or an eating disorder.

➤ Boys are more likely to die by suicide or be diagnosed with a behavior disorder, such as attention deficit hyperactivity disorder (ADHD).

➤ Children growing up in poverty are two to three times more likely to develop mental health conditions than peers with higher socioeconomic status.

From other experts, we learn that:

➤ Up to 70 percent of youth in the juvenile justice system suffer from mental health disorders.[4]

➤ 73 percent of LGBTQ youth report experiencing symptoms of anxiety and 58 percent reported experiencing symptoms of depression. 45 percent of LGBTQ youth seriously considered suicide in the past year.[5]

➤ In recent years, suicide rates among Black children (below age 13) have been increasing rapidly, with Black children nearly twice as likely to die by suicide than White children. The suicide death rate among Black youth has been found to be increasing faster than any other racial/ ethnic group.[6]

And all of that was BEFORE the COVID-19 pandemic.

During the pandemic, children, adolescents, and young adults have faced unprecedented challenges.

➤ Far too many children and youth have lost a loved one. It's estimated that as of June 2021, more than 140,000 children in the US had lost a parent or grandparent caregiver to COVID-19. [7]

➤ Early estimates from the National Center for Health Statistics suggest there were more than 6,600 deaths by suicide among the 10-24 age group in 2020.[8]

➤ In early 2021, emergency department visits in the U.S. for suspected suicide attempts were 51 percent higher for adolescent girls and 4 percent higher for adolescent boys compared to the same time period in early 2019.[9]

➤ Youth with poor mental health may struggle with school and grades, decision making, and their health. Mental health problems in youth are also often associated with other health and behavioral risks such as increased risk of drug use, experiencing violence, and higher risk of sexual behaviors.[10]

> *"Whole person care is a multi-dimensional process which involves an individual's physical, mental, emotional & spiritual health and wellbeing; it's not textbook, it's positive relational connection!"*

Dr. Coralanne Griffith-Hunte, Founder, Created for Greatness Leadership Group

Everyone from the Surgeon General[11] to multiple professional associations[12] have declared the mental health of our youth as a crisis. And closer to home, more than half of parents and caregivers express concern over their children's mental well-being.

While the challenge is great, we are not without hope.

A public health approach to mental illness in children and youth emphasizes the role of community as a part of the solution.[13] This approach emphasizes that mental health in children and youth is the result of a *complex set of factors*, both negative and positive. Bringing these two points together, faith and community leaders can promote more positive factors that increase wellness and reduce negative factors that increase the possibility of illness.

A goal of this toolkit is to move faith and community leaders toward an increased awareness of the scale for youth and their wellbeing. That metaphorical scale can tip toward wellness or illness depending on what kind of weights of environmental factors or experiences are placed in or removed from the life of youth.[14]   Through this toolkit, the HHS Partnership Center hopes that faith and community leaders will continue to see themselves as part of the solution tipping the scale toward positive factors and away from risk factors.

What is Mental and Emotional Health?

Mental health is a key component of health for anyone, including children and youth. Mental health is sometimes also called **emotional health**.

As defined by the CDC, mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.[15]

Mental health conditions are common for youth. It is estimated that close to half of adolescents have had a mental health disorder sometime in their lives. The most common disorders in adolescence include those related to anxiety, depression, attention deficit-hyperactivity and disordered eating.[16]

Research suggests that 50 percent of lifetime mental health conditions begin by age 14 and 75 percent begin by age 24.[17]

Feelings of anxiety, nervousness, or feeling down are normal features of teenage development. However, a mental or
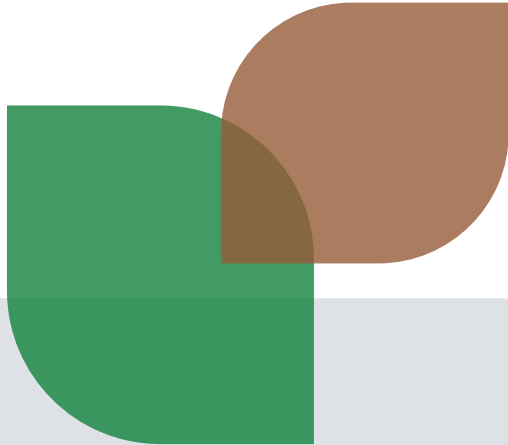
emotional disorder may be present when these symptoms are persistent and affect behavior. A disorder may also be indicated when these symptoms disrupt regular activities and daily functioning.[18]

Mental health conditions are a real form of illness that may be diagnosed and treated by a mental health professional.

The good news is that mental and emotional wellness can be achieved and young people that experience mental health challenges can and do improve their ability to function at home, in school, and in the community.

New resources like the 988 Suicide and Crisis Lifeline, can connect youth and adults to the help they need. Strategies, and treatments are available to help individuals manage their illness, maintain their recovery, and live a full and healthy life.

There are also resources like Youth.gov that offer information and resources on youth mental health for individuals who work with young people including warning signs, risk and protective factors, co-occurring disorders, and resilience.

Faith and community organizations can promote awareness by educating the members of your communities and congregations about mental health issues through educational forums and other opportunities which can include:

➤ Inviting local mental health experts and/or individuals who have experience with mental illness to speak with your congregation or at community gatherings.

➤ Sharing facts and common myths about mental health.

➤ Promoting this shareable content in your organization and in the community on children and youth mental health.

By taking these and other steps, faith and community leaders increase their awareness and engagement with mental illness as a support and encouragement to youth and children with mental health disorders.

But the work does not end there.

Faith and community leaders can help reduce the likelihood of mental health challenges and increase opportunities for mental well-being using tools, strategies and information included throughout the rest of this resource.

Putting Mental Health, Trauma, and Resilience in Context of Culture and Community

Trauma, and its many forms, can have an impact on the mental well-being for children and youth. Faith and community leaders benefit from understanding the impact that trauma has on mental health for youth.

Understanding Trauma

SAMHSA describes individual **trauma** as an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening.[19] SAMHSA notes that trauma has lasting adverse effects on an individual's functioning, as well as their mental, physical, social, emotional or spiritual well-being.[20]

Adverse childhood experiences, also known as ACEs, are a specific form of trauma that occur in childhood (0-17 years). Examples include but not limited to,

➤ experiencing violence, abuse, or neglect as a child;

➤ witnessing violence in the home or community; and

➤ having a family member attempt or die by suicide.[21]

Children exposed to abuse, violence, neglect, mental illness, substance-use disorders in their household — or any other trauma or ACEs — may experience poorer health outcomes, learning problems, or be at higher risk for substance use disorders and other long- term harms.[22] Children and youth that experience natural disasters, acts of violence in the community or community unrest may also experience negative health outcomes.[23]

About 61% of adults surveyed across 25 states reported they had experienced at least one type of ACE before age 18, and nearly 1 in 6 reported they had experienced four or more types of ACEs.[24]

Understanding Grief

Grief is a subset of trauma and important to consider when thinking about youth mental health. Grief is a strong, sometimes overwhelming reaction to challenges in life, like death or moving to a new town.[25] How a child or youth expresses grief is unique to each, but grief can lead to challenges in normal functioning such as being withdrawn from social interaction and/or increase in risk behaviors. This is when a child may need additional support to address their grief.[26]

> "The power of communities coming together to heal and destigmatize mental health should never be underestimated. Our youth feel most empowered to address their mental health needs when they belong to a coalition of communities that stand up for these needs."
>
> *Dr. Rukhsana Chaudhry, American Muslim Health Professionals, Director of Mental Health Programming*

Mental Health in Context

Youth experiences with mental health challenges is the result of a complex set of influences that include the environment around them, social conditions, culture, and public policies.

Some of the factors and systems listed in this graphic by the Surgeon General's office shows the potential negative impact on the mental and emotional well-being of a youth into their adulthood. This can include a past harm experienced in a faith community such as feelings of being unheard or disrespected by those who are assigned as their leaders, conflict among youth in their religious group, or not being able to measure up to the standard of religious doctrine. Recognizing past harms and challenges, even generational harm, can be one way to help youth feel that a faith community can be a safe space for them. In addition to recognizing past harms and challenges, leading with empathy in these spaces can open up the door for ongoing communication, and ultimately the possibility of the youth reaching out for help.

FACTORS THAT CAN SHAPE THE MENTAL HEALTH OF YOUNG PEOPLE

Source: Adapted from WHO's Determinants of Adolescent Health Development: An Ecological Model, 2014 and Bronfenbrenner & Ceci (1994)

Society — Social and economic inequalities, discrimination, racism, migration, media and technology, popular culture, government policies

Environment — Neighborhood safety, access to green spaces, healthy food, housing, health care, pollution, natural disasters, climate change

Community — Relationships with peers, teachers, and mentors; faith community; school climate, academic pressure, community support

Family — Relationships with parents, caregivers, and siblings; family mental health; financial stability; domestic violence; trauma

Individual — Age, genetics, race, ethnicity, gender, sexual orientation, disability, beliefs, knowledge, attitudes, coping skills

These are examples and not a comprehensive list of factors

Many events in the community can also be traumatic for young people --such as COVID-related deaths, mass shootings, deaths at the hands of police officers and other traumatic events. These factors place a heavy burden on individuals, families, and communities.

Because of the diverse range of cultural contexts for youth, it is important to approach mental health one youth at a time, recognizing and appreciating the unique, intersectional, and wide-ranging elements of their background.

Biological and environmental factors can also be interrelated, making it difficult to isolate unique "causes" of mental health challenges. For example, if a child is genetically predisposed to depression, they might be more affected by experiences such as bullying than other children.[27]

Considerations related to culture also relate to the solutions to address mental health for youth in our communities.

As another example, efforts have been made to build collaborative relationships between mental health providers and faith communities to address behavioral health disparities amongst the African American community. The goal is to nurture cultural competency and diminish feelings of mistrust that can be associated with mental health care providers. As a mental health professional at Mt. Sinai Hospital and a Psychiatry Professor at Columbia University, Dr. Sidney Hankerson has been working to facilitate such collaborative strategies. Dr. Hankerson notes, "Religious congregations are often the first, at times, the
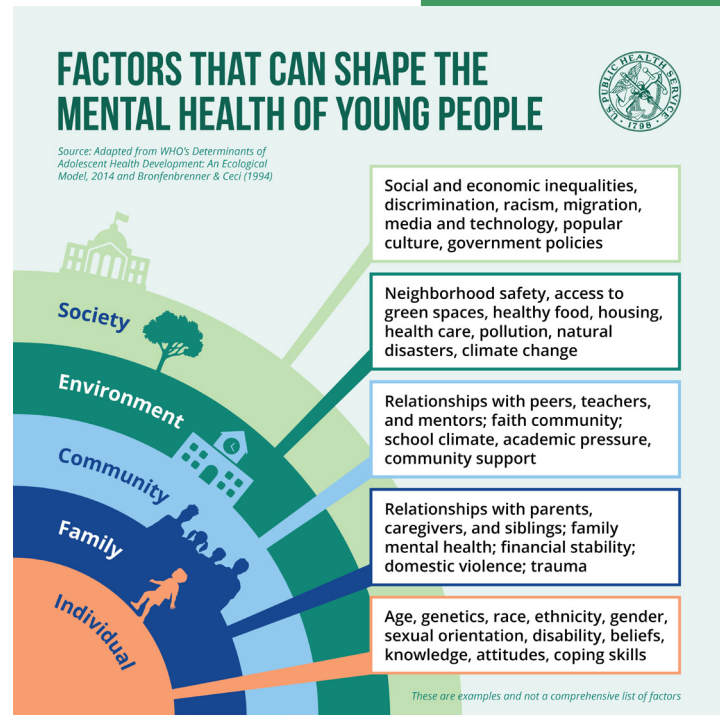
only point of contact for people seeking help for mental illness."[28] Through the PEW Research Center's Religious Landscape Study, 83% of African Americans reported the highest rate of strong religious belief among all racial-ethnic groups.[29] This reality led Hankerson to encourage faith leaders like those at First Corinthian Baptist Church to partner with mental health care providers, in the community, as a first step of care which lead to the creation of the HOPE Center. The work of the HOPE Center extends to youth with programming and services focused and tailored to their needs and concerns.

Both biological and environmental factors play a salient part in youth mental health. This partnership begins the process of instilling a mending connection with youth and mental health providers by encouraging faith leaders to help inform the cultural needs of the community. This research insists that by utilizing faith and community leaders' engagement, there can be increases in cultural competence, trust, confidence, and better behavioral health outcomes restored between these communities.

Resilience In Context

There are several resources present or available to youth that may make trauma less likely to affect their mental health and strengthen their resilience, such as:

➤ Strong support system,

➤ Having little or no prior traumatic experiences, and

➤ If the individual has many resilient characteristics.

People develop **resilient characteristics** by learning better skills and strategies for managing stress and better ways of thinking about life's challenges.[30] To be resilient one must tap into personal strengths and the support of family, friends, neighbors, school faculty and/or faith communities. Resilient characteristics include:

➤ Social support and close relationships with family and friends.

➤ The ability to manage strong feelings and impulses.

➤ Good problem-solving skills.

➤ Feeling in control.

➤ Asking for help and seeking resources.

➤ Seeing yourself as resilient.

➤ Coping with stress in healthy ways.

➤ Helping others and finding positive meaning in life.

For more information visit HHS's website on Individual Resilience.

TOOLS & RESOURCES

When Does a Youth Need Help with Emotional and Mental Health?

It is a normal part of development for youth to experience a wide range of emotions. It can be tough to tell if a child's troubling behavior is just a part of growing up or behavior that should be discussed with a health professional.

Mental health disorders are characterized by persistent symptoms that affect how a young person feels, thinks, and acts. If there are behavioral signs and symptoms that last weeks or months and interfere with regular activities and daily functioning, such as relationships, schoolwork, sleeping, and eating, a mental health disorder may be present.[31]
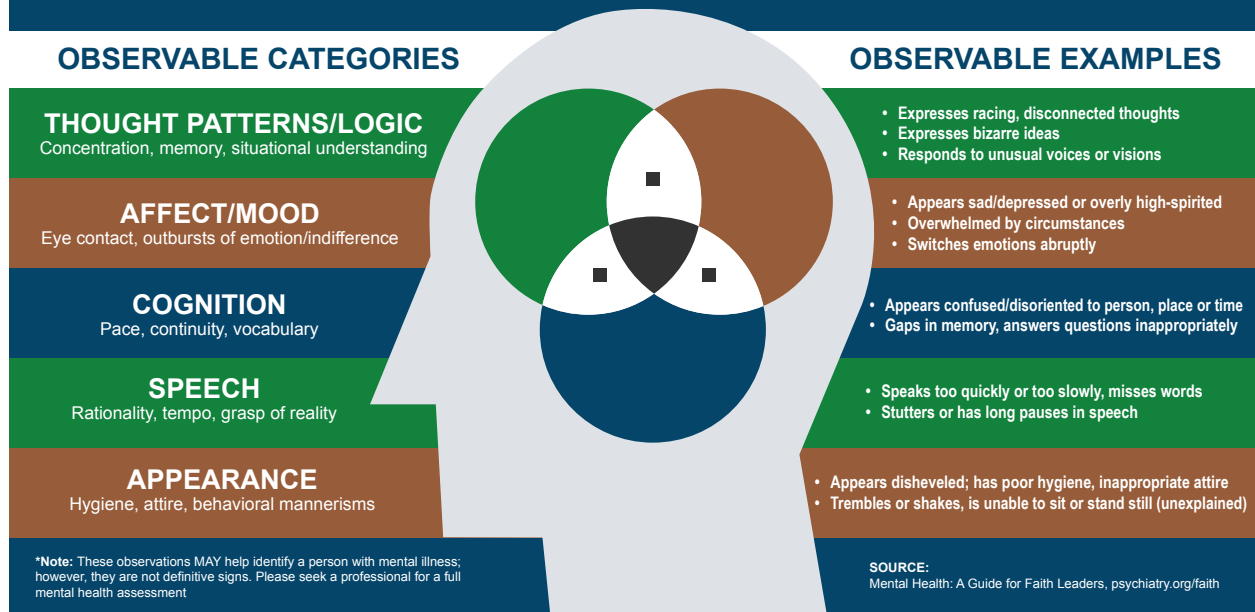
Common Mental Health Warning Signs

Mental health is not simply the presence or absence of symptoms. Variations in how adolescents experience symptoms can make identification and diagnosis of mental health disorders challenging.[3]

An adolescent might need help if they:[32]	Young children may benefit from an evaluation and treatment if they:
➤ Lose interest in activities that they used to enjoy ➤ Have low energy ➤ Have difficulty sleeping or eating ➤ Spend more time alone and avoid social activities ➤ Excessively exercise, diet, and/or binge eat ➤ Harm themselves (e.g., burning or cutting their skin) ➤ Use alcohol, tobacco, or other drugs ➤ Engage in risky or destructive behavior ➤ Have thoughts of suicide ➤ Think their mind is being controlled or is out of control or hear things other people cannot hear	➤ Have frequent tantrums or are intensely irritable much of the time ➤ Often talk about fears or worries ➤ Complain about frequent stomachaches or headaches with no known medical cause ➤ Are in constant motion and cannot sit quietly (except when they are watching videos or playing videogames) ➤ Sleep too much or too little, have frequent nightmares, or seem sleepy during the day ➤ Are not interested in playing with other children or have difficulty making friends ➤ Struggle academically or have experienced a recent decline in grades ➤ Repeat actions or check things many times out of fear that something bad may happen.

DO YOU KNOW THE SIGNS* OF MENTAL ILLNESS?

OBSERVABLE CATEGORIES

THOUGHT PATTERNS/LOGIC
Concentration, memory, situational understanding

AFFECT/MOOD
Eye contact, outbursts of emotion/indifference

COGNITION
Pace, continuity, vocabulary

SPEECH
Rationality, tempo, grasp of reality

APPEARANCE
Hygiene, attire, behavioral mannerisms

*Note: These observations MAY help identify a person with mental illness; however, they are not definitive signs. Please seek a professional for a full mental health assessment

OBSERVABLE EXAMPLES

- Expresses racing, disconnected thoughts
- Expresses bizarre ideas
- Responds to unusual voices or visions

- Appears sad/depressed or overly high-spirited
- Overwhelmed by circumstances
- Switches emotions abruptly

- Appears confused/disoriented to person, place or time
- Gaps in memory, answers questions inappropriately

- Speaks too quickly or too slowly, misses words
- Stutters or has long pauses in speech

- Appears disheveled; has poor hygiene, inappropriate attire
- Trembles or shakes, is unable to sit or stand still (unexplained)

SOURCE:
Mental Health: A Guide for Faith Leaders, psychiatry.org/faith

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The graphic above was developed using information from the American Psychiatric Association's Faith and Mental Health Partnership available at https://www.psychiatry.org/faith. While not specific to youth mental health, these observations may help identify youth with a mental health challenge.

Connecting to Help

If a faith or community leader observes any of these mental health warning signs, they can support youth, parents or guardians by connecting them to information, resources, and/or professional help such as a healthcare provider or mental health professional.

In crisis or life-threatening situations, they can call 988 to connect the youth to the 988 Suicide and Crisis Lifeline or use the 988 Lifeline Chat, or encourage the individual in crisis to go to their nearest hospital emergency room.

Visit any of the following pages to identify treatment providers in your community.

➤ FindTreatment.gov is a confidential and anonymous source of information for persons seeking treatment facilities in the United States or U.S. Territories for substance use/addiction and/or mental health problems.

If you are thinking about harming yourself or attempting suicide, tell someone who can help right away.

➤ Call 911 for emergency services.

➤ Go to the nearest hospital emergency room.

➤ Call or text 988 to connect with the 988 Suicide & Crisis Lifeline. The Lifeline provides 24-hour, confidential support to anyone in suicidal crisis or emotional distress. Support is also available via live chat.

➤ Find a Health Center helps you find a Health Center providing healthcare services in communities around the country. The majority of health centers provide mental health and substance use disorder services.[33]

➤ National institute for Mental Health's (NIMH) Help for Mental Illness page, also available in Spanish, provides additional information to identify treatment options in your area.

Early Intervention Makes a Difference

Research suggests that 50 percent of lifetime mental health conditions begin by age 14 and 75 percent begin by age 24. Severity of symptoms across a person's lifetime can be reduced significantly when these symptoms are identified and treated as early as possible.[34]

By encouraging youth and their parents or guardians to seek treatment, faith leaders and communities can improve outcomes significantly for individuals with mental illness over the life course.

For more information about how to identify and support early identification of serious mental illness, consider the Early Serious Mental Illness: Guide for Faith Communities. Remember, the sooner someone receives help, the less likely that person will need to be hospitalized or suffer long term disability.

Healthy Conversations about Mental Health

Even though some youth have more positive attitudes and beliefs about individuals with mental illness, they still report having fears and concerns that keep them from seeking treatment.[35] At the same time, research shows that negative and discriminating attitudes about mental health are greater among minority communities.[36]

Faith and Community Leaders can start the conversation

Faith and community leaders and schools have an opportunity to shift the conversation on mental illness in their community, especially for youth. These shifts can be inspired by opportunities that bring mental health into everyday conversation through discussions or storytelling, by a prominent community member or even a youth willing to share their story, or by sermons or educational forums including documentaries and films that can lead to robust discussions around this issue. Such shifts can be the difference between life and death when youth are made to feel safe to speak out when they are having concerns or challenges related to their mental health.

If everyone joins together to talk about mental health, as the community would any other medical condition, together the community can help to diminish the stigma that may prevent a young person from seeking the help they need.

Talk about the importance of mental health in community gatherings: The larger the gathering, the more people will see and hear that it is ok to talk about mental health in the community setting. Check out these guides from SAMHSA for help in having conversations about mental health in your community.

Engage senior leaders: To the extent possible and appropriate, it is also powerful to have the most senior leader in the community or congregation address this topic.

Set the table: Organize additional meetings, dinners, or other gatherings for members of your congregation or school community to have conversations about mental health.

Involve youth in organizing gatherings, selecting topics and speakers, setting the agenda and inviting participants.

Talk about how seeking help is ok: When talking about mental health, specifically say how it is ok and even advised to seek help when someone needs it.

Share the stories: Invite people with lived experience of mental illness share their story with the community-- either themselves or as a caregiver for a loved one with mental illness. If you cannot identify someone with experience with mental illness, you may find recommendations from the local chapters of organizations like the National Alliance on Mental Illness (NAMI) or Mental Health America (MHA) or others.

Invite mental health professionals to address your community: Mental health professionals can help the community understand more about what happens in mental health treatment. They can also explain how and when to make referrals or get connected to care. Knowing what happens in a treatment setting can lower the barrier to care for everyone in the community, including youth.

"Faith leaders are well positioned to partner with others to bring hope and healing to youth impacted by mental health challenges. Working together we can surround young people and their families with support, unconditional love, and compassion. Our youth are a blessing to the world and we need them to be healthy and courageous in the face of life's challenges. Faith communities can be advocates for quality, affordable, and accessible mental healthcare for youth and their families. By meeting the mental health needs of our children, we are investing in a brighter future for everyone."

Rev. Dr. Sarah Lund, DMin, MSW, MDiv
United Church of Christ, National Ministries

Helping Families have Conversations about Youth Mental Health

Parents can be empowered to help have healthy conversations with their youth as well. Sometimes, it can be hard to talk with youth about their concerns and challenges. The following are a few things to help parents or guardians keep in mind.

➤ *It all starts with a healthy and safe connection*: Important conversations don't happen without youth feeling like it is safe to talk with a parent.

➤ *Start small*: Don't lead the conversation with big questions. Start with smaller questions about their life and things they enjoy and work toward bigger questions about their well-being.

➤ *Lead with vulnerability*: When parents model vulnerability, youth will feel more comfortable being vulnerable with them.

➤ *Practice Active Listening*: Parents can give their full attention to their child or youth and reflect or repeat back what they are saying to make sure the parent understands what the child or youth is saying.[37] One of the most effective means of communication is in the ability to listen. If they feel they're being heard that's the first step toward progress.

➤ *Learn more about mental health concerns*: Participate in a training or learn more online about what mental health challenges look like for children and youth.

Here are some questions that parents can use to start conversations with youth about their mental health from www.mentalhealth.gov.

➤ Can you tell me more about what is happening? How are you feeling?

➤ Have you had feelings like this in the past?

➤ I'm here to listen. How can I help you?

➤ Do you feel like you want to talk to someone else about your problem?

➤ I'm worried about your safety. Can you tell me if you have thoughts about harming yourself or others? Are you having thoughts of suicide?

More resources and information for Parents is available at https://www.mentalhealth.gov/talk/parents-caregivers.

Prevention and Health Promotion for Children and Youth

As faith and community leaders connect youth to treatment for mental health challenges, they can also increase protective health factors for youth in their community. Small steps can help reduce the factors that contribute to mental health challenges for youth.

The CDC recommends some key strategies for health promotion for children and youth to increase the overall health of youth thereby reducing the risk factors that may contribute to mental health challenges.

Help Youth Start Healthy Habits Early

Help youth start strong by encouraging healthy habits in their life. Healthy habits include such things as healthy eating and regular physical activity. The CDC notes, "Establishing healthy behaviors to prevent chronic disease is easier and more effective during childhood and adolescence than trying to change unhealthy behaviors during adulthood." Faith communities, families and communities can all be places that celebrate healthy habits. Encourage youth to institute healthy habits in their everyday life.

Supporting Social and Emotional Learning

Social and emotional learning is about helping children and youth develop the skills they need for life. They include the skills they need to recognize and manage emotions, set, and achieve positive goals, appreciate the perspectives of others, establish and maintain positive relationships, and make responsible decisions. [38] Everyone can acknowledge and ask about youth's feelings as they model empathy. Faith communities, families and schools can all be places where children and youth develop positive relationships and learn the coping skills they need to thrive.

Sleep Makes a Difference

Youth and children who don't get enough sleep are at increased risk for health challenges including poor mental health. Faith and community leaders should encourage parents and youth to get the sleep needed to promote healthy development. How much sleep do children and youth need? Children aged 6 to 12 need 9 to 12 hours of sleep a night. Teens aged 13 to 18 need 8 to 10 hours of sleep a night. [39]

Support Evidence-based Practices to Reduce Trauma

The CDC recommends the following strategies and approaches to creating and sustaining safe, stable, nurturing relationships and environments for all children and families.

Strategy	Approach
Strengthen economic supports to families	➤ Strengthening household financial security ➤ Family-friendly work policies
Promote social norms that protect against violence and adversity	➤ Public education campaigns ➤ Legislative approaches to reduce corporal punishment ➤ Bystander approaches ➤ Men and boys as allies in prevention
Ensure a strong start for children	➤ Early childhood home visitation ➤ High-quality childcare ➤ Preschool enrichment with family engagement
Teach skills	➤ Social-emotional learning ➤ Safe dating and healthy relationship skill programs ➤ Parenting skills and family relationship approaches
Connect youth to caring adults and activities	➤ Mentoring programs ➤ After-school programs
Intervene to lessen immediate and long-term harms	➤ Enhanced primary care ➤ Victim-centered services ➤ Treatment to lessen the harms of ACEs ➤ Treatment to prevent problem behavior and future involvement in violence ➤ Family-centered treatment for substance use disorders

For more information on these evidence-based strategies to promote prevention strategies that encourage healthy development for youth, faith and community groups can explore CDC's Preventing ACEs: Leveraging the Best Available Evidence as well as CDC's ACEs training modules. Other tools and resources are available on CDC's Violence Education Tools Online (VetoViolence) page.

Encourage Connections

Helping youth feel connected makes a difference for their mental health. That's why the rest of this guide is focused on this important strategy in fostering mental wellness in youth through connections.

LEARNING ABOUT CONNECTEDNESS

What is Connectedness?

The Centers for Disease Control and Prevention (CDC) defines **connectedness** as referring to "a sense of being cared for, supported, and belonging, and can be centered on feeling connected to school, family, or other important people and organizations in their lives."[40] As noted in the definition from CDC, a part of connectedness is a sense of belonging that a youth feels to a group or network.

The Othering and Belonging Institute defines belonging as "having a meaningful voice and the opportunity to participate in the design of political, social, and cultural structures that shape one's life — the right to both contribute and make demands upon society and political institutions."[41] Captured with this definition is the idea that youth feel like they belong when their perspective is heard and acted upon They in essence are saying, "I need you to listen without the need to respond."

Connectedness also relates to the individual sense of community a youth feels. Rabbi Jonathan Sacks helpfully defines community as a place where a person is known and where they miss that person when they are gone.[42]

Springtide Research Institute has connected some of these concepts of connection, community, and belonging in their Belongingness Process noting that youth feel like they belong when they are noticed, named and known.[43]

In the end, connectedness is about relationships, the quality and qualities of those relationships, and how they help youth feel supported, engaged, and a part of something that is important and of value to them.

Connection Makes a Huge Difference for Youth

One of the ways faith and community leaders address mental and emotional well-being is by making sure youth *feel connected* to other youth, to adults, and to their community. The beliefs that youth have about themselves and their abilities are formed by the extent to which the adults in their lives care about them and the level of involvement they have in the lives of their youth.

For all youth, analyses of the National Longitudinal Study of Adolescent to Adults Health data finds that adults who had strong connections when they were young are 48 – 66 percent less likely to have mental health issues later in life.[44] Connectedness also makes a difference for LGBTQ+ youth. According to the Trevor Project, "LGBTQ youth who report having at least one accepting adult were 40% less likely to report a suicide attempt in the past year."[45]

Research shows that the most important thing a child or youth needs to be resilient is a stable and committed relationship with a supportive adult.[46] When adults provide support, opportunities and structure, youth may experience positive growth and avoid risky behavior.[47] When youth feel a secure attachment to an adult, resilience and feelings of happiness are promoted.

Additionally, research on adults with mental illness suggests that their participation in the community may facilitate recovery and improved quality of life.[48] Connectedness through community is a strong protective factor for youth and their mental and emotional well-being.

Often, faith communities provide the opportunity for youth to connect to adults other than their parents and these relationships are significant in their support of child and youth development. The involvement of additional adults in the life of youth beyond parents provides a beneficial affect for youth outcomes.[49]

Research also points to the importance of youth feeling a sense of connectedness with family. **Family connectedness** is a characteristic describing family relationships. Youth feel connected to families that use empathetic, open, and clear communication.[50] According to a study from the CDC, youth who felt more connected to parents reported lower levels of depressive symptoms, suicidal ideation, non-suicidal self-injury, conduct problems, and higher self-esteem.[51] Even high-risk youth (aged 12 to 15) who reported stronger connections to their parents were more likely to report lower levels of depression and suicidal behaviors.[52]

School connectedness is the belief by students that adults and peers in the school care about them as individuals.[53] Students who feel connected to their school are also more likely to have better academic achievement, higher grades and test scores, better school attendance, and stay in school longer. Youth who are connected to school experience higher quality peer relationships and believe that their friendships at school are positive, supportive, and low in conflict. This connection leads to positive outcomes as well. Youth who feel connected to their school report lower rates of emotional distress, including symptoms of depression and anxiety, both in the short-term and over the course of their young adult lives.[54]

All Adults can Support Connection for Youth

If you are an adult reading this section of the guide, you are an essential component of the youth mental health solution in your community. Caring adults in the community are needed to help everyone address critical educational and mental health challenges exacerbated by the COVID-19 pandemic. Every child and youth can thrive when adults engage in a coordinated, research-based, locally driven, all-in effort worthy of America's youth.

Adults in all sectors discussed throughout the rest of this guide can have an impact on how a youth feels connected. This section draws out a few key activities that have beneficial outcomes for youth while drawing specific attention to how these activities specifically support a sense of connectedness for youth.

Get Youth Involved beyond the Screen

Research highlighted by the Surgeon General and others has demonstrated an increase of challenges for youth related to some online activity.[55] Consider ideas that will support youth mental health such as finding activities that prevent youth from spending too much time online- such as reading, art projects, dramatic plays, storytelling through music, recreation, physical activities, and games.

Get Youth Active!

According to research, physical activity has a meaningful impact on the mental health of children and youth. According to one review of multiple studies, young people who exercise have lower levels of depression, as well as stress and psychological distress. Additionally, youth who exercise report higher levels of positive self-image, life satisfaction and psychological well-being.[56]

It was also found that encouraging collaboration through physical activity in recreational sports and games can allow students to be physically engaged in connecting with others, combining an already well-loved activity by youth with peer connection.[57] By participating in sporting events and other games alongside peers, youth are further encouraged to work well with others in a positive environment. If youth are not interested in sports, leaders can encourage youth to participate in academic or liberal arts teams at school or in the community.

Mentoring

Mentoring is a great way adults can get involved in the life of youth. This type of relationship allows for an adult to invest in the lives of youth in their community. The adult is in an opportune position to encourage, enable, and direct the youth in their pursuits.

Mentoring can happen as an informal or formal relationship.[58]

Consider the following research-based tips for forming a strong mentoring relationship:

➤ Meaningful relationships are formed through emotional support (e.g., talking and listening).

➤ It is important for adult-youth relationships to include engagement and acceptance in multiple domains of life (i.e., not exclusively in academics).

➤ Research observed that shared interests and experiences are notable foundations of non-parental youth-adult relationships. [59]

The National Partnership for Student Success supports a nationwide three-year effort that brings together experienced organizations to recruit, screen, train, support, and engage an additional 250,000 caring adults in roles serving as tutors, mentors, student success coaches, wraparound service coordinators, and post-secondary transition coaches. Sign up to help here.

Supporting Student Success

Research suggests that when students have a sense of belonging, their confidence is improved, and they perform well in school.[61] This is due to fostering students' motivation, ability to cope in school and positive attitudes toward learning. Additionally, when youth have a high sense of belonging, they are involved in less misconduct in school.[62]

Adults can help students develop social skills in the classroom. This can be done by modeling etiquette, role-playing social situations, and giving performance feedback.[63]

Informal Mentoring

➤ A relationship that organically evolves, similarly to a friendship

➤ Often involves family members or friends who youth turn to for guidance

Formal Mentoring

➤ A relationship that was arranged through an organized program

➤ Participants chosen based on compatibility

There are two approaches to mentoring: Traditional and Modern.[60]

Traditional Mentoring

➤ Meetings scheduled to be reoccurring

➤ Meetings are one-on-one

➤ Meetings are face-to-face

Modern Mentoring

➤ Meetings geared toward accessibility and variety:

• Flash / short-term mentoring

➤ Meeting can be in a group setting

➤ Meetings can be virtual

The development of interpersonal skills (e.g., social problem-solving and conflict resolution) may lead to cooperative teamwork in group projects and school sports. Also, these skills provide a foundation for the building of positive relationships with peers.

When adults show interest in youth, they are more motivated to apply oneself. Additionally, simple encouragements—for example, keep working hard, I believe you can do it, you are making progress-- from adults can promote youth engagement in school activities.

Volunteering

Volunteering is one-way adults can encourage youth to get involved in the community, build relationships, and learn new skills, all while having fun. Additionally, volunteering can promote self-confidence, self-esteem, and life satisfaction.

Youth may be more interested in volunteering if the people they are close with, either friends or family, are also involved. Furthermore, relational bonds can be strengthened as a result of the shared experience. The first step in getting youth to volunteer is to simply ask them. If they have a positive experience, they are more likely to continue to volunteer. Also, try to gear the type of volunteering towards the youth's interests.[64]

Americorps helps connect people with volunteer opportunities near them, based on their zip code.

STRATEGIES TO CREATE CONNECTEDNESS

Earlier research pointed to the specific impact that feeling connected to faith communities, families and schools have on mental well-being for youth. The following sections focus on what faith communities can do to be a source of connectedness for youth. Next, this guide discusses how faith and community leaders can provide support for families and schools to encourage a sense of connectedness for youth.

Faith Communities Encouraging Connection for Youth

Faith communities can nurture a sense of connectedness by recognizing the people and organizations that are important in the lives of youth and young people. For many youth faith can be a

community of belonging, connection and support. A 2017 study found that religion is an outlet that provides stability, support, and guidance for young people in the U.S.[65] Faith communities can be especially helpful in connecting youth with a network of adult support beyond their parents or caregivers who are known to be trusted, safe and supportive.

In fact, faith communities can provide something that other communities may not be able to when it comes to connection. As noted by Springtide Research Institute, "religious and spiritual spaces can offer what many other spaces cannot: connection and community where those gathered engage their science of the divinity or the sacred together, elevating the social connections to something more than just a group of people with a common interest."

Research has been completed showing how schools promote a sense of connectedness for youth. Much of this research can translate into the work of faith and community partners who work with and serve youth and young adults and is supported by additional research by organizations like the Springtide Research and Search Institute.

Facilitate Engagement with Youth, Families and Community

As noted by Serena Bian from the Office of the Surgeon General, "Creating cultures of connection cannot be approached as a one-off activity, but rather must be ingrained into all efforts of a religious or spiritual community." As such, youth feel a part of a community when they feel included, noticed and heard as a part of the faith community. As an example, a youth council that regularly advises staff and leaders can be asked to identify simple changes or modifications that would make the community's physical environment or social media presence more appealing to youth. Giving youth a responsibility for program and event coordination encourages a sense of ownership and belonging. Partnering with groups like the YMCA, Boys & Girls Clubs of America, Girls Scouts, the Scouts and others are community groups that can be invited to highlight services available to youth from the community.

Facilitate environments that promote safety and security for youth

Youth feel connected in communities when they feel safe and supported. Faith communities can encourage this by facilitating environments and activities where this is realized by youth. Youth-serving staff and volunteers can regularly communicate clear instructions and next steps that engage youth and young adults in activities. To the extent appropriate, youth can share thoughts and ideas about how communication can be improved.

Engage Youth in Enjoyable and Productive Activities

Schools that have service-learning programs that connect academic curriculum to community problem-solving report a stronger sense of connection among their youth.[66] Similarly, faith and community organizations can connect their activities with youth in the community. How can what you are learning or encouraging in the community can be acted out in the community? This helps youth feel like what they are learning and sharing can make a difference in the world. For example:

➤ If you are learning about food, encourage or support volunteering at a local food bank.

➤ If you are learning about caring for the environment, schedule a cleanup of a local park with your local park department.

Looking for more ideas? Consider using the free toolkit from Doing Good Together (DGT) titled, *Beyond Our Neighbors: A Curriculum for Expanding Empathy and Compassion to "Others"*.

Faith communities can also engage and encourage their youth to participate in or volunteer with other community-based organizations serving the community. This includes groups working in the local community to increase awareness related to mental health challenges.

Intentionally Provide Opportunities for Youth to Connect and Learn from Adults

Make every effort to make sure that every youth in your community feels connected to at least one adult. A great tool to help facilitate these connections is the Relationship Mapping Strategy from Making Caring Common Project from Harvard University. This program invests time and energy into adults to ensure that every youth in the community feels they have a positive adult they can rely on.

Establish Policies and Practices to Reduce Stigmatization

Youth are looking for communities and organizations that align with them and their friends' diverse values, backgrounds, and experiences. Youth living in communities with organizations that have policies and practices in place to reduce stigmatization report feeling more connected.

Faith and Community organizations can consider the following policies and practices to actively reduce stigmatization:

➤ Clarify and consider the use of inclusive terms by your community.

➤ Regularly appreciate the value of diverse points of view and perspectives within the community.

➤ Recruit, promote, and support diverse governance, leadership, staff, and volunteers that are responsive to the population in the community.

➤ Educate and train in appropriate policies and practices on an ongoing basis.

➤ Provide resources and other support services for people who have experienced stigma or discrimination.

To the extent appropriate and aligned within your organization, consider writing out these principles and sharing them with the community. The following are a few examples of faith-based organizations that have written out their principles that reduce stigmatization in their community.

➤ Hillel's Guide to Racial Justice Learning and Action

➤ Intervarsity's Response to Racial Hostility, White supremacy, and Xenophobia

➤ Union for Reform Judaism's Audacious Hospitality

➤ YMCA's Commitment to Diversity, Equity, and Inclusion

Faith and Community Encouraging Family Connectedness

Families come from diverse backgrounds. Whether chosen family or biological family, faith and community leaders can celebrate and strengthen households of people that provide a sense of belonging and connectedness for children, youth, and young adults. While each family is different, the action items below can support families wherever they are toward the goal of helping youth feel like they can be connected to adults responsible for their care.

While less research is available on the strength of family connectedness as a protective factor, faith and community leaders understand and appreciate this reality intuitively. Many faith communities and traditions have long affirmed the importance of family and can work within the community to strengthen and support family networks.

Faith and community organizations can take steps and actions, as described below, that help support stronger, healthier bonds between family members.

Help Mom's Start Strong

Every woman and every mother should receive the care she needs to thrive. Supporting maternal health helps a family start strong by helping moms have the best care possible.[67] Resources like the Maternal Mental Health Hotline available at 1-833-9-HELP4MOMS provide 24/7, free, confidential support before, during, and after pregnancy. Faith and community leaders can join with leaders across the country who are advocating for better care for moms so that families are connected to culturally competent, effective services that support improved maternal health outcomes. If mothers get help with their mental health they may be more readily available to see that their children receive access to needed services as well. The Administration is committed to this as is outlined in the White House Blueprint for Addressing the Maternal Health Crisis.

Encourage family meals

Encouraging family meals seems so simple but it makes a huge difference. Family meals occur when the family gathers to eat a meal together. Not only do family meals lead to better nutrition indicators, but frequent family meals were associated with higher levels of family functioning, greater self-esteem, and lower levels of depressive symptoms and stress. Additionally, there is an association between frequency of family meals and social and emotional well-being of parents. Promoting family meals is important in impacting the health and well-being of the whole family.[68]

> "When addressing and assessing our youth (particularly those of color) the intersection of faith and mental health cannot be ignored."

*Natasha Gresham,
Director,
The Center for Counseling and Behavioral Health*
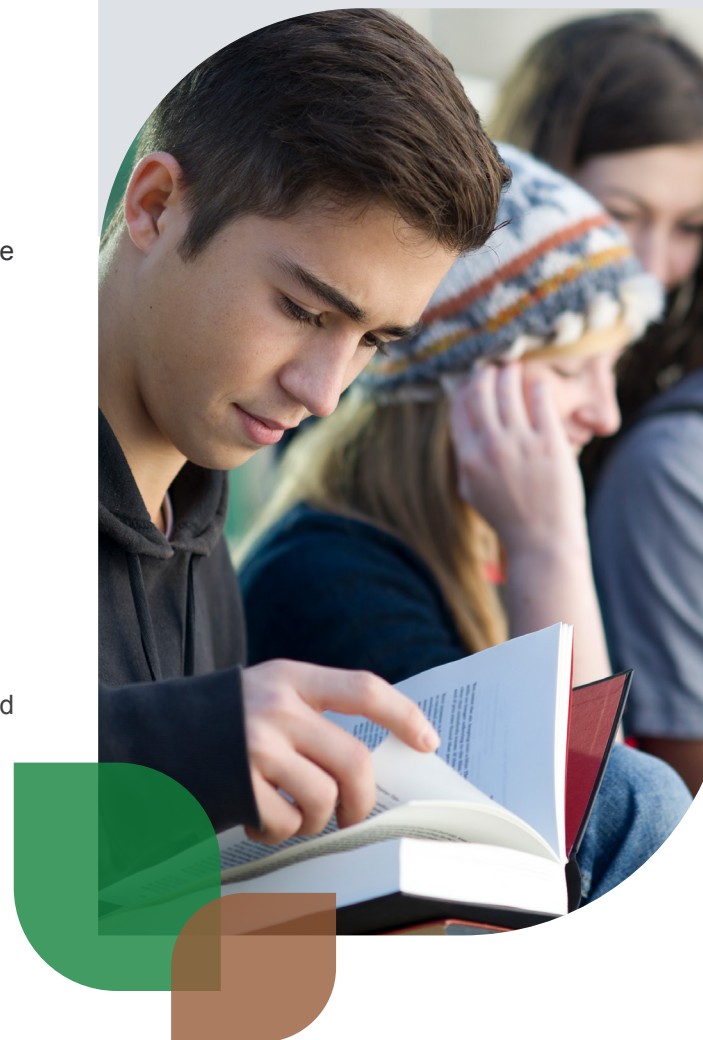
RECIPE FOR FAMILY MEALS

(Based on content from Iowa State University/WIC Works Resource System[69])

1 **START**

Start with one busy family

2 **MARINADE**

Marinade parents in a strong desire to share more time together

3 **BLEND IN**

Blend in creative ideas about when and where to eat

4 **STIR IN**

Stir in compliments and pleasant conversation topics

5 **ADD**

Engaging Questions like "What made you laugh today?"

Avoid boring questions like "How was your day?"

6 **SPRINKLE IN**

Sprinkle in good table manners and appropriate conversation etiquette

7 **ADD**

Add a dash of thanks

8 **SERVE**

Serve with a variety of simple, healthy foods

9 **YIELD**

Yield: One family with stronger communication skills and deeper feelings of connection

Check out The Family Dinner Project (https://thefamilydinnerproject.org) for more ideas to make family meals fun and engaging for everyone in the family.

Host events where parents and youth can interact

Many faith communities and community organizations provide opportunities for youth to engage with each other and provide peer support. But it can be just as important to facilitate activities and opportunities for parents and their children to engage with each other outside the home. Consider the following examples of events that can bring parents and youth together that can be coordinated by faith communities.

Outdoor Activities

➤ Biking
➤ Sports Activities
➤ Walking
➤ Gardening
➤ Have A Picnic or Cookout

Indoor Activities

➤ Baking and Cooking
➤ Boardgames
➤ Indoor Scavenger Hunt

Community Centered

➤ Going to the library
➤ Visit a museum
➤ Volunteering
➤ Service-Learning Projects

Promote Purposeful Parenting

Communities around the country are doing purposeful prevention work to help children and families thrive. This purposeful work focuses on six protective factors:

➤ Nurturing and attachment

➤ Knowledge of parenting and of child and youth development

➤ Parental resilience

➤ Social connections

➤ Concrete supports for parents

➤ Social and emotional competence of children

These protective factors help parents find resources, supports, or coping strategies that allow them to parent effectively—even under stress. The Administration for Children and Families has developed conversation guides around these protective factors. After a brief introduction about the protective factor, caregivers are encouraged to fill in each worksheet and relate the protective factor to their family's unique circumstances and goals. Faith communities can encourage parents to fill in each worksheet and relate the protective factor to their family's unique circumstances and goals.

For families with older children and youth, the Centers for Disease and Prevention (CDC) promotes strategies called Positive Parenting Practices.   By engaging in positive parenting, parents can help their adolescent make healthy choices.

Parenting Practice Topic	Protective Factor Focus
Parental monitoring	Learn ways parents can use effective monitoring practices to help their teen make healthy decisions and avoid risky behaviors
Fathers' influence	Learn ways fathers can help their teen avoid sexual risk behaviors
Parents' influence on lesbian, gay, or bisexual teens	Learn ways parents can promote positive health outcomes for their lesbian, gay, or bisexual teen
Parent-teen communication about sex	Learn ways parents can have meaningful discussions with their teen about sex, relationships, and the prevention of HIV, STDs, and pregnancy
Supporting One on One Time with a Healthcare Provider	Learn ways parents can help teens build trusting relationships with healthcare providers to talk about sensitive issues such as sexual and mental health, substance use, and safety from bullying

Provide Support to Parents

Faith communities can encourage parents to consider what services and supports are available in their community to meet their concrete needs.

But also, a parent's ability to be healthy in their relationships means that parents need to take care of themselves as they work to take care of their children. This is commonly referred to as self-care.

Encourage parents to ask the following questions:

➤ What do you notice when you are under a lot of stress? How is your parenting affected when you are stressed?

➤ What kinds of things do you do to take care of yourself and manage stress?

➤ What is one new self-care activity you can commit to this week?[70]

Encourage these examples of self-care:

➤ Take breaks to unwind through yoga, music, gardening, or new hobbies.

➤ Find new ways to safely connect with family and friends, get support, and share feelings.

➤ Take care of your body and get moving to lessen fatigue, anxiety, or sadness.

➤ Treat yourself to healthy foods and get enough sleep.[71]

Faith and Community Encouraging School Connectedness

Faith and community leaders can support youth by making sure that their schools are inclusive and safe by providing opportunities to engage in their communities. Schools can serve as safe spaces for youth as they encourage social interaction, academic success, and support from trusted adult figures. In addition, engaging in community partnerships, which can include partnerships with faith communities, improves academic outcomes.[72]

Specifically for faith leaders engaging in partnerships with local schools or school systems, it is important to remember that facilitating school connectedness is not about promoting that faith community's religious tradition or spiritual practices on or into the school environment. Instead, it is about supporting the individuals within that school setting toward the goal of schools being a place where youth attending feel connected to the school, faculty, the adults and peers within that school, and connected to the community as a result of those efforts.

For more ideas on how to facilitate and support community partnerships with school systems, consider resources from the National Center on Safe Supportive Learning Environments from the Department of Education (https://safesupportivelearning.ed.gov/training-technical-assistance/education-level/early-learning/family-school-community-partnerships).

Provide Support for Students

Faith communities are often involved in providing support for at-risk youth through academic assistance and mentorship.[73] Faith leaders, typically adept in connecting with youth in a way that makes them feel seen, comfortable, and supported; they can identify an at-risk youth, as well as provide resources for youth that are already struggling with mental health issues and connectedness in schools. Studies conducted by the CDC have shown that the use of tutoring and mentoring can grow the personal and academic trust and success of youth.[74] By providing the resources and trusted adults to serve youth in these areas, connectedness amongst youth and religious leaders are encouraged while simultaneously expanding their academic achievements.

Provide Support for School Staff

Case studies have shown that connectedness among staff in different environments can allow students to have a good model to refer to when it comes to interacting with their peers and teachers.[75] By viewing how a supportive team works together and cares about each other, youth can look to staff in their schools to be the example for their own daily lives.

Faith communities can provide meaningful and encouraging support to school systems by showing support for teachers and school staff. Faith and community organizations can organize activities to show their appreciation for school staff. Events (e.g. catered lunches) or gifts (e.g. thank you cards) can help increase positive attitudes among school staff. These positive attitudes carry over into the relationships with each other, which in turn contribute to positive relationships with students.

Support or engaging in afterschool activities

Afterschool and summer learning programs are a critical part of that support. For example, Engage Every Student Initiative is a bold new call to action to provide high-quality out-of-school time learning opportunities for every child who wants to participate. With support from five coordinating partners and more than 20 allied organizations, this Initiative aims to ensure that every student who wants a spot in a high-quality out-of-school time program has one. Faith and community organizations can connect with these organizations to see how they can support high quality afterschool activities in their community.

Promoting Mental Well-being and Connection: Action Items JUST for YOUTH!

Youth and young adults can take steps on their own to protect, improve, and advocate for their own mental health and mental health of their peers in the community.

From being intentional about your use of social media to volunteering and serving in the community, there are many ways that youth can increase connection and strengthen their sense of belonging and well-being. For additional actions, refer to the Surgeon General Advisory for Youth Mental Health.

Get Connected!

Having at least one stable and committed relationship with an adult makes a huge difference in the ability to handle stress and stressful situations. Adults are everywhere! They are parents, coaches, neighbors, grandparents, teachers, program leaders, mentors, and many others. Find one and build a positive, healthy trusting relationship.

Get Active!

Young people who exercise have lower levels of depression, as well as stress and psychological distress. Additionally, youth who exercise report higher levels of positive self-image, life satisfaction and psychological well-being.[1]

Get Together!

Encouraging collaboration through physical activity in recreational sports and games can allow supports being physically engaged in connecting with others, combining an already well-loved activity by youth.[2] By participating in sporting events and other games alongside peers provides more opportunities to be further encouraged to work well with others in a positive environment. Even if sports are not interesting, find ways to participate in academic or liberal arts groups at school or in the community.

Get Involved!

Volunteering is a great way to feel connected to the community. Service or volunteering is a powerful antidote to isolation, and it is a reminder that we have value to add to the world. Volunteering builds a sense of purpose while increasing a sense of self-worth.[3] All of these contribute to a sense of well-being and resilience that will improve mental well-being and increase a sense of connection with others.[4]

Get Online (maybe)?

Technology is not bad necessarily; neither is being online. Consider asking questions to help guide technology use. What content am I consuming and how does it make me feel? Am I online because I want to be, or because I feel like I have to be? Make sure you are aware of the dangers of being online by checking out Safe Surfing Online. Be a voice against bullying online with resources at StopBullying.gov

1   American Psychological Association. "How and why to get children moving now." Retrieved from https://www.apa.org/topics/covid-19/children-exercise-strategies

2   Laverdure P, Beisbier S. Occupation- and Activity-Based Interventions to Improve Performance of Activities of Daily Living, Play, and Leisure for Children and Youth Ages 5 to 21: A Systematic Review. *Am J Occup Ther*. 2021;75(1):7501205050p1-7501205050p24. doi:10.5014/ajot.2021.039560

3   Ballard, P. J., Hoyt, L. T., & Pachucki, M. C. (2019). Impacts of Adolescent and Young Adult Civic Engagement on Health and Socioeconomic Status in Adulthood. Child development, 90(4), 1138–1154. https://doi.org/10.1111/cdev.12998

4   Youth.gov. "Volunteerism." Retrieved from https://youth.gov/youth-topics/volunteerism

TRAINING AND RESOURCES TO ADDRESS YOUTH MENTAL HEALTH

There are a wide range of trainings available to faith and community leader with strong research foundations and strategies to support these efforts. The following are resources available in local communities, sometimes free of charge.

Training for Youth Mental Health Awareness

➤ Youth Mental Health First Aid a skills-based training course, primarily designed for adults who regularly interact with young people, on how to help. an adolescent (age 12-18) experiencing a mental health or addictions challenge or is in crisis.

Training for Youth on Mental Health

➤ Ending the Silence is a free, evidence-based, 50-minute session designed for middle and high school students to learn about mental health conditions developed by the National Alliance on Mental Illness (NAMI).

Additionally, there are resources providing information and guidance on practical actions communities leaders can take to address mental illness broadly. To mention a few:

➤ Compassion In Action Toolkit, developed by the HHS Partnership Center, provides seven principles that define ways for faith and community leaders to address mental illness in their community and to identify the small steps they can take to provide support for individuals with mental illness and their caregivers.

➤ CDC's Suicide Prevention website provides facts and information about suicide, risk and protective factors, prevention strategies and other resources.

➤ APA's Mental Health and Faith Partnership is a guide co-created by a collaboration facilitated by the American Psychiatric Association (APA) between psychiatrists and clergy aimed at fostering a dialogue, reducing stigma, and accounting for medical and spiritual dimensions as people seek care.

➤ FaithNet is the interfaith resource network of National Alliance on Mental Illness (NAMI) members, friends, clergy and congregations of all faith traditions. Their website offers an exchange of information, tools and other resources.

➤ Spiritual First Aid program from Wheaton University's Humanitarian Disaster Institute is a spiritual and emotional care intervention informed by the Christian tradition and evidence-informed psychological insights gained from years of scientific study.

➤ Companionship Movement Training is a three-hour training which guides faith communities in developing caring responses to individuals and families coping with the challenges posed by mental illness.

ADDITIONAL RESOURCES

How Right Now (CDC) - How Right Now is a communications campaign (by the CDC and CDC Foundation) that provides resources for coping with negative emotions and stress, talking to loved ones, and finding inspiration.

FindTreatment.gov (SAMHSA) - Find information on thousands of state-licensed providers who specialize in treating substance use disorders, addiction, and mental illness.

MentalHealth.gov - What to look for, how to talk about mental health, and how to get help.

Play2Prevent (Yale Center for Health & Learning Games) - Play2Prevent is a repository for evidence-based video game interventions and educational materials geared toward risk prevention, health and wellness promotion, and social intelligence in children, teens and young adults.

External Resources

➤ NAMI

➤ Mental Health America

➤ Youth MOVE

➤ Child Mind Institute

➤ Headspace

➤ The Might

Positive Parenting Practices - By engaging in positive parenting as recommended by the CDC, parents can help their youth make healthy choices.

➤ Monitoring Your Teen's Activities: What Parents and Families Should Know

➤ Ways to Influence Your Teen's Sexual Risk Behavior: What Fathers Can Do

➤ Parents' Influence on the Health of Lesbian, Gay, and Bisexual Teens: What Parents and Families Should Know

➤ Talking with Your Teens about Sex: Going Beyond "the Talk"

➤ Teen Health Services and One-On-One Time with A Healthcare Provider: An Infobrief for Parents

Administration for Children and Families (ACF) Resources

ACF provides a wide range of resources to support youth and families.

➤ Parenting Resources to Promote Family Well-being

➤ We CAN Social Media Shareable Images

➤ Tools and Tip Sheets from Children's Bureau Learning and Coordination Center

U.S. Department of Education Resources

Multiple initiatives launched in coordination with the U.S. Department of Education support connections for youth that will have beneficial outcomes for youth mental health.

➤ National Partnership for Student Success

➤ Engage Every Student

Resources for LGBTQI+ Youth and Mental Health

➤ LGBTQI+ Health & Well-being – Resources from the Substance Abuse and Mental Health Services Administration to address the LGBTQI+ population and their mental health needs

➤ Be True and Be You – A Basic Mental Health Guide for LGBTQI+ Youth – This guide from the National Council for Mental Wellbeing provides information on how to talk and think about sexual orientation, gender identity/expression, and mental health, identifies ways to cope with stress and emotions, and discusses how to get support for yourself and others.

➤ Resources from the National Alliance on Mental Illness for LGBTQI+ Populations – The page increases awareness of risk factors for LGBTQI+ populations related to mental health, support for finding a mental health professional and other resources.

➤ Mental Health Challenges of LGBTQI+ Youth – This resource from Child Mind Institute describes risk and protective factors for LGBTQI+ youth and how parents can support their mental health.

ACKNOWLEDGMENTS

Endnotes

1   Steiner, Riley J, Sheremenko, Ganna, Lesesne, Catherine, Dittus, Patricia, Sieving, Renee, Etheir, Kathleen (2019) Adolescent Connectedness and Adult Health Outcomes. Pediatrics, 144(1): e(20183766 Retrieved on August 24, 2022 from https://publications.aap.org/pediatrics/article/144/1/e20183766/37106/Adolescent-Connectedness-and-Adult-Health-Outcomes

2   Substance Abuse and Mental Health Services. "National Guidelines for Child and Youth Behavioral Health Crisis Care ", Retrieved from https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/pep-22-01-02-001.pdf

3   Surgeon General, "Youth Mental Health Advisory." Retrieved from https://www.hhs.gov/sites/default/files/surgeon-general-youth-mental-health-advisory.pdf

4   Office of Juvenile Justice and Detention Programs, "Literature Review: A Product of the Model Programs Guide: Intersection between Mental Health and the Juvenile Justice System" Retrieved from https://ojjdp.ojp.gov/model-programs-guide/literature-reviews/intsection_between_mental_health_and_the_juvenile_justice_system.pdf

5   The Trevor Project. "2022 National Survey on LGBTQ Youth Mental Health." January 2022. Retrieved from https://www.thetrevorproject.org/survey-2022/.

6   Congressional Black Caucus Emergency TaskForce on Black Youth. "Ring the Alarm: The Crisis of Black Youth Suicide in America. 2019. Retrieved from https://theactionalliance.org/sites/default/files/ring_the_alarm-_the_crisis_of_black_youth_suicide_in_america_copy.pdf

7   Hillis, S., N'konzi, J. P. N., Msemburi, W., Cluver, L., Villaveces, A., Flaxman, S., & Unwin, H. J. T. (2022). Orphanhood and Caregiver Loss Among Children Based on New Global Excess COVID-19 Death Estimates. *JAMA pediatrics*.

8   Ibid 2

9   Ibid 2

10 Centers for Disease Control and Prevention. "New CDC data illuminate youth mental health threats during the COVID-19 pandemic" Retrieved from https://www.cdc.gov/nchhstp/newsroom/2022/2021-ABES-findings-press-release.html

11 Ibid 2

12 American Academy of Pediatrics, "AAP-AACAP-CHA Declaration of a National Emergency in Child and Adolescent Mental Health." Retrieved from https://www.aap.org/en/advocacy/child-and-adolescent-healthy-mental-development/aap-aacap-cha-declaration-of-a-national-emergency-in-child-and-adolescent-mental-health/

13 Youth.gov. "Mental Health Promotion", https://youth.gov/youth-topics/youth-mental-health/mental-health-promotion-prevention; Miles, J., Espiritu, R.C., Horen, N., Sebian, J., & Waetzig, E. (2010). A Public Health Approach to Children's Mental Health: A Conceptual Framework. Washington, DC: Georgetown University Center for Child and Human Development, National Technical Assistance Center for Children's Mental Health. Retrieved from https://publichealth.tulane.edu/blog/mental-health-public-health/;

14 Frameworks Institute. "Reframing Children's Mental Health. Retrieved from https://www.frameworksinstitute.org/toolkit/reframing-childrens-mental-health/

15 Centers for Disease Control and Prevention. "Mental Health." Retrieved from https://www.cdc.gov/mentalhealth/index.htm

16 Office of the Assistant Secretary for Health: Office of Population Affairs. "Mental Health for Adolescents." Retrieved from https://opa.hhs.gov/adolescent-health/mental-health-adolescents

17 RC Kessler et al. "Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication," Arch Gen Psychiatry 2005; 62(6):593-602. doi: https://doi.org/10.1001/ archpsyc.62.6.593

18 https://www.nimh.nih.gov/health/topics/child-and-adolescent-mental-health

19 Substance Abuse and Mental Health Services Administration. "Trauma and Violence." Retrieved from https://www.samhsa.gov/trauma-violence

20 Substance Abuse and Mental Health Services Administration. "SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach." Retrieved from https://store.samhsa.gov/sites/default/files/d7/priv/sma14-4884.pdf

21 Centers for Disease Control and Prevention. "Fast Facts: Preventing Adverse Childhood Experiences." Retrieved from https://www.cdc.gov/violenceprevention/aces/fastfact.html

22 Centers for Disease Control and Prevention. "Preventing Adverse Childhood Experiences (ACEs): Leveraging the Best Available Evidence." Retrieved from https://www.cdc.gov/violenceprevention/pdf/preventingACES.pdf

23 National Institute of Mental Health. "Coping with Traumatic Events." Retrieved from https://www.nimh.nih.gov/health/topics/coping-with-traumatic-events

24 Centers for Disease Control and Prevention. "CDC Vital signs: Adverse Childhood Experiences(ACEs): Preventing Early Trauma to improve adult health." Retrieved from https://www.cdc.gov/vitalsigns/aces/index.html

25 Ibid 14

26 National Child Traumatic Stress Network. "Childhood Traumatic Grief: Information for Mental Health Providers." Retrieved from https://www.nctsn.org/sites/default/files/resources/fact-sheet/childhood_traumatic_grief_information_for_mental_health_providers.pdf

27   Ungar, M. (Ed.). (2012). The social ecology of resilience: A handbook of theory and practice. Springer Science + Business Media. https://doi.org/10.1007/978-1-4614-0586-3; Arango, C., Díaz-Caneja, C. M., McGorry, P. D., Rapoport, J., Sommer, I. E., Vorstman, J. A., McDaid, D., Marín, O., Serrano-Drozdowskyj, E., Freedman, R., & Carpenter, W. (2018). Preventive strategies for mental health. The Lancet. Psychiatry, 5(7), 591–604. https://doi.org/10.1016/S2215- 0366(18)30057-9; Schmidt C. W. (2007). Environmental connections: a deeper look into mental illness. Environmental Health Perspectives, 115(8), A404–A410. https://doi.org/10.1289/ehp.115-a404

28   Hankerson, Sidney H., Connie Svob, and Martinque K. Jones. "Partnering With Black Churches to Increase Access to Care." Psychiatric Services 69, no. 2 (February 2018): 125–125. https://doi.org/10.1176/appi.ps.69201.

29   Pew Research Center's Religion & Public Life Project. "Religion in America: U.S. Religious Data, Demographics and Statistics | Pew Research Center," June 13, 2022. https://www.pewresearch.org/religion/religious-landscape-study/racial-and-ethnic-composition/.

30   National Scientific Council on the Developing Child (2015). Supportive Relationships and Active Skill-Building Strengthen the Foundations of Resilience: Working Paper No. 13. Retrieved from www.developingchild.harvard.edu

31   Ibid 10

32   National Institute of Mental Health (NIMH). "Child and Adolescent Mental Health." Retrieved from https://www.nimh.nih.gov/health/topics/child-and-adolescent-mental-health

33   Health Resources and Services Administration. "Health Center Program: Impact and Growth." Retrieved from https://bphc.hrsa.gov/about-health-centers/health-center-program-impact-growth

34   American Psychiatric Association, "Warning Signs of Mental Illness," (2018) Retrieved from www.psychiatry.org/patientsfamilies/warning-signs-of-mental-illness.

35   Collins, Rebecca, Roth, Elizabeth, Cerully, Jennifer, Wong, Eunice. "Beliefs Related to Mental Illness Stigma among California Young Adults." RAND Health Quarterly, 2014. Retrieved from https://www.rand.org/pubs/periodicals/health-quarterly/issues/v4/n3/10.html

36   Eylem, O., de Wit, L., van Straten, A. et al. Stigma for common mental disorders in racial minorities and majorities a systematic review and meta-analysis. BMC Public Health 20, 879 (2020). https://doi.org/10.1186/s12889-020-08964-3

37   Centers for Disease Control and Prevention. "Active Listening." Retrieved from https://www.cdc.gov/parents/essentials/communication/activelistening.html

38   Centers for Disease Control and Prevention. "Promoting Health for Children and Adolescents." Retrieved from https://www.cdc.gov/chronicdisease/resources/publications/factsheets/children-health.htm

39   Ibid 35

40   Centers for Disease Control and Prevention. "Adolescent Connectedness." Retrieved from https://www.cdc.gov/healthyyouth/protective/youth-connectedness-important-protective-factor-for-health-well-being.htm

41   The Othering and Belonging Institute. "Our Story." Retrieved from https://belonging.berkeley.edu/our-story

42   The Rabbi Sacks Legacy. "Audio from The Future of Religion in a Secular Age." Retrieved from https://www.rabbisacks.org/archive/the-future-of-religion-in-a-secular-age/

43   Springtide Research Institute. "The State of Religion and Young People: Mental Health: What Faith Leaders Need to Know." (Winona, MI, 2022)

44   Steiner RJ, Sheremenko G, Lesesne C, et al. "Adolescent Connectedness and Adult Health Outcomes." Pediatrics. 2019;144(1):e20183766 retrieved from https://publications.aap.org/pediatrics/article/144/1/e20183766/37106/Adolescent-Connectedness-and-Adult-Health-Outcomes

45   The Trevor Project. "Accepting Adults Reduce Suicide Attempts Among LGBTQ Youth." Retrieved from https://www.thetrevorproject.org/research-briefs/accepting-adults-reduce-suicide-attempts-among-lgbtq-youth/

46   Ibid 25

47   Frontiers for Young Minds. Allen, Kelly-Ann. "Do You Feel Like You Belong?" Retrieved from https://kids.frontiersin.org/articles/10.3389/frym.2020.00099

48   Burns-Lynch B, Brusilovskiy E, Salzer MS. An Empirical Study of the Relationship Between Community Participation, Recovery, and Quality of Life of Individuals with Serious Mental Illnesses. Isr J Psychiatry Relat Sci. 2016;53(1):46-54. PMID: 28856880. https://pubmed.ncbi.nlm.nih.gov/28856880/

49   National Scientific Council on the Developing Child (2015). Supportive Relationships and Active Skill-Building Strengthen the Foundations of Resilience: Working Paper No. 13. Retrieved from www.developingchild.harvard.edu

50   Manzi, C., Brambilla, M. (2014). Family Connectedness. In: Michalos, A.C. (eds) Encyclopedia of Quality of Life and Well-Being Research. Springer, Dordrecht. https://doi.org/10.1007/978-94-007-0753-5_998

51   Foster, Cynthia Ewell;Horwitz, Adam;Thomas, Alvin;Opperman, Kiel;Gipson, Polly;Burnside, Amanda;Stone, Deborah M.;King, Cheryl. "Connectedness to family, school, peers, and community in socially vulnerable adolescents" (2017) Child Youth Serv Rev. 81:321-331. Retrieved from https://stacks.cdc.gov/view/cdc/58956

52   Eugene D. R. (2021). Connectedness to Family, School, and Neighborhood and Adolescents' Internalizing Symptoms. *International journal of environmental research and public health*, *18*(23), 12602. https://doi.org/10.3390/ijerph182312602

53   Centers for Disease Control and Prevention. (2009). "School Connectedness: Strategies for Increasing Protective Factors Among Youth." Atlanta: U.S. Department of Health and Human Services.

54   Wested. Malley, Meagan, Amarillas, Angela. "What Works Brief #4: School Connectedness." Retrieved from https://www.wested.org/resources/what-works-brief-4-school-connectedness/

55   American Academy of Pediatrics. "Children and Adolecents and Digital Media." Retrieved from https://publications.aap.org/pediatrics/article/138/5/e20162593/60349/Children-and-Adolescents-and-Digital-Media

56   American Psychological Association. "How and why to get children moving now." Retrieved from https://www.apa.org/topics/covid-19/children-exercise-strategies

57   Laverdure P, Beisbier S. Occupation- and Activity-Based Interventions to Improve Performance of Activities of Daily Living, Play, and Leisure for Children and Youth Ages 5 to 21: A Systematic Review. *Am J Occup Ther*. 2021;75(1):7501205050p1-7501205050p24. doi:10.5014/ajot.2021.039560

58   Guider. Cronin, Nicola. "The Different Types of Mentoring and How to Use Them." Retrieved from https://www.guider-ai.com/blog/types-of-mentoring

59   Adolescent Health: Think-Act-Grow. "Positive Connections with Supportive People." Retrieved from https://youth.gov/sites/default/files/essentialresearch1-positiveconnections.pdf

60   Insala. "Traditional Mentoring vs. Modern Mentoring." Retrieved from https://www.insala.com/blog/what-are-the-differences-between-traditional-and-modern-mentoring

61   Erickson LD, McDonald S, Elder GH Jr. Informal Mentors and Education: Complementary or Compensatory Resources? Sociol Educ. 2009 Oct;82(4):344-367. doi: 10.1177/003804070908200403. PMID: 21912440; PMCID: PMC3170563.

62   Ibid 33

63   Youth.gov. "Social Skill Building." Retrieved from https://youth.gov/epi/social-skill-building

64   Youth.gov. "Volunteerism." Retrieved from https://youth.gov/youth-topics/volunteerism

65   Havard Graduate School of Education. Shafer, Leah. "A Bridge Between School and Faith." Retrieved from https://www.gse.harvard.edu/news/uk/17/10/bridge-between-school-and-faith

66   Centers for Disease Control and Prevention. "School Connectedness: Strategies for Increasing Protective Factors among Youth." Retrieved from https://www.cdc.gov/healthyyouth/protective/pdf/connectedness.pdf

67   White House. "White House Blueprint for Addressing the Maternal Health Crisis." Retrieved from https://www.whitehouse.gov/wp-content/uploads/2022/06/Maternal-Health-Blueprint.pdf

68   Utter J, Larson N, Berge JM, Eisenberg ME, Fulkerson JA, Neumark-Sztainer D. "Family meals among parents: Associations with nutritional, social and emotional wellbeing." Prev Med. 2018 Aug;113:7-12. doi: 10.1016/j.ypmed.2018.05.006. Epub 2018 May 7. PMID: 29746973; PMCID: PMC6309329

69   USDA WIC Works Resource System. "Say Yes to Family Meals." Retrieved from https://wicworks.fns.usda.gov/resources/say-yes-family-meals

70   Child Welfare Information Gateway. "I Deserve Self-Care: Guide for Professionals." Retrieved from https://www.childwelfare.gov/pubPDFs/parental_resilience_conversation_guide_2021.pdf

71   Early Childhood Learning and Knowledge Center. "Program Approaches for Staff Wellness." Retrieved from https://eclkc.ohs.acf.hhs.gov/video/program-approaches-staff-wellness

72   https://safesupportivelearning.ed.gov/training-technical-assistance/education-level/early-learning/family-school-community-partnerships

73   Ibid 48

74   Ibid 46

75   Cahill SM, Egan BE, Seber J. Activity- and Occupation-Based Interventions to Support Mental Health, Positive Behavior, and Social Participation for Children and Youth: A Systematic Review. Am J Occup Ther. 2020;74(2):7402180020p1-7402180020p28. doi:10.5014/ajot.2020.038687