

Formerly McDowell Group

# COLLABORATING TO CREATE A HEALTHY COMMUNITY FOR ANCHORAGE YOUTH A Summary of Combined Findings from Behavioral Health Needs Assessments

January 2023

**PREPARED FOR:** 

Center for Safe Alaskans, Spirit of Youth, & Volunteers of America

# TABLE OF CONTENTS

Introduction	1
Background	1
Purpose	1
Methods	1
Data Sources	2
Considerations and Limitations	2
Document Organization	3
Anchorage Cohort	4
Collective Strategic Priorities	4
Alignment of Distinct Coalitions	5
Shared Risk & Protective Factors	6
Factors Correlated with Behavioral Health	6
Protective Factors	7
Risk Factors	
Youth Behavioral Health Profile	11
Depression and Suicide	
Substance Use	
Community Voices	
Community Readiness for Shared Factors Approach	
Perceptions of Bullying	
Perceptions of Youth Mental Health in Alaska	
Perspectives on Substance Misuse Prevention	
Theory of Change & Logic Model	
Theory of Change	
Anchorage Cohort Logic Model	

## Introduction

This document summarizes combined findings from Anchorage youth behavioral health needs assessments conducted by the Center for Safe Alaskans, Spirit of Youth, and Volunteers of America Alaska. Comprehensive assessment findings, including detailed descriptions, analysis, data sources, and definitions can be found in preceding reports published by each organization.

## Background

The State of Alaska Division of Behavioral Health requested that the Anchorage cohort of Comprehensive Behavioral Health Prevention and Early Intervention (CBHPEI) grantees develop a shared behavioral health and wellness needs assessment for the Municipality of Anchorage. The Division of Behavioral Health funds three CBHPEI grantees in Anchorage: Center for Safe Alaskans, Spirit of Youth, and Volunteers of America Alaska. The grant provides resources to implement prevention efforts through the coalitions hosted within each organization. The coalitions are the Anchorage Youth Development Coalition housed at the Center for Safe Alaskans, the Spirit of Youth Anchorage Coalition, and the Anchorage Adolescent Substance Misuse Prevention Coalition coordinated by Volunteers of America Alaska–referred to throughout this document as the Anchorage Cohort.

## Purpose

This document summarizes a selection of behavioral health and wellness data for Anchorage youth. This needs assessment aims to leverage the existing assessments of each partner to inform the collective strategic priorities of the Anchorage Cohort. It was developed in anticipation of a new CBHPEI grant cycle and will inform the future grant applications of each organization.

## **Methods**

The Anchorage Cohort contracted with McKinley Research Group to develop a shared needs assessment summary document comprised of already compiled data. To develop the assessment summary document, McKinley Research reviewed the needs assessments and management information systems for each organization to identify significant trends and relevant findings summarized in each document. McKinley Research Group convened two work sessions with Anchorage Cohort leadership to further assist with selecting and interpreting data.

## **Data Sources**

The Anchorage Cohort obtained data in this document from various public health surveillance systems and data collection efforts. Many data are sourced from the Alaska Youth Risk Behavior Survey. The Alaska Youth Risk Behavior Survey data presented in this report include district-level results for youth in grades 9-12 attending a traditional or alternative school in the Anchorage School District. Additional data obtained by the Anchorage Cohort included in this summary were sourced from the Anchorage School District and Alaska Department of Health or collected directly by or on behalf of the Center for Safe Alaskans, Spirit of Youth, and Volunteers of America Alaska. More information about the data referenced in this document can be found in the needs assessments for each organization.

## **Considerations and Limitations**

### **Reliance on Pre-Pandemic Data**

This assessment comprises previously analyzed and compiled data related to youth behavioral health, much of which were collected before the onset of the COVID-19 pandemic. National research and local experience demonstrate that the pandemic profoundly impacted youth connectedness and resilience, as well as substance use and mental health. Unfortunately, little data on youth behavioral health in Anchorage following the pandemic is available. The planned 2021 Alaska Youth Risk Behavior Survey was canceled due to the pandemic. Estimates for many shared risk and protective factors, as well as behavioral health indicators, should be reassessed following the release of updated Youth Risk Behavior Survey data. The next Youth Risk Behavior Survey is planned for spring 2023.

### Lack of Disaggregated Data

Disaggregating data, or breaking it down into smaller subpopulations, is essential for identifying discrepancies that may be masked when data are aggregated. Disaggregated data can assist with identifying inequities between groups and ensuring resources are allocated to those in most need.

While valuable, it is not always possible to disaggregate data by subpopulations or demographic characteristics due to limitations with data systems, small sub-sample sizes, and other constraints. Disaggregated data are largely not included in this report due to the scope of the project, reliance on previously compiled data, and shifts in recommended Youth Risk Behavior Survey data reporting protocols since the development of the Anchorage Cohort's needs assessments.

This lack of disaggregated data should not be interpreted as an indicator of equity or inequity in the experience of behavioral health and wellness among Anchorage youth of differing backgrounds, identities, and experiences.

## **Document Organization**

Following this introduction are five core chapters. A brief description of each follows.

- **Anchorage Cohort:** Outlines the collective strategic priorities of the Anchorage Cohort and presents a brief profile of each organization within the cohort.
- Shared Risk & Protective Factors: Describes the shared factors approach and presents local data for key risk and protective factors for behavioral health indicators.
- Youth Behavioral Health Profile: Presents data for mental health and substance use indicators.
- **Community Voice:** Summarizes key takeaways from efforts to capture community perspectives on issues related to youth behavioral health and wellness promotion.
- **Theory of Change & Logic Model:** Summarizes the cohort's theory of change and logic model.

## **Anchorage Cohort**

The prevention of behavioral health challenges and promotion of overall wellness are complex issues that necessitate a multi-pronged approach. The Anchorage Cohort of CBHPEI grantees collaborate to ensure that CBHPEI grant resources are leveraged to their maximum capacity. The Anchorage Cohort works as a collective to reduce redundancy and increase reach in the community.

## **Collective Strategic Priorities**

The collective strategic priorities of the Anchorage Cohort represent the overarching approaches each coalition takes to addressing specific issues related to promoting behavioral health and wellness in Anchorage.

#### STRENGTHEN PREVENTION LANDSCAPE

- Enhance prevention capacity and infrastructure through collaboration.
- Promote and support the adoption of prevention best practices.
- Share prevention resources, information, and knowledge.

#### **INFLUENCE POLICY**

- Advocate for policies at the state and community level that promote behavioral health and wellness.
- Promote policies that organizations can implement internally.
- Equip youth, community members, and organizations with advocacy resources and knowledge.

#### INVEST IN ANCHORAGE YOUTH

- Directly offer youth meaningful opportunities to connect with peers and adults and contribute to their communities.
- Indirectly impact youth by bolstering the individuals, organizations, and systems that share responsibility for the well-being and development of youth.

#### SUPPORT DISTINCT COALITIONS

• Engage independent, coordinated, coalitions – each with its own vision, mission, strategies, and activities.

## **Alignment of Distinct Coalitions**

Anchorage Youth Development Coalition, Spirit of Youth Anchorage Coalition, and Anchorage Adolescent Substance Misuse Prevention Coalition each work toward realizing the visions and missions of their own organizations.

## Spirit of Youth Anchorage Coalition

Spirit of Youth is dedicated to creating, promoting, and recognizing youth involvement in Alaska. The Spirit of Youth Anchorage Coalition is housed within the statewide Spirit of Youth Organization.

- Vision: All Alaska's youth are included, heard, and empowered.
- Mission: Creating, promoting, and recognizing youth involvement in communities across Alaska.

## **Anchorage Youth Development Coalition**

The Anchorage Youth Development Coalition supports organizations to advance positive youth development. The coalition is housed at the Center for Safe Alaskans. Center for Safe Alaskans exists to prevent injuries, promote wellbeing, and improve safety for all Alaskans. Safe Alaskan's core values are to be innovative, collaborative, inclusive & respectful, data-driven, and strengthsbased.

- **Vision:** All of Anchorage's youth thrive.
- **Mission:** AYDC promotes and integrates strength-based strategies through advocacy, • resources, networking, and training to ensure that all Anchorage youth thrive.

## Anchorage Adolescent Substance Misuse Prevention Coalition

The Anchorage Adolescent Substance Misuse Prevention Coalition is dedicated to preventing substance misuse among 12-18-year-old youth in the Municipality of Anchorage. The coalition is housed within Volunteers of America Alaska. Volunteers of America Alaska exists to eliminate suffering for youth in Alaska and to make Alaska a place where all youth can thrive.

- **Vision:** A community that supports the hope, health, and healing of every Alaskan.
- Mission: Empower Alaskans and uplift the human spirit through recovery services, housing, and promoting healthy communities.

## Shared Risk & Protective Factors

Reducing risk factors and increasing protective factors among youth are key primary prevention approaches for decreasing behavioral health risks across the lifespan. Various factors affect behavioral health, referred to as risk and protective factors. Risk factors are characteristics and conditions that increase the likelihood of experiencing an adverse outcome, and protective factors are characteristics and conditions that increase the likelihood of experiencing a positive outcome and decreasing the likelihood of an adverse outcome. Many risk and protective factors are interconnected and linked to multiple health and quality-of-life outcomes. These are known as shared risk and protective factors.

## Factors Correlated with Behavioral Health

The Center for Safe Alaskans assessed the relationship between risk and protective factors and risk behaviors for Anchorage youth. The analysis found the following to be protective factors for adverse behavioral health outcomes.

- Feel they matter to people in their community
- Feel alone in their life •
- Teachers really care and give encouragement
- School has clear rules and consequences
- Comfortable seeking help from 3+ adults
- Friends feel it would be wrong if they drank every day ٠
- Parents feel it would be wrong if they drank every day •

Furthermore, the study identified the following risk factors for adverse behavioral health outcomes.

- Bullying .
- Electronic bullying
- Dating violence
- Felt unsafe at school
- Sleep away from home
- Youth feel alone in their life •

The identified protective and risk factors were significantly correlated with eight **behavioral health indicators**.

- Considered suicide
- Felt sad or hopeless
- 30-day alcohol use
- 30-day binge drinking
- 30- day marijuana use
- 30-day prescription pain medicine misuse
- 30-day heroin use
- 30-day methamphetamine use

## **Protective Factors**

There is an ongoing opportunity to support youth in feeling connected and resilient. Many youths in Anchorage report feeling connected to and supported by their community; however, recent trends show decreases in the percentage of youth responding positively to indicators of connectedness. The following section reports data for each of the indicators found by the Center for Safe Alaskans to be associated with positive behavioral health outcomes, as well as additional data related to participation in organized activities and youth's perception of school and community connectedness.

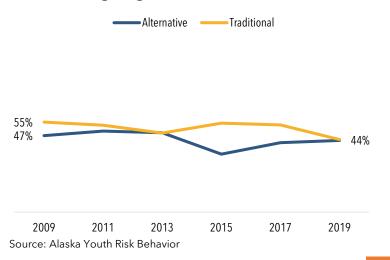
#### Youth Mattering

Between 2009 and 2019, there was a decrease in the percentage of traditional high school students who strongly agree and agree that in their community they feel like they matter to people (55% in 2009 and

44% in 2019).

The percentage of alternative high school students reporting they feel like they matter fluctuated slightly each year but remained similar from 2009 to 2019. In 2019, 44% of alternative high school students reported that they feel like they matter to people in their community.





### Youth Do Not Feel Alone in their Life

There was a decrease in the percentage of traditional high school students who reported they do not feel alone in their life in 2019 compared to 2009 (64% in 2009 and 50% in 2019). Among alternative high school students, the percentage of youth reporting they do not feel alone in their life remained relatively consistent, with 45% reporting they do not feel alone in their life in 2019.

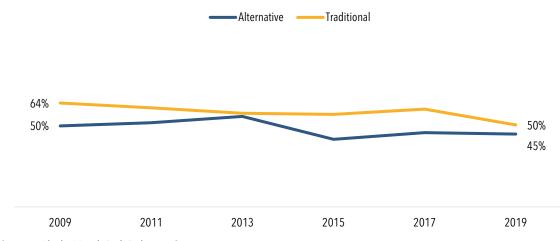


Figure 2. Youth Who Do Not Feel Alone, Anchorage High School Students, 2009-2019

Source: Alaska Youth Risk Behavior Survey.

### **Teachers Care and Give Encouragement**

 Between 2009 and 2019, a greater percentage of alternative high school students than traditional high school students agreed or strongly agreed that their teachers care for and encourage them. In 2019, 73% of alternative high school students and 60% of traditional high school students agreed or strongly agreed that their teachers care for and encourage them.

## Comfortable Seeking Help from Three or More Adults

- The percentage of traditional and alternative high school students reporting they feel comfortable seeking help from three or more adults besides their parents if they have an important question affecting their life remained relatively stable from 2009 to 2019.
- In 2019, a similar percentage of alternative high school students (44%) and traditional high school students (47%) reported feeling comfortable seeking help from three or more adults.

## Friend and Parent Perceptions of Alcohol Use

- In 2019, about two-thirds of traditional high school students (65%) and just over half of alternative high school students (55%) reported that their friends feel it would be wrong or very wrong if they had one or two drinks of an alcoholic beverage nearly every day.
- Most Anchorage youth (87% of traditional high school students and 80% of alternative high school students) reported in 2019 that their parents feel it would be wrong or very wrong if they had one or two drinks of an alcoholic beverage nearly every day.

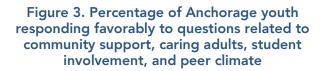
## Participate in Organized Activities

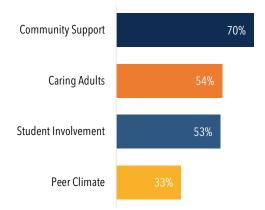
- The percentage of traditional and alternative high school students reporting they participate in organized afterschool, evening, or weekend activities on one or more days was similar year over year between 2009 and 2019.
- A greater proportion of traditional high school students report participating in organized activities than alternative high school students. In 2019, 59% of traditional high school students and 36% of alternative high school students reported they participate in organized afterschool, evening, or weekend activities on one or more days per week.

## **Indicators of School and Community Connectedness**

The School and Community Connectedness Survey is administered to Anchorage School District students in grades 6-12.

In 2022, most youths responded favorably to questions related to community support (70%). Around half of the Anchorage youth surveyed responded favorably to questions about caring adults (54%) and student involvement (53%) and a third responded favorably to questions related to peer climate (33%).





Source: Anchorage School District.

## **Risk Factors**

There is continued opportunity to address risk factors for substance use and unfavorable mental health among youth in Anchorage.

## **Experience of Being Bullied**

- The percentage of traditional high school students reporting they were bullied on school property remained steady from 2009 to 2019, with 18% reporting they were bullied in 2019. The percentage of alternative high school students reporting they were bullied on school property steadily increased from 10% in 2009 to 18% in 2019.
- Among Anchorage youth, 16% of traditional high school students and 23% of alternative high school students reported they were electronically bullied in the past year in 2019.

## **Dating Violence**

- The percentage of traditional and alternative high school students reporting they were physically hurt one or more times in the past year by someone they were dating or going out with remained steady between 2013 and 2019.
- Between 2013 and 2019, a greater percentage of alternative high school students reported they were physically hurt one or more times in the past year by someone they were dating or going out with compared to traditional high school students. In 2019, 20% of alternative high school students and 8% of traditional high school students reported experiencing dating violence.

## Feel Unsafe at School

 A greater percentage of alternative high school students report feeling unsafe at school compared to traditional high school students. Eleven percent of traditional high school students and 17% of alternative high school students report they did not go to school on one or more days in the past 30 days because they felt unsafe at school or on their way to or from school.

### **Sleep Away from Home**

 In 2019, a greater percentage of alternative high school students (30%) reported sleeping away from their parents' or guardians' home because they were kicked out, ran away, were abandoned, or felt unsafe in their home during the past 12 months compared to traditional high school students (11%).

## Youth Behavioral Health Profile

The Anchorage Cohort is committed to improving behavioral health outcomes for Anchorage youth and young adults. Behavioral health is a broad term for the emotional and psychological dimensions of health and wellbeing, including mental health and substance use disorders. This chapter summarizes data monitored by the Anchorage Cohort related to depression, suicide, and substance use among Anchorage youth.

## **Depression and Suicide**

Recent data for indicators of youth depression and suicide are concerning. On several mental health indicators, an increasing percentage of youth report negative outcomes.

### **Feeling Sad or Hopeless**

The proportion of Anchorage traditional and high school students who felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities increased from 2009 to 2019. This increase was more pronounced for alternative high school students (increase from 39% to 53%) than it was for traditional high school students (increase from 27% to 39%).

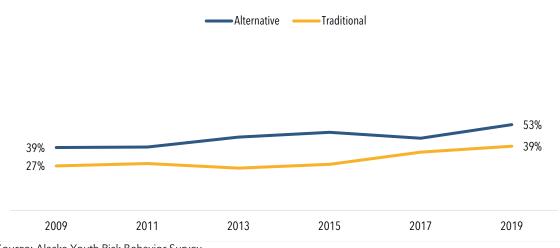


Figure 4. Felt Sad or Hopeless, Anchorage High School Students, 2009-2019

Source: Alaska Youth Risk Behavior Survey.

## Suicide Ideation and Attempts

From 2009 to 2019, there was an increase in the percentage of students who reported suicidal ideation and attempt. This included the percentage of traditional and alternative high school students who reported they seriously considered suicide in the past 12 months, they made a plan about how they would attempt suicide in the past 12 months, and they attempted suicide in the past 12 months.

In 2019, 27% of alternative high school students and 26% of traditional high school students reported seriously considering suicide.

Anchorage High School Students, 2009 and 2019						
	Alternative High School Students		Traditional High School Students			
Indicator	2009	2019	2009	2019		
Seriously Considered Suicide	16%	27%	14%	26%		
Planned a Suicide	15%	29%	13%	25%		
Attempted Suicide	10%	26%	10%	20%		

#### Table 1. Suicidal Ideation and Attempt, Anchorage High School Students 2009 and 2019

Source: Alaska Youth Risk Behavior Survey.

## **Careline Call Volume**

Careline is Alaska's crisis intervention and suicide prevention line. Careline provides crisis intervention for individuals considering suicide or experiencing crisis, isolation, or depression and supports survivors of a suicide attempt or loss to suicide by providing crisis intervention, education, and referral.

Between state fiscal years 2018 and 2021, an average of about 2,100 calls to the Careline were made each year by youth and young adults ages 10-24. Call volume remained relatively steady for this age group between 2018 and 2021.

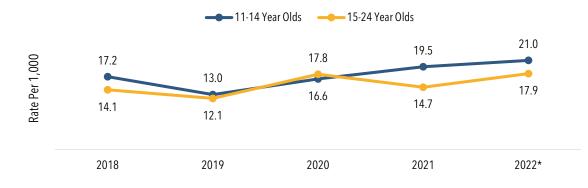
## **Emergency Department Visits**

Spirit of Youth regularly requests emergency department visit data for Anchorage youth and young adult suicide attempts from the Alaska Department of Health, Section of Epidemiology. To date, the organization has received data for calendar years 2018 through 2021 and has received partial year data for 2022. The rate data for 2022 does not include data beyond October 2022.

The rate of emergency department visits for suicide attempts among youth and young adults ages 11-14 and 15-25 in Anchorage trended upward between 2018 and 2022. Following a decrease in emergency department visit rates for suicide attempts from 2018 to 2019, the rate increased yearly between 2019 and 2022 for 11-14-year-old youth in Anchorage. Among 1114-year-old youth in Anchorage, there were 21.0 visits for suicide attempts per 1,000 youth emergency department visits in 2022 compared to 17.2 per 1,000 youth in 2018.

The rate of emergency department visits for suicide attempts among 15-24-year youth and young adults in Anchorage fluctuated yearly from 2018 to 2022, with a slight upward trend over the five-year period. The suicide attempt emergency department visit rate reached a high of 17.9 per 1,000 youth emergency department visits in 2022.

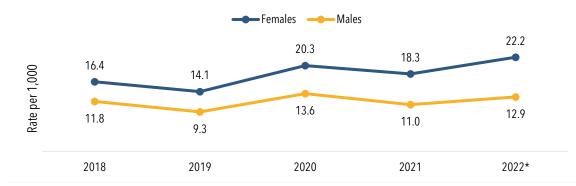
## Figure 5. Visits to the Emergency Department for Suicide Attempts per 1,000 Youth Visits, by Age Group for Anchorage Youth Ages 11-14 and 15-24, 2018-2022



Source: Alaska Department of Health. \*Data for 2022 is incomplete.

Between 2018 and 2022, the rate of emergency department visits for suicide attempts among Anchorage youth and young adults ages 11-24 was higher for females than males. The rate of visits to the emergency department for suicide attempts per 1,000 visits increased among males and females ages 11-24 between 2018 and 2022, with a greater increase among females. In 2022, there were 22.2 visits to the emergency department for suicide attempts per 1,000 youth visits among females ages 11-24 compared to 16.4 visits per 1,000 youth visits in 2018.

## Figure 6. Visits to the Emergency Department for Suicide Attempts per 1,000 Youth Visits, by Gender for Anchorage Youth and Young Adults Ages 11-24, 2018-2022



Source: Alaska Department of Health. \*Data for 2022 is incomplete.

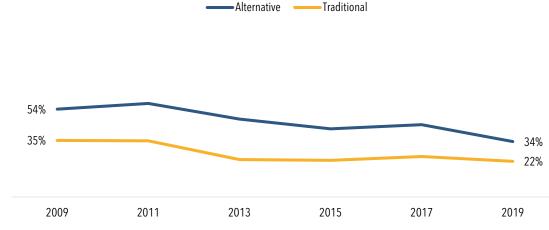
## Substance Use

Alcohol use among youth has declined over the past decade, while marijuana use has remained steady. Differences between substance use rates among traditional and alternative high school students persist, with a greater percentage of alternative high school students reporting using alcohol or marijuana compared to their peers in traditional high schools.

### Alcohol

The percentage of youth reporting recent alcohol consumption is on the decline. In 2009, 54% of alternative high school students and 35% of traditional high school students reported they had at least one drink of alcohol on at least one of the past 30 days. By 2019, 34% of alternative high school students and 22% of traditional high school students reported recent alcohol consumption.





Source: Alaska Youth Risk Behavior Survey.

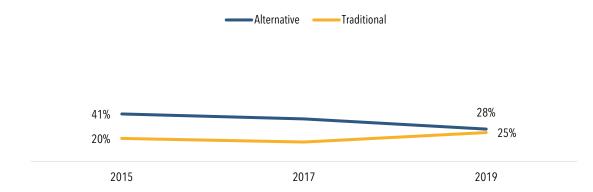
### Marijuana

- There were no clear patterns for marijuana use over time, with use rates remaining relatively stable from 2009 to 2019.
- A greater percentage of alternative high school students report using marijuana than traditional high school students. In 2019, 17% of traditional high school students and 51% of alternative high school students reported using marijuana in the past month.

## **Electronic Vapor Use**

Between 2015 and 2019, the current use of electronic vaping products increased slightly among traditional high school students and decreased among alternative high school students. In 2019, a similar percentage of traditional (25%) and alternative (28%) high school students reported recent electronic vapor use.





Source: Alaska Youth Risk Behavior Survey.

### **Prescription Pain Medicine**

• A greater percentage of alternative high school students report misusing prescription pain medicine than traditional high school students. In 2019, 7% of traditional high school students and 14% of alternative high school students reported that they had taken pain medicine without a doctor's prescription or differently than how a doctor told them to use it in the past 30 days.

### **Heroin Use**

• A greater percentage of alternative high school students reported recent heroin use than traditional high school students. In 2019, 2% of traditional high school students and 5% of alternative high school students reported using heroin in the past 30 days.

### Methamphetamine Use

• A greater percentage of alternative high school students reported recent methamphetamine use than traditional high school students. In 2019, 2% of traditional high school students and 6% of alternative high school students reported using methamphetamine in the past 30 days.

## **Community Voices**

In addition to monitoring data related to youth behavioral health, the Anchorage Cohort seeks out community perspectives from the public, as well as from knowledgeable stakeholders and youth themselves. Community perspectives were collected by the Anchorage Cohort through facilitated discussions, interviews, and community surveys. The findings from these initiatives show that the Anchorage community is concerned about issues related to youth behavioral health and is supportive of youth behavioral health and wellness promotion initiatives.

## **Community Readiness for Shared Factors Approach**

Matching prevention strategies to a community's level of readiness is important for success. A community readiness assessment focused on a shared youth protective factors approach was conducted by Goldstream Group for the Center for Safe Alaskans and the Anchorage Youth Development Coalition in June 2020.

The community readiness assessment was conducted using the Community Readiness Model developed by the Tri-Ethnic Center for Prevention Research at Colorado State University. This model engages key informants representing a variety of community sectors and uses an established scoring rubric to measure the knowledge, attitudes, efforts, and resources of community members and the community's leadership to assess the community's readiness to engage in prevention. The model includes nine stages of community readiness, each corresponding to recommended prevention and capacity-building activities intended to build on the community's existing level of readiness.

The community readiness assessment was designed to answer the question, "How ready is the community to improve the well-being of Anchorage youth using a shared youth protective factors approach?" Findings and readiness scores by domain, and overall, are presented on the following page.

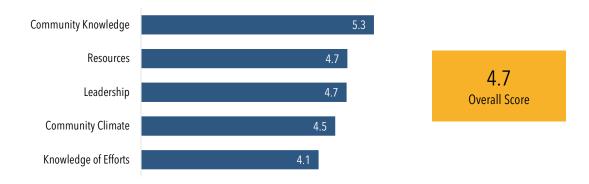
Community Readiness Domain	Community Readiness Assessment Findings
<b>Community Knowledge of the Issue</b> How much does the community know about shared youth protective factors?	At least some community members know about shared youth protective factors, including what they are and how they positively impact youth, and at least some community members are aware of ways to build shared youth protective factors.
<b>Community Knowledge of Efforts</b> How much does the community know about the current programs and activities?	At least some community members have heard of local efforts to increase shared youth protective factors and are familiar with the purpose of these efforts.
Leadership What is leadership's attitude toward addressing shared youth protective factors?	At least some of the leadership is participating in developing, improving, or implementing efforts to increase shared youth protective factors in Anchorage, possibly by being a member of a group that is working towards these efforts or being supportive of allocating resources to these efforts.
<b>Community Climate</b> What is the community's attitude towards addressing shared youth protective factors?	Some community members believe that increasing shared youth protective factors is a concern in Anchorage and that some effort is needed to address it, and at least a few community members are participating in developing, improving, or implementing efforts to increase shared youth protective factors in Anchorage.
<b>Resources</b> What resources are being used or could be used to address shared youth protective factors?	There are some resources identified that could be used for further efforts to increase shared youth protective factors in Anchorage; some community members or leaders are actively working to secure these resources to increase shared youth protective factors in Anchorage.

#### Table 2. Community Readiness for Using a Shared Youth Protective Factors Approach

Source: Center for Safe Alaskans

The findings indicate that stakeholders see action in some areas, but generally perceive a lack of community-wide focused activity around shared risk and protective factors and increasing youth protective factors. The overall community readiness score (4.7) suggests that the community is at the pre-planning stage. At this level, appropriate actions include conducting focus groups, reviewing existing prevention efforts in the community, and increasing media exposure and presentations.

#### Figure 9. Community Readiness Assessment Scores by Domain and Overall (Scale 1-9)



Source: Center for Safe Alaskans

## Perceptions of Bullying

Bullying is linked to many negative outcomes including impacts on mental health, substance use, and suicide. In July 2022, Spirit of Youth surveyed Anchorage adults about their perceptions of youth bullying. Among the 599 Anchorage adults participating in the survey:

- 57% perceive youth bullying as widespread. •
- 37% worry about bullying among youth aged 12-17.
- 35% reported that they had seen, heard, or read any advertisements, messages, or information about preventing bullying in the past 90 days.

## Perceptions of Youth Mental Health in Alaska

Adults in the Anchorage community are concerned about mental health among youth and agree that steps should be made toward improving mental health wellness for youth. In July 2022, Spirit of Youth surveyed Alaskan adults on their perceptions of youth mental health. A total of 1,500 Alaska adults participated in the survey, with 599 respondents from Anchorage. Among the Anchorage adults surveyed:

- 70% believe mental health concerns are widespread among youth ages 12-17. •
- 53% worry about mental health among youth ages 12-17 in Alaska. •
- 85% agree that raising the visibility of youth mental health in Alaska and improving diagnosis and treatment options should be a top priority for state government, schools, and medical organizations.
- 90% agree that children should learn about mental health in school.

## **Perspectives on Substance Misuse Prevention**

### Adult Stakeholders

In May 2020, Volunteers of America Alaska interviewed individuals working in the non-profit, advocacy, health care, criminal justice, and government sectors to gather insight into youth substance misuse and substance misuse prevention in Anchorage. Stakeholders emphasized the following gaps in the Anchorage youth substance misuse prevention landscape.

- There are many efforts in Anchorage to address youth substance misuse, but they are fragmented and inadequately funded.
- There are many opportunities to engage with and coordinate prevention initiatives with partner organizations.
- There is no overarching strategy to address Anchorage youth's needs based on geography, age, gender, socioeconomics, family status, legal status, historical trauma, and many other factors.

In addition to identifying gaps, stakeholders highlighted that there are assets to leverage and build upon, including:

- Youth diversity and resiliency
- Youth creativity, energy, and capacity to have a positive influence on each other
- Alaska's natural environment and sense of place and community

### **Youth Stories**

In November 2022, the Center for Safe Alaskans and Volunteers of America Alaska hosted a virtual community town hall and invited youth panelists to share their stories. Youth discussed challenges with social influences and a lack of understanding from adults. The community town hall underscored the importance of effectively creating support systems and alternative activities that may help youth avoid using alcohol.

## Theory of Change & Logic Model

The Anchorage Cohort developed shared strategic priorities, as well as a theory of change and logic model based on the existing strategic plans of each coalition in April 2021. After reviewing the data summarized in this document, and considering the implications of the cohort's assessments, the Anchorage Cohort is recommitting to its shared strategic priorities. The Anchorage Cohort continues to see strong evidence supporting a shared risk and protective factors approach. The data summarized in this report underscore the urgency and importance of youth behavioral health and wellbeing promotion.

## Theory of Change

### **Community Need**

Reducing risk factors and increasing protective factors among youth is an established primary prevention approach for reducing behavioral health risks across the lifespan. Local data analyses show the relationship between specific risk and protective factors and behavioral health outcomes among Anchorage youth. Local data also show that many youths in Anchorage do not report having the protective factors needed to adequately shield them, both in youth and subsequently in adulthood, from behavioral health challenges such as substance misuse, poor mental health, and suicide. Furthermore, concerning percentages of youth report experiencing behavioral health risk factors such as interpersonal violence, threatened safety, and housing instability.

Increases in reports of poor mental health and suicide underscore the importance of building protective factors and reducing risk factors among Anchorage youth. In recent years, an increasing percentage of youth in Anchorage report experiencing depression, suicidal ideation, and attempting suicide. Similarly, the rate of emergency department visits for a suicide attempt among Anchorage youth and young adults is increasing.

### Anchorage Cohort Approach

The prevention of behavioral health challenges and promotion of overall wellness are complex issues that necessitate a multi-pronged approach. Currently, the individuals, organizations, and systems surrounding youth are not adequately resourced to create the conditions that support behavioral health. It is unlikely that one agency or coalition alone can create the conditions that promote behavioral health and wellness. The Anchorage Cohort of CBHPEI grantees will collaborate to ensure that CBHPEI grant resources are leveraged to their maximum capacity. Additionally, the Anchorage Youth Development Coalition, Spirit of Youth Anchorage Coalition,

and Anchorage Adolescent Substance Misuse Prevention Coalition will each coordinate activities in line with their individual strategic plans.

If the Anchorage Cohort successfully collaborates on the CBHPEI grant, then:

- Efforts will not be duplicated.
- Grant resources will have greater reach.

If the Anchorage Cohort successfully implements its collective strategies, then:

- A diverse network of stakeholders will be involved in prevention.
- Community conditions will support the health and wellbeing of youth.
- Youth will be in environments that help build the protective factors to shield them from negative health outcomes.
- There will be a reduced prevalence of behavioral health challenges in Anchorage.

## Anchorage Cohort Logic Model

Inputs	Strategies	Outputs	Intermediate Outcomes	Long-Term Outcomes
<ul> <li>CBHPEI grant funding</li> <li>Commitment to communication among Anchorage CBHPEI</li> </ul>	Strengthen Prevention Landscape	Partnerships and collaborations; best-practices adopted; resources, information, and knowledge shared.	<ul> <li>Collaboration among prevention practitioners.</li> <li>Widespread availability of high- quality prevention services.</li> </ul>	<u>Community</u>
<ul> <li>grantees</li> <li>History of collaborating</li> <li>Diversity of skillsets and knowledge base</li> </ul>	Influence Policy	Advocacy initiatives identified and supported; policies adopted; advocacy resources distributed.	<ul> <li>Individuals, organizations, and systems in the community are supportive of prevention- focused initiatives and policies.</li> </ul>	<ul> <li>Improved coordination, increased knowledge base, and better integration of best practice approaches in the community.</li> </ul>
<ul> <li>Strong relationships with a wide array of external partners</li> <li>Shared understanding of risk and protective factors and their relationship to health outcomes</li> <li>Positive youth development expertise</li> </ul>	Invest in Anchorage Youth	Youth and the individuals, organizations, and systems surrounding youth that have been served by or benefited from services offered by Anchorage Youth Development Coalition, Spirit of Youth Anchorage Coalition, and Anchorage Adolescent Substance Misuse Prevention Coalition.	<ul> <li>Youth are meaningfully connected and involved in their communities.</li> <li>Individuals, organizations, and systems in Anchorage are equipped to support positive youth development and address risk factors among youth.</li> </ul>	<ul> <li>Youth <ul> <li>Strengthened protective factors.</li> <li>Improved mental health.</li> <li>Reduced risk behavior (e.g., substance use and</li> </ul> </li> </ul>
<ul> <li>Behavioral health experience</li> <li>Collective commitment to prevention</li> </ul>	Support Distinct Coalitions	Three separate coalitions, each with its own strategic plan that outlines its specific prevention approaches.	<ul> <li>A diverse cadre of coalitions are addressing specific prevention needs in Anchorage.</li> </ul>	suicide).

## McKINLEY RESEARCH GROUP, LLC

3800 Centerpoint Drive, Suite 1100 • Anchorage, AK 99503 • (907) 274-3200 801 West 10<sup>th</sup> Street, Suite 100B • Juneau, AK 99801 • (907) 586-6126

info@mckinleyresearch.com • mckinleyresearch.com