

EARLY ALERTS, BRIGHTER FUTURES: THE CASE FOR COMPREHENSIVE YOUTH MENTAL HEALTH SCREENING IN COLORADO

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ABSTRACT

Understanding the crisis: The progress being made regarding youth mental health screening in Colorado delves deeply into the issue by scrutinizing current intervention strategies. By referencing empirical data and gaining insight from sectors such as law enforcement and health care, this paper underscores the limitations of the prevailing reactive approaches that provide only transient insight into an individual's mental health status. The central focus of this

exploration is an emphasis on the pressing need for a more progressive, sustained methodology to evaluate mental health among Colorado's youth, aiming for a holistic understanding that can truly address their diverse challenges.

Keywords: Youth Mental Health, Comprehensive Screening, Continuous Monitoring, Early Intervention, Colorado, Personalized Care



INTRODUCTION



OPENING CASE: A NIGHT IN SMALL-TOWN AMERICA

On a small-town weekday evening, law enforcement officers respond to a frantic call about a domestic dispute. They arrive to find a 14-year-old in a violent altercation with family members, resorting to self-harm and lashing out aggressively toward the officers.

Such distressing incidents are not isolated; they are symptomatic of a broader issue plaguing our society: the reactive stance on youth mental health.

In the aftermath of this incident and likely many to follow, the 14-year-old faces not only involuntary youth mental health holds (a common phrase among first responders indicating the referenced individual will be taken for a psychiatric evaluation) but multiple juvenile arrests. It's a familiar path, leading straight into a justice system ill-equipped to address the underlying mental health concerns of America's youth. The juvenile is transferred to a health care facility for what is supposed to be a mental health evaluation and possible intervention. But what happens next further highlights the systemic shortcomings of our approach to youth mental wellness.

Upon arrival at the health care facility, the juvenile undergoes a brief observation period, lasting only a few hours. Because of resource constraints and overcrowding, involuntary mental health holds only serve as a temporary stopgap. Without a comprehensive diagnosis, therapy, or treatment plan, the health care provider is legally obligated to release the youth back into the same environment they were removed from. This release can sometimes even occur on the same day, based on the youth's verbal assurance that they pose no current danger to themselves or others.

In this unsettling landscape, the family's experience once the youth returns home adds another layer of complexity. As family members clean up the physical and emotional debris from earlier events, the child unexpectedly walks back through the door. The swiftness of the youth's release from what was supposed to be a mental health intervention leaves the family desperate and pondering the extreme action of giving up custody of their child to unlock state-aided services that seem perpetually out of reach. This grim scenario is a stark testament to the convoluted bureaucratic challenges families face when securing mental health care for their children.



ECHOES OF A CRISIS: DECIPHERING COLORADO'S YOUTH MENTAL HEALTH MAZE

Like much of the United States, Colorado finds itself at the epicenter of an escalating youth mental health crisis. This multifaceted issue intertwines the limitations of traditional systems, including law enforcement, health care, and grassroots community initiatives. While law enforcement is frequently the first – and many times the only – responder during mental health crises, they often find themselves navigating terrain they're not necessarily suited for because of a lack of training or awareness of available mental health programs.

This poor match between need and assistance can lead to situations where youth face punitive actions rather than receiving therapeutic interventions. Moreover, in its current reactive form, the state's health care model is not typically engaged until a crisis reaches its peak. This delayed response misses pivotal early-intervention opportunities and places undue pressure on already-stretched medical facilities and professionals. Meanwhile, community-led programs in Colorado grapple with myriad issues, from limited funding to inadequate awareness and expertise, creating gaps in needed services.

The compounded effect of these challenges paints a clear picture: the pressing need for Colorado to adopt a proactive, coordinated, and comprehensive methodology targeting youth mental health. The methodology should emphasize early detection, timely intervention, and a holistic care model that

integrates the strengths of all involved sectors, making sure every young individual receives the support they need.

- **Anxiety and depression rates doubled during the COVID-19 pandemic.**
- **44% of U.S. teens feel persistently sad or hopeless.**
- **Suicide is a leading cause of death for ages 10-24 in Colorado.**
- **One in 6 adolescents faces a mental health condition.**
- **In the past year, one in 12 high schoolers attempted suicide.**
- **Only 50% of diagnosed youth receive treatment.¹**

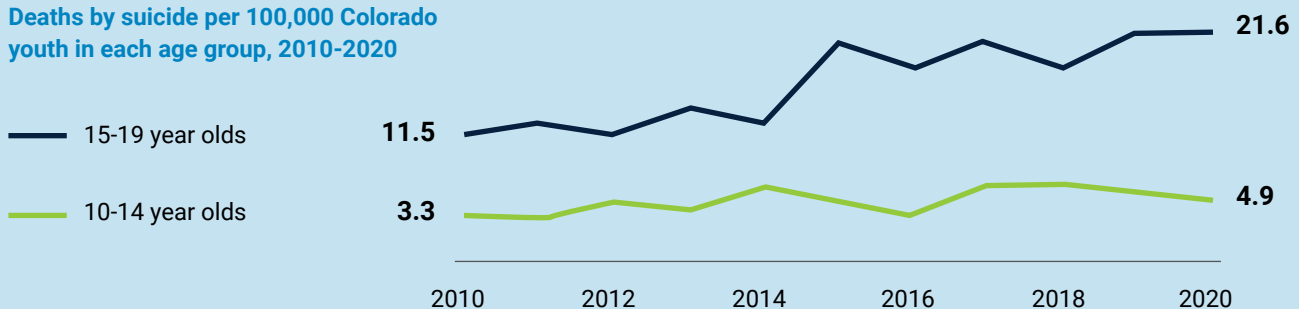
MAPPING THE CRISIS: KEY METRICS ON COLORADO'S YOUTH MENTAL HEALTH CONCERNS

Even before the pandemic, Colorado grappled with significant youth mental health issues, reflecting a larger national crisis. The state witnessed a surge in anxiety and depression rates among its young population, aligning with a broader national trend where many American teens reported consistent sadness or hopelessness.

Disturbingly, suicide ranks as a top cause of death for those between the ages of 10 and 24 in Colorado.² The situation is

Suicide rates among Colorado's kids were rising long before the pandemic brought on additional stressors. In 2020, more than 100 Colorado kids lost their lives to suicide, double the number of deaths seen in 2010.³

Deaths by suicide per 100,000 Colorado youth in each age group, 2010-2020



Source: Colorado Department of Public Health and Environment, Vital Statistics Program



further exacerbated as a significant number of adolescents in the state face mental health challenges, with a notable fraction attempting self-harm. Yet half of these young individuals lack access to essential treatment.

BEYOND THE SURFACE: THE EXTENDED IMPACT

In Colorado, the lack of systematic, proactive youth mental health screening is a ticking time bomb, setting off a chain reaction of challenges for individuals as well as for the broader community. Delayed intervention not only leads to poorer mental health outcomes but also has a domino effect, contributing significantly to the state's unsettling youth suicide rates. Schools, often on the front lines in noticing behavioral discrepancies, are embroiled in academic and disciplinary quagmires with no clear framework for redress.

This absence of early detection inadvertently opens a Pandora's box of substance misuse, a concern amplified by Colorado's

unique stance on marijuana. Moreover, the juvenile justice system morphs into an unintended receptacle for many youths, who are often taken there as an only resort. This trajectory burdens families, overwhelms health care infrastructure, escalates community safety concerns, and indirectly perpetuates the enduring stigma surrounding mental health.

The economic fallout is equally disconcerting. Untreated mental health issues can create a fiscal black hole, sucking in enormous direct and indirect costs reverberating through Colorado's socioeconomic fabric. Numerous studies underscore the unintended financial burden on taxpayers. "The Polis-Primavera Administration and the legislature continue to invest in Medicaid's behavioral health budget, with a funding increase of more than \$400 million since 2018, and a behavioral health budget over \$1 billion for the 2022-23 fiscal year."¹

The costs span a broad spectrum, from negatively impacting a family's financials — oftentimes causing families to seek



burdensome private mental health support — to inflated health care expenses, strained law enforcement resources, and the loss of productivity and contributions these youths could make to society. This fiscal strain is exacerbated by the hefty price tag attached to the correctional system, which ironically becomes a default holding space for individuals needing mental health intervention rather than penal containment.

The reverberations of this crisis extend beyond just moral imperatives; they echo through the chambers of fiscal prudence and community welfare. Hence, addressing the issue is not only about crafting a compassionate society but also about intelligent economics.

INITIAL ONLINE SURVEYS: A FIRST STEP TOWARD ADDRESSING YOUTH MENTAL HEALTH IN COLORADO

The initial deployment of online surveys and screenings has laid the groundwork for highlighting mental health concerns among Colorado's youth. While commendable in intent, these current reactive intervention strategies often need to be revised in execution.

The iMatter survey, established via Colorado House Bill 21-1258, has catalyzed discussions and illuminated primary areas of concern but remains a passive receiver, waiting for information to be fed to it. The dynamic and ever-changing landscape of youth mental health demands a more proactive approach. Colorado's youth deserve an intervention that not only responds but also actively reaches out and engages in real time, adapting to the fluidity of an individual's mental health journey.

Data points to a worrying trend, with increased levels of anxiety, depression and, alarmingly, suicide among Colorado's youth. The present infrastructure lacks proactive and holistic solutions, leading to disturbing outcomes for affected youth and their families. The economic costs, as highlighted by the state's increasing behavioral health budget and systemic challenges, underscore the issue's urgency. With every missed intervention, the community bears the burden through safety concerns, economic repercussions, and the exacerbating stigma around mental health.

BREAKING THE CYCLE: THE NEED FOR PROACTIVE MEASURES

These recurring crises underscore a pressing need for a paradigm shift in the approach to youth mental health. The collective efforts of supportive organizations (e.g., health care, schools, community groups, law enforcement) should not be exclusively reactive, leaving stakeholders scrambling in moments of crisis. What's required is a proactive strategy that focuses on the need for collaborative coordination, early detection, timely intervention, and holistic care to address the youth mental health crisis in our communities.

The state and its stakeholders are primed for innovative solutions. By engaging in proactive measures, Edera is pioneering comprehensive screening processes that can genuinely foster brighter futures for Colorado's youth. We're working toward a solution that actively seeks to understand and support their mental well-being, bridging the gap between awareness and effective intervention.

Appendix: References

¹*Help Address Colorado's Youth Mental Health Crisis. Youth Mental Health Crisis | Children's Hospital Colorado. (2023).*

<https://www.childrenscolorado.org/community/youth-mental-health-crisis/>

²<https://www.coloradokids.org/youth-success/suicide-prevention>

³<https://www.childrenscolorado.org/community/youth-mental-health-crisis/>

