



Adolescent and Young Adult Health Needs Summary

2024

Introduction

Every 5 years, the Washington State Department of Health (DOH) assesses the health of children, parents and caregivers, and families to support the Maternal and Child Health Block Grant (MCHBG). For the 2024 assessment, DOH collected information through a Discovery Survey, key informant interviews, and facilitated discussions. This information helps identify the priorities to guide our work. It also helps us better understand the needs and challenges impacting the health of women, pregnant people, young people, children and youth with disabilities and their families.

The **Adolescent and Young Adult Health domain** serves teens from ages 12-19 and young people from ages 19-24. This includes:

- Supporting their behavioral health care.
- Improving their access to and the quality of youth-friendly culturally responsive preventative care.
- Supporting initiatives that increase young people's access to positive mentors and trusted adults.

Key Themes from Community and Partners

We found common themes in responses from the community-based Discovery Survey and key informant interviews and facilitated discussions with health partners.

Community-based Discovery Survey themes:

- **Youth-focused health care:** Teens and young adults need better access to **health care**, especially **mental health services and substance use disorder treatment**. Many respondents said they want school-based mental health care and better coordination between primary and behavioral health. Finding and addressing provider shortages was also noted.
- **Housing:** Housing was the most common theme across all health areas. In the Adolescent and Youth Adult Health domain, the biggest need was for stable **housing** and **meeting basic needs** for **pregnant and parenting adolescents** and young adults.
- **Safe and inclusive spaces:** Young people want safer spaces to **socialize, build positive connections, and connect with family and mentors**. They also need accessible and inclusive spaces where they feel included and supported.
- **Education and life skills:** There is a strong need for more educational opportunities on various topics, especially moving from adolescence to adulthood, including:
 - Independent living skills
 - Career advancement
 - Healthy relationships, ways to boost self-esteem, and self-discovery.

Themes from key informant interviews, facilitated discussions, and local health partner reports:

- **Access to mental health and behavioral health support:** There is a critical need for robust mental and behavioral health services and supports. Experts stressed the importance of education on communication, relationships, social connection, and support groups.
- **Increase in suicide-related and substance use behaviors:** Partners shared concerns of increasing suicide-related thoughts, feelings, and behaviors. Another emerging theme was increase in substance use, including “vaping and smoking” in young people.

What young people said:

“

It was just a routine checkup, but the doctor did an excellent job making me feel comfortable. She also asked my parent to leave while asking questions which I feel is important as they typically ask patients if they would like their parent to leave and they feel pressured to say no so as to not raise suspicions with family.

(Youth Survey Respondent)

”

“

I think it can be intimidating to look for counselors, hard to find primary care doctors when they have policies that only allow for one new patient a week, and hard to find therapists with how many people need mental health treatment.

(Youth Survey Respondent)

”

Research Findings

In addition to listening to community members and local health partners, we also reviewed the evaluation findings from a youth survey, program partners, and the Youth Advisory Council (YAC).

Our research confirmed the importance of:

- Access to **mental and behavioral health services**.
- More **youth-friendly care** that centers the young people's needs. Young people described youth-friendly care as **accessible, trauma-informed, non-judgmental, and safe**.
- Support for young people **navigating the health care system**, including scheduling appointments, understanding health insurance and their health care rights, and care coordination.
- Ways to **promote adolescent sexual health**, and opportunities and challenges for **school-based health centers**.
- Direct communication from **health care providers with youth**. More options for young people to control if they want to have their parents or caregivers involved during visits.
- Youth reported feeling a sense of urgency from providers during their primary care visits, which made them feel judged and rushed.
- **Sexual health services and education** that is culturally relevant, inclusive, and focuses on whole-person well-being.

Adolescent Health in Washington

Compared to the rest of the U.S., Washington:

- Has similar rates of adolescents and teens getting preventive care.
- Falls slightly below the national average in making sure adolescents and teens get the mental health treatment they need.
- Has slightly higher than average rates of young people who have an adult mentor outside their household.

Table 1. Washington State Compared with National Indicators and Rankings

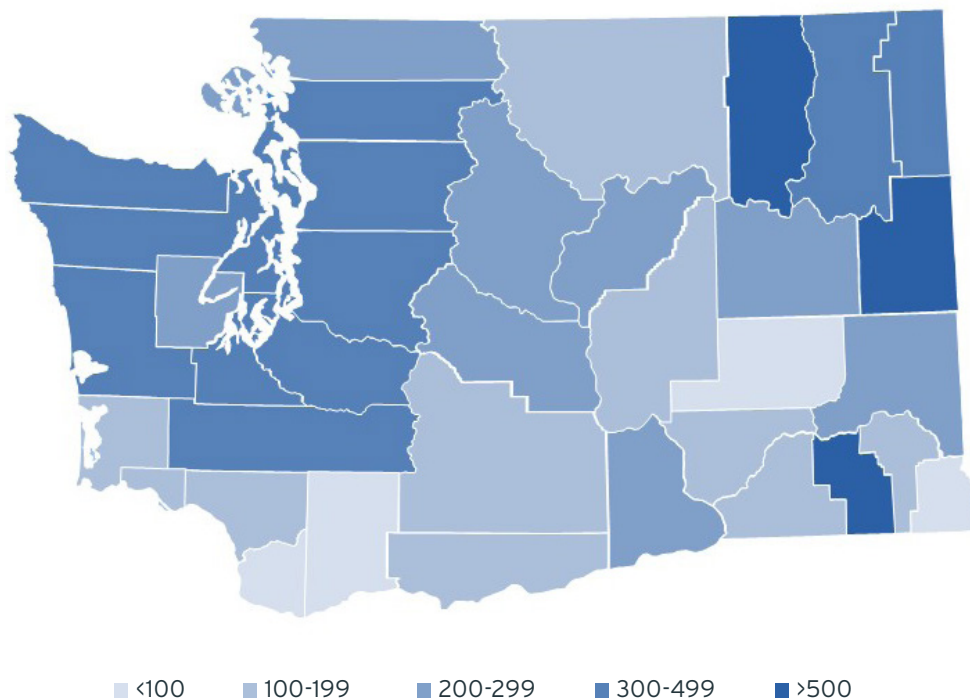
Indicator	Washington		State Rank	United States	
	%	95% CI		%	95% CI
1+ preventive visits in past year ¹	69.0	(63.3 - 74.2)	31	69.7	(68.6 - 70.7)
Received needed mental health treatment	79.9	(70.5-86.9)	38	82.2	(80.3 - 83.9)
Adult mentor outside of household	87.7	(83.1 - 91.2)	32	85.9	(84.9 - 86.9)

¹ National Survey of Children's Health (NSCH), 2022

Figures and Data Highlights

Figure 1. Suicide and Suicide Attempts (Age 10-17), 5-Year Rate per 100,000, 2017-2021²

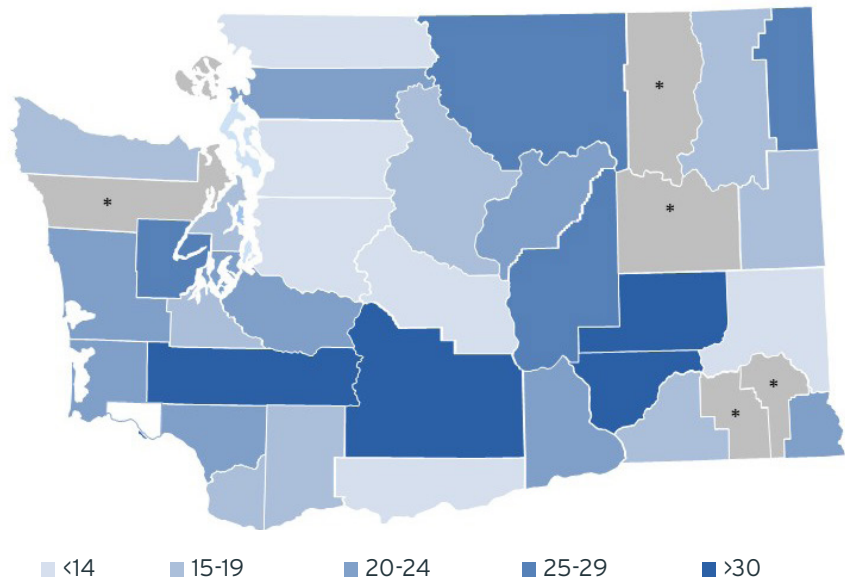
- Counties in Southwest and Central Washington had the lowest rate of youth suicide and attempted suicide.
- Spokane, Columbia, and Ferry counties experienced the highest rates.



² Community outcome & risk evaluation: Risk and protection profile for substance abuse prevention in Washington State. WA Department of Social and Health Services using Comprehensive Hospital Abstract Reporting System (CHARS) and Death Certificate Data, Center for Health Statistics, WA DOH.

Figure 2. Teen Pregnancy (Age 15-19), 2-Year Rate per 1,000, 2021-2022³

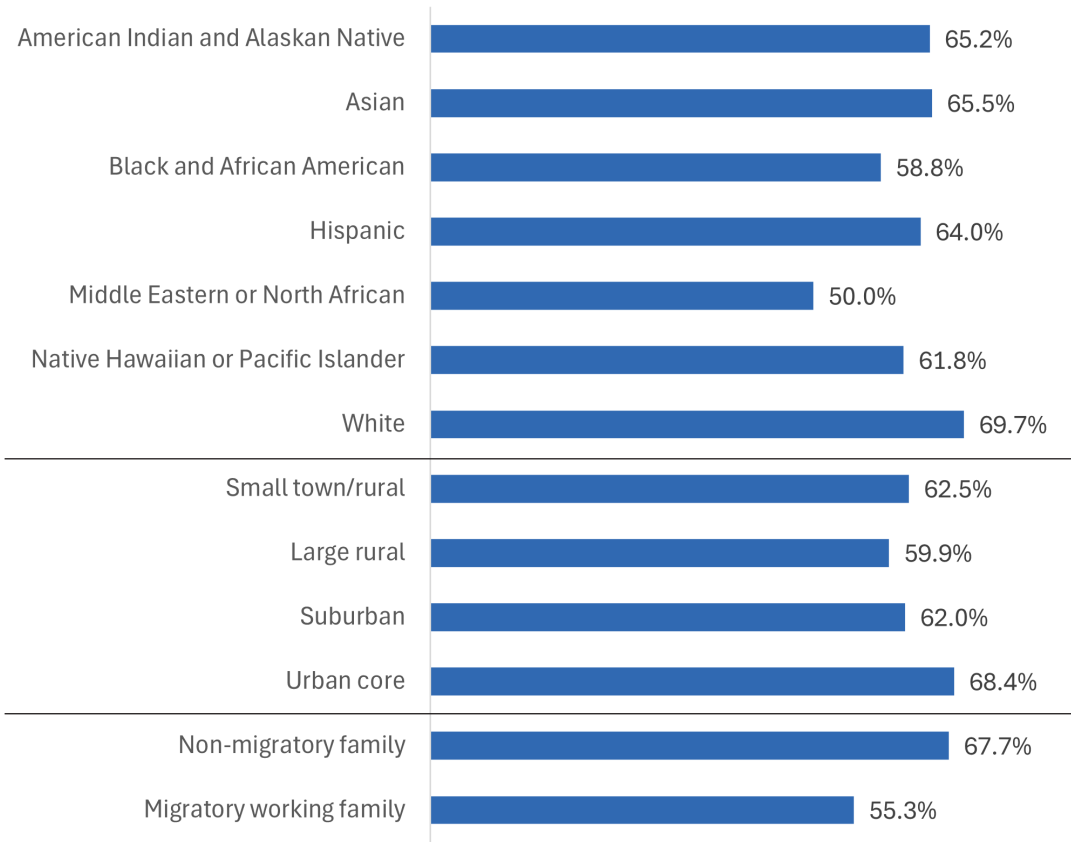
- Teen pregnancies (ages 15 to 19) have decreased nearly 50% from 2012 to 2022.
- Teen pregnancy rates vary across the state with the highest rates in Adams, Yakima, Franklin, and Lewis Counties.



3 Pregnancy and birth data from the Community Health Assessment Tool (CHAT), Center for Health Statistics, WA DOH

Figures 3 and 4 show information about teen healthcare access by priority population groups.

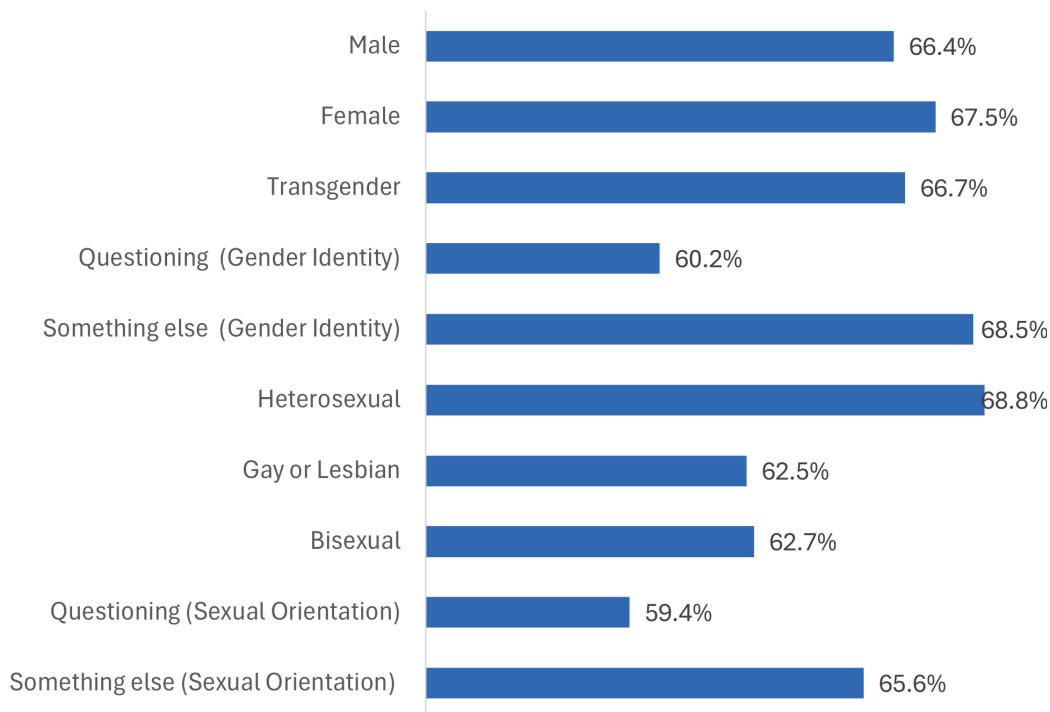
Figure 3. Percent of Students with Physical Exam in Past Year, Grade 10⁴
Physical Exam by Race and Ethnicity, Rurality, and Living Situation



4 Healthy Youth Survey (HYS), 2023

Figure 4. Percent of Students with Physical Exam in Past Year, Grade 10 (continued)⁵

Physical Exam by Gender Identity and Sexual Orientation

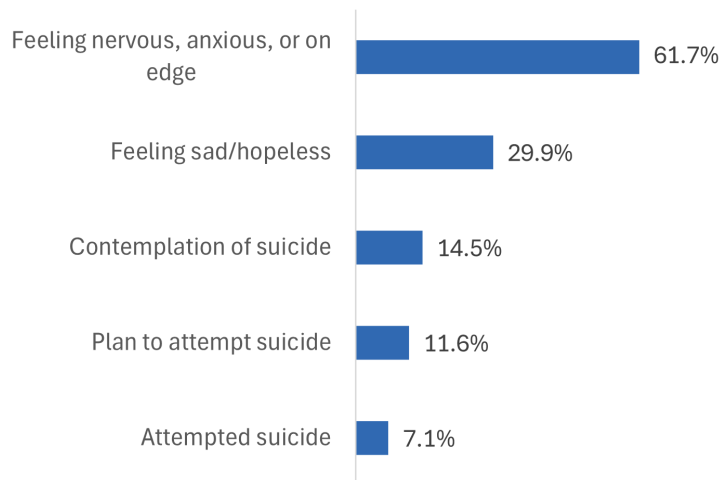


5 Healthy Youth Survey (HYS), 2023

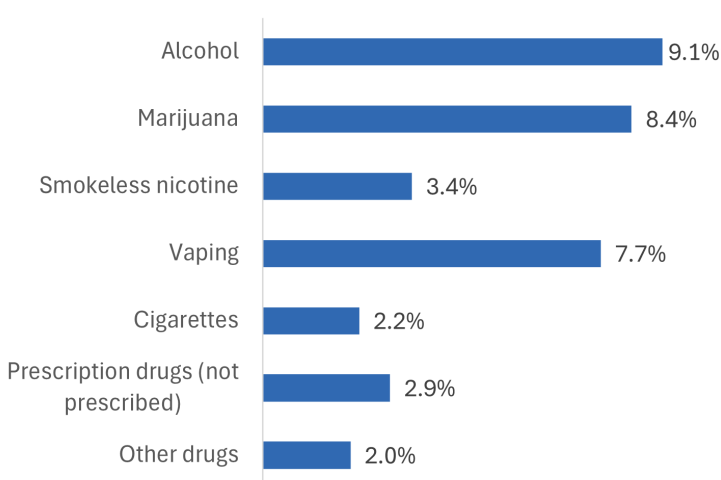
Figure 5. Percent Experiencing Mental Health, Suicidality and Substance Use Indicators, Grade 10 ⁶

- Mental health concerns: Many 10th graders report feeling persistent sadness or hopelessness.
- Thoughts of suicide: A significant portion of students have experienced suicide-related thoughts.
- Substance use:
 - Vaping and smoking rates have increased among young people.
 - Some students report using substances as a way to cope with stress or mental health struggles.
- Access to care: Many students struggle to get the mental health support they need, including counseling and behavioral health services.

Mental Health Indicators, Grade 10



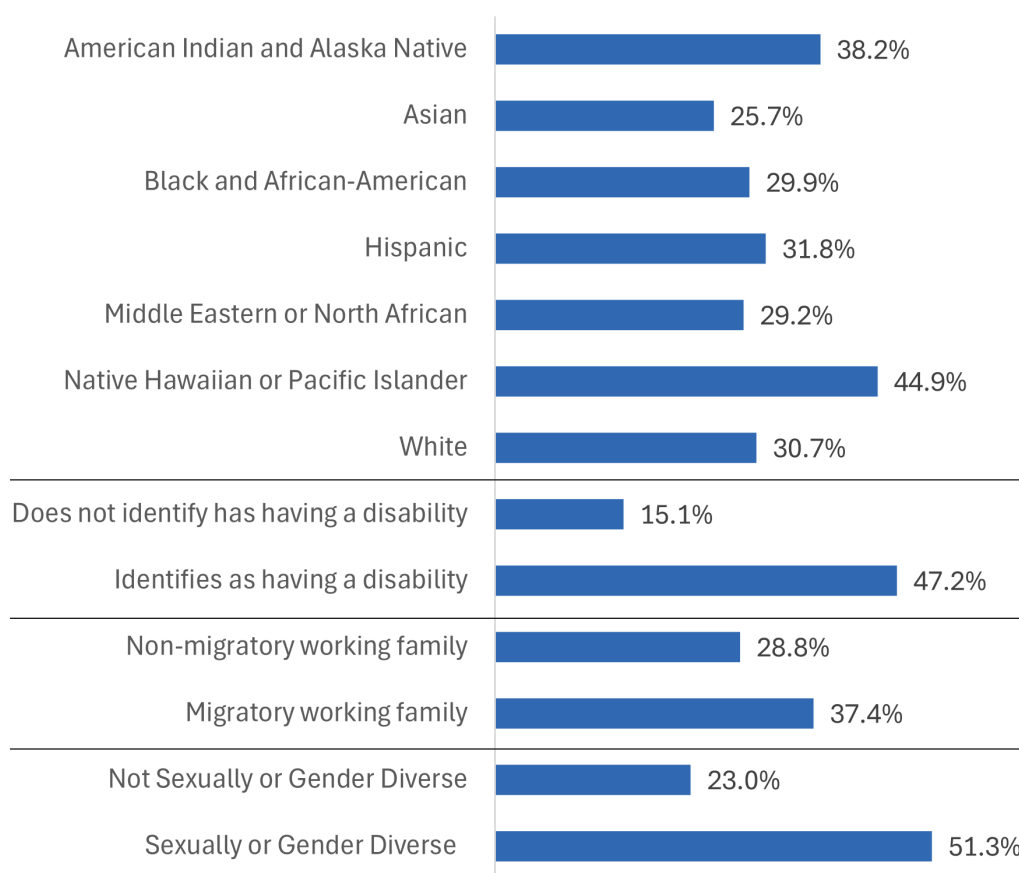
Current Substance Use (past 30-days), Grade 10



6 Healthy Youth Survey (HYS), 2023

Figure 6. Percent of Students Feeling Sad/Hopeless by Population Groups, Grade 10⁷

- Higher rates of sadness and hopelessness: Certain groups of students report feeling sad or hopeless more often than their peers.
- Disparities and thoughts of suicide: Some student populations are more likely to experience thoughts of suicide.
- **Groups most affected:**
 - LGBTQ+ students report the highest rates of sadness, hopelessness and thoughts of suicide.
 - American Indian and Alaska Native students experience higher mental health challenges compared to other racial and groups.
 - Students with disabilities report greater mental health challenges and thoughts of suicide.
 - Students from migrant working families experience additional stressors that impact their mental health.



7 Healthy Youth Survey (HYS), 2023