

Washington State
Department of Health



Youth Advisory Council Report

2023-2024 Cohort



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Findings and recommendations in this report summarize feedback from the Youth Advisory Council, with support from the Adolescent Health Team. This work would not be possible without the amazing young Washingtonians who trusted us with their time, thoughts and ideas, and recommendations to improve health care for all teens and young adults.

They are an inspiration.

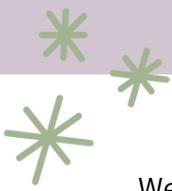


Youth Advisory Council Members

2023-2024 Cohort

First name and age on application

Aaliyah	16	Fiona	19	Micah	16
Alex	18	Husna	14	Miles	16
Andy	17	Jack	17	Muad	16
Ari	17	Jack	17	Nede	20
Aryaa	16	Jay	16	Noor	15
Ave	20	Joie	16	Rosie	13
Caiti	13	Josue	16	Ruffaro	15
Cara	21	Juwayriyah	19	Ryan	17
Chanthea	16	Khoa	16	Shubham	16
Christine	16	Mackenzie	19	Skylar	17
Darren	15	Margreta	15	Stephanie	18
Desi	16	Mariama	16	Tara	22
Enzo	15	Maz	20	Tracey	20
		Megan	21		



We also thank our DOH colleagues for their support and collaboration, and their willingness to listen to and collaborate with young people.

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Finally, this work would not be possible without the full support of the Department of Health leaders who support the Adolescent and Young Adult Health Unit and team:

Name	Role at the Department of Health
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Lacy Fehrenbach	Deputy Secretary, Prevention, Safety, and Health
Michele Roberts	Assistant Secretary, Division of Prevention and Community Health
Katie Eilers	Director, Office of Family and Community Health Improvement and Title V Maternal Child Health Block Grant
Astrid Newell	Section Manager for Thriving Children and Youth
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Brad Klos	Evaluation Unit Supervisor



Executive Summary

The Department of Health’s (DOH) Youth Advisory Council (YAC or the Council) is a statewide advisory body of young people who provide ongoing guidance on adolescent and young adult health. The Council is embedded in the Adolescent and Young Adult Health Unit at DOH.

Council members live throughout Washington and bring diverse backgrounds and unique lived experiences. They come together to discuss health topics that are important to young people, the barriers they face, and youth-friendly solutions to issues to improve adolescent health care. Members also inform youth-focused public health projects, including [Teen Health Hub WA](#) and Washington’s Title V [Maternal Child Health Block Grant](#) activities.

The second YAC cohort served from 2023–2024 and included members ages 13 to 22. During this period, members shared invaluable insight, expertise, advice, and opinions on topics like vaccines, sexual and reproductive health, food and nutrition, and youth-friendly care. They also collaborated with DOH staff on public health projects and programs, helping make sure that the youth perspective remains central.

Building on earlier efforts, this report summarizes the second cohort’s feedback, recommendations, and action. We will share this document with DOH programs that serve teens and young adults, state-agency partners, youth-serving organizations, and clinical and service providers in the health care systems who work with youth.



The 2023–2024 YAC Cohort says young people need...

- **More adults who center young people’s experience**, treat them with dignity and respect, and respond to their needs without stigma or shame
- **High-quality sexual health education** (sex ed) that covers topics young people want to know about
- **More access to youth-friendly information** about healthy relationships and sexual and reproductive health
- **More opportunities to connect** with peers about different health care needs and experiences
- **Education about harmful behaviors** and how to get help when needed
- **More access to youth-friendly care, including for young people with disabilities** and special health care needs
- Improved access to **culturally relevant information about food and nutrition** and to food security that recognizes cultural needs



The Youth Advisory Council

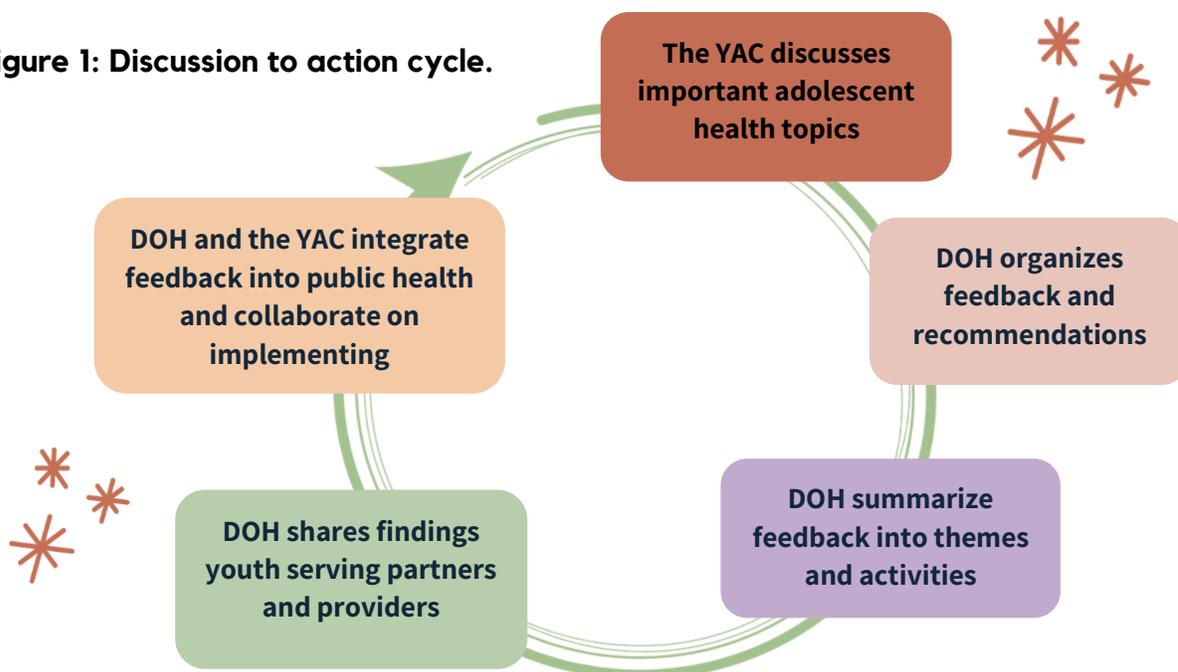
Established in 2022, the Youth Advisory Council is a group of teens and young adults from across Washington who provide feedback and recommendations to improve health care and public health systems for young people. The YAC meets with staff in the Adolescent and Young Adult Health Unit to discuss public health topics and work on public health projects that affect young people’s health and wellbeing.

Discussions often focus on calling out barriers young people encounter in health care settings, and youth-friendly solutions for consideration. Members may also choose to work with DOH staff on new programs, resources, and support for teens and young adults. Council discussions and projects align with [Title V Maternal Child Health Block Grant’s adolescent health priorities](#).

DOH staff organize and analyze the YAC’s insight, feedback and recommendations, and prepare materials for dissemination. These are shared with relevant DOH programs and leadership, state agencies, youth-serving health care providers, and other organizations that serve youth. Staff then work with the YAC and partners to implement their recommendations.

This report is a summary of the YAC’s activities, recommendations, and actions.

Figure 1: Discussion to action cycle.



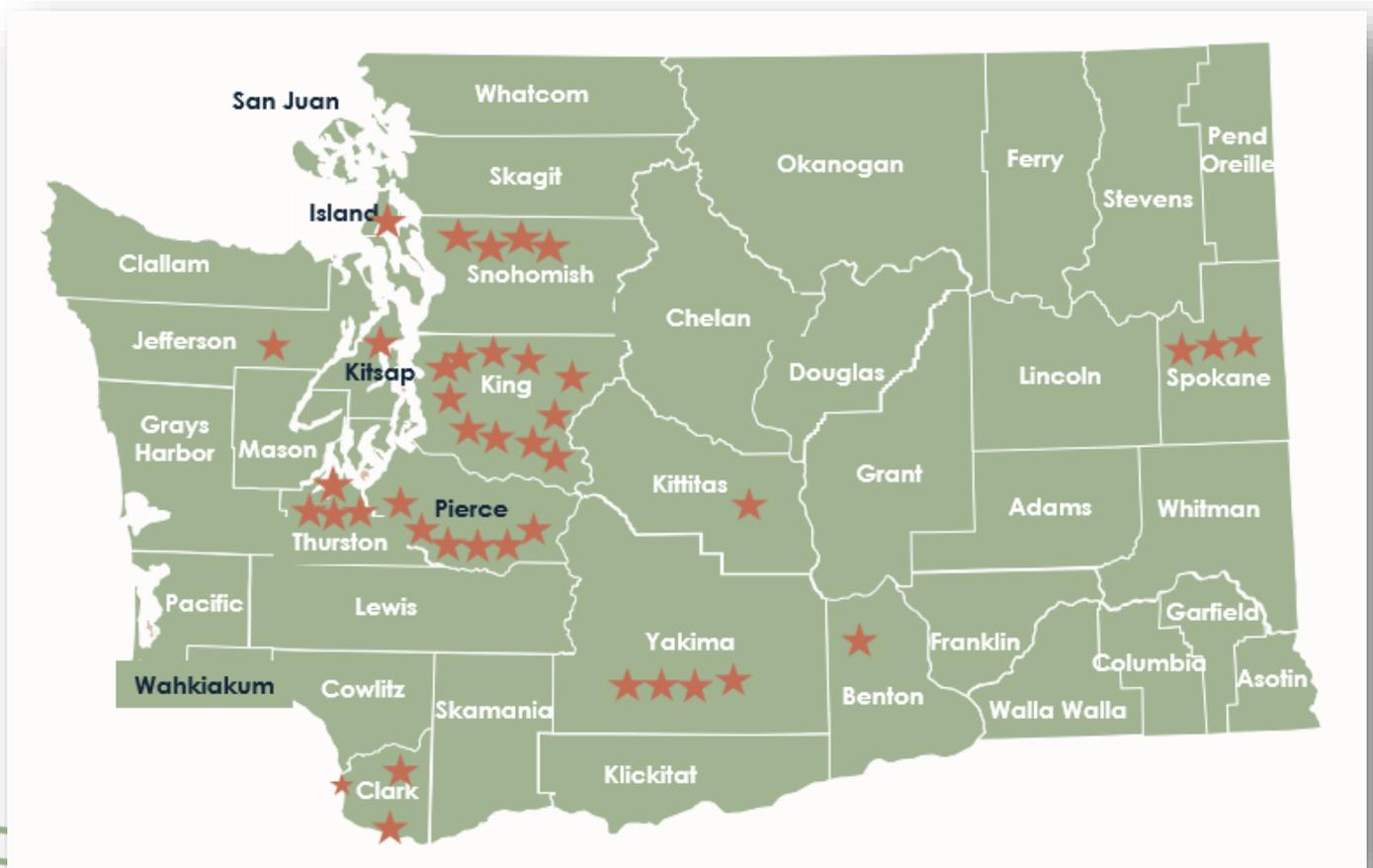


The 2023-2024 Cohort

In 2023, returning members were joined by several new members to form the second YAC cohort. This group served a 2-year term with some choosing to extend their term for an additional six months. Like the first cohort, members of the 2023–2024 Cohort live throughout Washington (Figure 2) and their ages range from 13 to 22.

Each member brings their own background, identity, and abilities. All members also have experience with the health care system for needs related to chronic illness, special health care needs, mental health, primary care, school-based health care, or disabilities. Together, their lived experiences support thoughtful and rich discussions that reflect multiple perspectives.

Figure 1: 2023-2024 YAC Cohort – members’ counties of residence.





General Council Meetings

The YAC meets every other month for General Council Meetings. These meetings focus on adolescent health topics identified by DOH and the previous cohort.

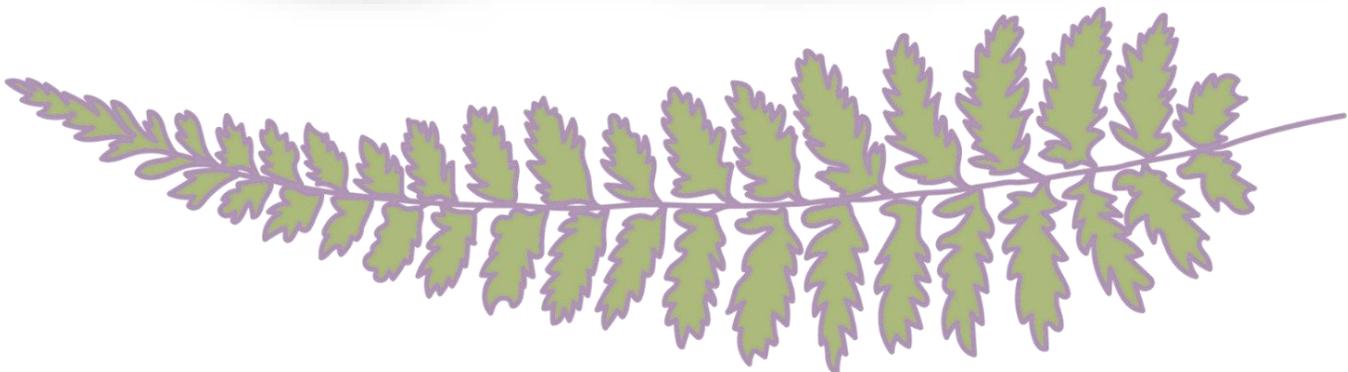
During the 2023–2024 term, discussions focused on:

- Barriers and challenges young people face related to each topic
- What young people want adults to understand about the topic
- Youth-friendly solutions to improve access to or the quality of care

General Council Meetings last about 90 minutes and are the only required meetings for members. Members receive a \$50 e-gift card for their participation, time, and expertise.

Discussion topics for 2023–2024:

- Youth with special health care needs and disabilities
- Sexual and reproductive health
- Teen dating and healthy relationships
- Mental and behavioral health
- Food and Nutrition
- Youth vaccines
- Youth-friendly care
- School-based health





Special Health Care Needs and Disabilities

Young people with special health care needs and disabilities need more relevant, responsive, and youth-friendly support and services, more support from adults, and to be treated with dignity and respect.

The first General Council Meeting discussion topic for this cohort focused on special health care needs and disabilities. Many current and former YAC members identify as having a visible or invisible disability, chronic health condition, or a special health care need. Others have friends and family who do. As a result, many members have direct experience with both health care and social service systems.

To facilitate this discussion, staff from DOH's Children and Youth with Special Health Care Needs program collaborated on planning and facilitating the meeting. Youth insight from this discussion helped program staff make sure their work remains relevant and meaningful to the people of Washington.

Council members identified challenges that teens and young adults with chronic and special health care needs and disabilities experience in health care, school, and social service settings:

- Limited access to affordable **essential and specialized health care services**, providers, and professionals. Young people from underserved communities face the most severe access barriers.
- Not enough **community resources** to meet unique health needs, especially in school settings.
- **Exclusion from activities and communications** in ways non-disabled people may not recognize.
- **Being taken advantage** of in ways non-disabled people do not recognize, which can worsen feelings of exclusion and affect mental health.
- **Stigma, bias, and discrimination** from peers, providers, and teachers.

"IEPs and 504 plans can be difficult to get, and not all teachers honor or look at them unless the student is being a bother."

"...people with disabilities are viewed less for some reason and many people with disabilities often are made fun of as well as ignored even by those who know it's wrong."

Council members emphasized the need more youth-friendly solutions to improve support for teens and young adults with chronic and special health care needs and disabilities. Their recommendations include:

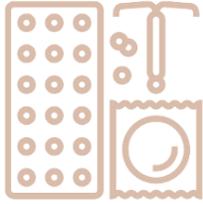
- **Normalize accessibility and inclusion** in all activities and communications so they work for young people with different abilities and needs.
- Supporting adults—such as teachers, providers, and other health professionals—must **model positive interactions that are respectful**, dignified, compassionate, safe, and encouraging.
- **Increase community-based support**, including resources to help young people find and access specialized health care, resources, and information. Help them connect with peers and build positive relationships with supportive adults.
- Create dedicated roles or—“**seats at the table**”—for young people with special or chronic health care needs and disabilities in decision-making spaces and adequately compensate them for their time and expertise.

“Posters [and] advertising take advantage of people with overt/external disabilities that are easy to see. [They] use people for photo ops, and don't have resources or follow through on campus (lack of ramps, lack of resources, lack of health insurance)”



“I think inclusivity would look like the way we treat wearing glasses.

People with glasses are seen as normal, they have a lot of options for medical testing, they are accommodated (sitting in front of a class, etc.) and most people don't consider them 'weird' or 'other'”



Sexual and Reproductive Health

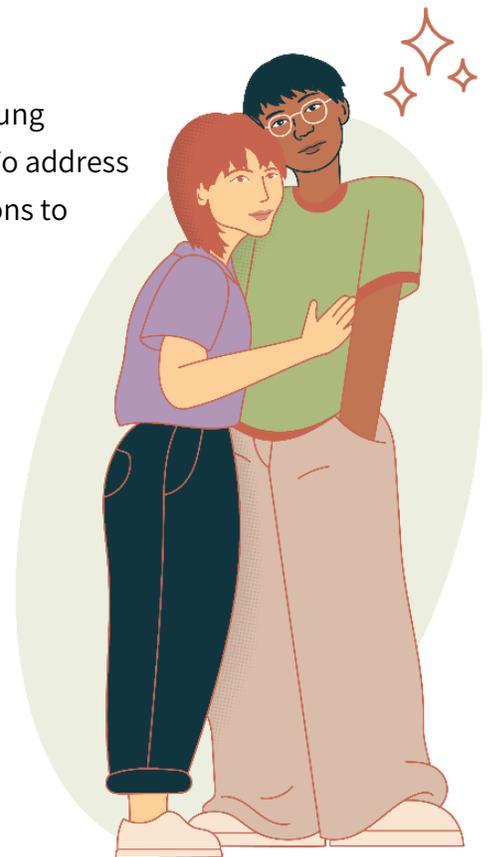
Young people want better access to high quality, age appropriate and youth-friendly information on sexual health and reproductive care.

This first YAC cohort identified this topic because of its intersection with multiple key dimensions of adolescent health. These include taking charge of their health, navigating friendships and relationships, social and emotional well-being, identity development, and consent and boundaries. Many current and former YAC members highlighted the importance of sexual and reproductive health for teens and young adults because of the transition to adulthood that occurs during adolescence. Others noted that sexual health education in schools and at home is limited and young people need more information to stay healthy and make informed decisions about their health.

Sexual and Reproductive Health Care

Council members identified barriers to sexual health care for young people, including cost, lack of confidential access, and stigma. To address these barriers, the YAC recommends more youth-friendly solutions to improve the quality of and access to sexual health care:

- **Easier access to free or low-cost contraception** and emergency contraception like Plan B, including in places where young people spend time, such as discreet vending machines on school campuses, the mall, or in grocery stores.
- **Greater access to low-cost or free confidential sexual health services**, with or without health insurance.
- **More school-based health centers.**
- Reliable, relevant information about **sexually transmitted infections (STI) for 2SLGBTQIA+ youth**, especially for women who have sex with women.
- **Safe environments where young people can talk openly about sex**, contraception, and STIs.
- **Trusted adults who reduce stigma and shame** directed at young people who have sex.



- **Sexual health care that is welcoming and normalized.**
- **Opportunities for young people to connect with their peers** to learn about sexual and reproductive health, like support groups or clubs that share accurate STI information.
- **Clear, high-quality information on sexual health**, sexual health care, and health care rights, including newsletters and other communication channels. Young people want information about screening information, and over-the-counter contraception and emergency contraception maps in Washington, and updates and about laws and policies that impact young people’s access to high quality sexual and reproductive health care and education.
- **Better support for teens who are pregnant**, with an emphasis on normalization and support rather than exclusion.
- **Adults who approach conversations about sexual health and STIs with compassion**, warmth, and a non-judgmental attitude, including using approachable and everyday language.



“...a vending machine in a discrete location with free emergency birth control and contraceptives.”

“Knowing how to find Plan B for free/cheap, without parents finding out, for those without insurance (undocumented, non-insured).”

“STI education and awareness for LGBT individuals is very minimal/out of date, especially for lesbian women/women who have sex with women.”

“A safe space to discuss and ask questions about STIs without judgment: some examples are a class, clubs, and more.”

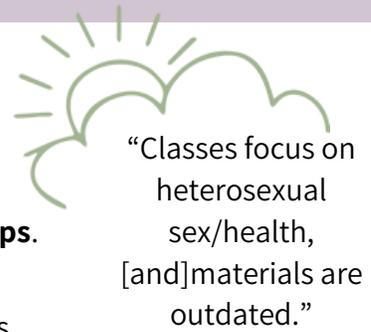


Sexual Health Education

Council members noted that there are significant information gaps and inconsistencies in sexual health education across the state:

- Sexual health education is often **combined with general health** classes.
- Some students **do not get sex ed until high school**. Others don’t receive it at all in high school, despite state laws requiring comprehensive sexual health education.
- Health class or **sex ed is optional** in some schools, allowing students or families to opt out.

- **Curricula often do not cover important topics** like emergency contraception.
- Content frequently **focuses on heterosexual relationships**.
- **Content is outdated**.
- **Pregnancy is framed as taboo**, and information for teens who are pregnant is not supportive.
- Many young people are **unable to have these conversations with their parents** or caregivers.
- **Online spaces often offer misinformation** or inaccurate information. Accurate and trustworthy sources can be hard to find and are not accessible to everyone.



“Classes focus on heterosexual sex/health, [and] materials are outdated.”

The Council recommends more high-quality sex ed delivered in schools across the state that covers the topics they need and is delivered in relevant, accessible ways:

- Content should cover **healthy relationships** of all types, is up-to-date, and reflects the current generation.
- Clear **information about contraception options, STI** screening, testing, and treatment. Information should also include how and where to seek help, as well as support related to pregnancy.
- **Sex ed that begins at least in middle school** and is offered as a standalone class to help more young people can access it.



“Curricula often focus on abstinence, failing to offer a comprehensive education and negating the fact that people are going to have sex.”

“Sex ed should start younger, ideally middle school. Middle schoolers are making sexual jokes without knowing what they're saying; students should get sex ed around that time or beforehand, so they know what they're saying.”



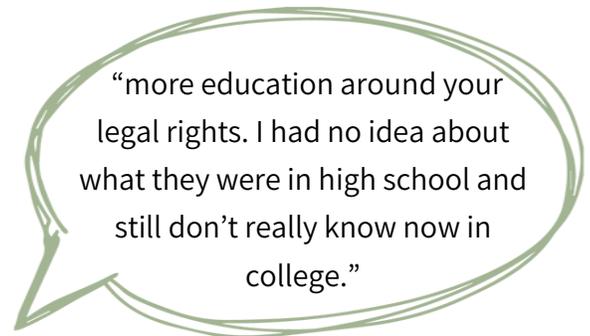
Dating and Relationships

Young people want youth-friendly, age-appropriate, and relevant information about healthy relationships. They also want to know where to get help when it's needed and more inclusive relationships represented in sexual health materials and education.

Building on previous discussions about sexual and reproductive health, the YAC identified a need to focus more specifically on relationships, teen dating, and violence prevention. To support this conversation, subject matter experts from DOH's Interpersonal Violence Prevention team joined the discussion to learn about young people's perspectives and support needs in this area.

The Council says young people have a lot of questions about healthy relationships, including:

- How to understand and **address power imbalances**.
- **Healthy communication**, especially about boundaries and consent.
- **What healthy relationships look like**, including examples that are relevant to younger generations.
- How to **recognize signs of an unhealthy relationship**, where to get help, and how to support friends in an unhealthy relationship.



The Council recommends young people have access to more information about and support for healthy relationships. This includes:

- **Stronger of protection**, safety, and support promoted in places where young people spend their time.
- **High-quality and credible information** about healthy relationships, legal rights, where to find help when needed—available in schools and online.
- **Media messaging that promotes healthy relationships**, including social media, movies, and television. This can be used to educate and raise awareness about healthy relationships and available support systems, and to counter the existing harmful or inaccurate content.
- **Public health messaging that is inclusive**, promote safety, show consent and boundaries in different situations, including friendships and online relationships.



“We often see the picture-perfect relationship with no background or showing of what that entails. Sometimes the media romanticizes abusive and toxic relationships. Media excludes the idea of a 'real' relationship.”

“We can counter bad messages by creating more diverse and authentic media representations of different relationships. Staying away from harmful stereotypes and allowing those who've experienced a certain relationship to have input on its portrayal. Especially important for portrayal of LGBTQ+ relationships and those with disabilities in relationships.”



The YAC also recommends state, regional, and local health and education agencies work together to create and promote age-appropriate, accurate, and inclusive sexual health education curricula that include discussions about:

- **Healthy and unhealthy behavior in relationships**, including romantic and platonic relationships, 2SLGBTQIA+ relationships, and online relationships.
- **Interpersonal violence**, including how to recognize it, interrupt the cycle of violence, and how to get help.
- **Common relationship experiences**, such as breakups, working through challenges, and what to expect in teen dating.
- **Examples of positive relationships and consent in a range of situations**, not only in the context of sex.



Media and school functions doing more to playfully promote friendship instead of the romantic relationships like school dances”

“How to discuss emotional boundaries with partners, aside from romantic/sexual boundaries”

“Education about not only sex ed but also healthy relationships is critical in schools, especially because not everyone has a healthy relationship model.”



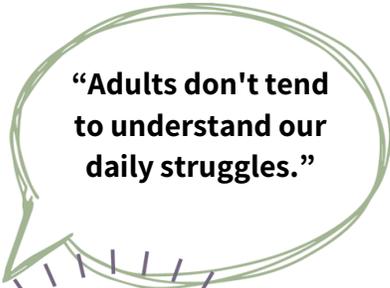
Mental and Behavioral Health

Young people want more education and support to understand and respond to harmful behaviors. They also want guidance on how to recognize these behaviors in themselves and in their friends.

The first cohort of the YAC discussed mental and behavioral health and the challenges and barriers young people face. The second cohort decided to dig deeper into this topic. Their discussions focused on healthy and harmful behaviors, what young people want to know, how information should be shared, and what they want adults to understand.

The YAC wants adults to know that being a teenager today is different from previous generations:

- Being a teenager today is hard.
- Teens and young adults today face extremely different social situations, academic pressures, and world events.
- Many young people are still recovering from the social and behavioral impacts of the COVID-19 pandemic.
- Technology is a central part of young people’s lives. Taking it away or limiting access doesn’t help.
- Social media has deep influences young people’s social lives, relationships, and mental health.
- Young people recognize the harms associated with social media, but they also rely on it to connect, find information, and stay engaged. They want digital environments to be healthier.
- Interventions, treatments, and support that work for adults don’t always work for teens and young adults.



“Adults don’t tend to understand our daily struggles.”



“Social media has created an entirely different ecosystem for youth.”

The YAC recommends young people have access to clear, practical information about mental health and how to get help. They want to know:

- How to identify unhealthy behaviors, including warning signs and symptoms of unhealthy behaviors.
- How to approach and help friends, and when



and how to involve a trusted adult.

- Healthy ways to cope with stress and communicate their needs.
- How to talk with trusted adults and friends about stress and mental health.
- How to spot misinformation about mental health, especially on social media.

The YAC also says young people want safe and compassionate support from adults at school and in their communities and more opportunities to connect and share with their peers.

- Adults who are more empathetic and compassionate and treat young people with respect, dignity, compassion and understanding.
- Safe and accessible spaces to talk with peers about mental and behavioral health, with minimal adult support.
- Greater attention to understanding the impact of social media on young people’s mental and behavioral health.
- More support and action to address harmful messaging and misinformation about mental and behavioral health online, especially on social media.
- More support, resources, training, and education for teens and young adults about helpful and harmful behaviors, mental health coping strategies, healthy communication, and navigating social media.

“Parents should practice empathy because they used to be young too.”

“How [do we] approach situations to help someone who is struggling?”

“How do we communicate with friends about stress/mental health?”

“There needs to be more emphasis on how social media impacts mental health”

“Kindness, compassion, and an effort to understand go a long way”

“What are healthy coping mechanisms?”

“What is the line between healthy and unhealthy?”





Compassionate and Youth-Friendly Care

Young people want better access to age-appropriate, responsive, and calm youth-friendly health care services, providers, and professionals.

The YAC met to discuss compassionate and youth-friendly care in adolescent health. This topic was identified for discussion by the previous cohort based on their experiences with different aspects of the health care system. During the discussion, YAC members described compassionate youth-friendly health care visit using the 5 senses: sight, sound, smell, taste, and touch. A YAC member helped design this activity and co-plan the meeting and discussion.



The YAC describes youth-friendly care as care that:

Looks calm, welcoming, and inclusive.

- Staff and providers reflect the local community and are welcoming to people of all identities and backgrounds. They appear visibly calm and organized.
- Visual materials like posters, brochures, and models cover topics young people want to learn about, use youth-friendly language, and reflect a range of skin tones.
- Clear visuals help navigate the space with accommodations for people who are blind, have low or limited vision.
- Spaces feel calming, with low visual clutter, limited fluorescent lights, and neutral or natural decor.

Smells clean and neutral.

- The space, providers, and staff smell clean and fragrance free.
- Neutral-scented masks are available.
- Plants are used to support an environment that's fresh and smells clean.

Tastes hydrating and energizing.

- Refreshments like water and small snacks are available if needed. Options are healthful, allergen-friendly, and considerate of local cultural preferences.
- Patients are encouraged to bring their own water and snacks if they prefer.
- Tests and devices used in the mouth have neutral or pleasant taste.

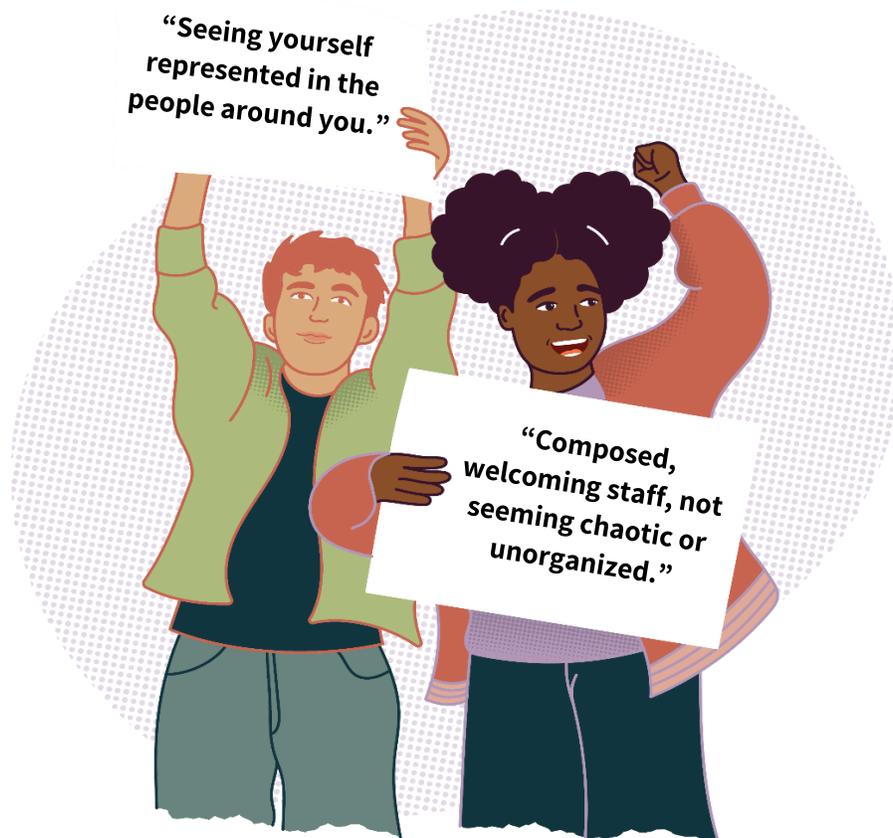
Sounds calm, quiet, relaxing and respectful.

- Staff and providers speak softly, calmly, kindly, and are easy to hear and understand.

- Providers validate concerns, show interest, ask appropriate questions, and use nonjudgmental language.
- Important information about health care—such as treatment plans, follow up information, and medical records—are discussed in plain language and are available in written format.
- The space sounds calm and quiet with reduced noise and, when appropriate, with gentle or calming music.
- Language interpretation options, including American Sign Language are easy to access.
- Private rooms offer sound privacy.

Feels calm, relaxed, and respectful.

- Appointments feel unrushed and providers sit at the patient’s level.
- Surfaces are clean and smooth, with soft fabrics.
- Waiting areas and exam rooms provide adequate personal space.
- Providers and staff explain where and why they need to touch a patient’s body, ask for consent before touching, and remain aware of their touch can affect comfort. Medical devices feel warm when used.





Food and Nutrition

Young people want more culturally relevant information about food and nutrition, as well as better access to healthy foods that reflect their culture’s needs.

The YAC members identified food and nutrition as a topic they wanted to discuss because of its impact on young people’s health and the volume of misinformation they see on social media. The group discussed 2 guiding questions: what young people want to know about food and nutrition, and recommendations to ensure young people have access to healthy foods when they want them.

The Council recommends young people have access to clear and reliable information about food and nutrition, including:

- **How to read and understand nutrition facts labels**, and which information on the label matters the most.
- **How to meet nutrient needs**, especially for athletic youth and for diets shaped by culture, religious beliefs, or lifestyle.
- How to tell the **difference between credible information and misinformation** on social media and from friends and adults.
- General **food and nutrition information that is body-positive, culturally relevant**, and doesn’t promote diet culture or label food as “good” or “bad.”
- **How to access qualified nutritionists or dietitians.**

“How to meet nutrient needs as a vegetarian or vegan or other diets.”

“...tailored information for your lifestyle - for young people and their coaches”

“How to weed out the unhealthy and dangerous fad diet information from reputable information.”

The YAC also recommends that all young people have access to healthful and enjoyable foods, regardless of income, location, culture, or dietary needs or restrictions. For example:

- Better access to **healthy foods in places where young people spend their time**, including schools and health care settings.
- **Low-cost or no-cost food options**, coupons, or expanded access to food pantries for people who need them.
- **Free breakfast and lunch for all school students** with meals that are nutritious and enjoyable to eat.
- **Food pantries that offer healthy options** considerate of local cultural diets and dietary restrictions, along with recipe cards for available foods.
- **More access to culturally and religiously relevant food**, and nutrition professionals who understand these needs and can better support youth.
- **Affordable access to specialized foods** like allergen-friendly, gluten-free, or dairy-free options.
- **Increased funding for nutritious foods** distributed by non-profits and other organizations to help young people, families, and youth-serving groups or organizations.



**“Free breakfast
and lunch at
school.”**

“Having access to food that you enjoy eating - for example cafeteria food sometimes isn’t that great”

“Food sovereignty - ensuring access to culturally and religiously relevant food.”



“Coupons or discounts for people with dietary restrictions that are low income. For example, like for certain disabilities or chronic illnesses.”



Vaccines

Young people want clear, youth-friendly information about vaccines that answers their questions and helps them make informed decisions.

The YAC identified vaccines as an important topic because of the amount of vaccine-related misinformation they've seen online and in their communities. They shared that many young people want to better understand vaccines and be more confident when talking about them. The discussion focused on the information young people want, the misinformation they encounter, and how adults can share accurate information with teens and young adults.

The YAC recommends young people have more information and tools around vaccines that cover the following:

- **Answers common questions young people have, like:**
 - Why do vaccines need multiple doses?
 - Why is there stigma?
 - What causes mistrust?
 - How can I talk with my family about vaccines?
 - Which vaccines do I need and when?
 - How much do vaccines cost?
- **Addresses common misconceptions and claims,** including that vaccines weaken your immune system, cause autism, contain tracking chips, cures diseases, and are harmful or poisonous.
- **Supports young people's knowledge and understanding of vaccines, including:**
 - The history of vaccines and how they work.
 - Sample questions to help with talking about recommended vaccines.
 - Conversation starters to support discussions about vaccines with family.
 - Use of technology to share information about vaccines, including social media, videos, infographics, and visually engaging websites.





Subcommittees

Previous YAC cohorts shared that they wanted more opportunities to explore topics they found most interesting. To respond to this feedback, 2023–2024 YAC members could participate in smaller subcommittees led by Department of Health subject matter experts. Each subcommittee had 5–10 YAC members. Over a period of 2–3-months, the groups met 4–6 times to discuss a single topic.

The YAC identified 4 focus areas for their subcommittees:

1. Sexual and Reproductive Health
2. Mental and Behavioral Health
3. Food and Nutrition
4. Youth with Special Health Care Needs and Disabilities

For each focus area, YAC members met with DOH subject matter experts and program managers to discuss what mattered most to them and develop a product or deliverable.

Sexual and Reproductive Health Subcommittee

The Sexual and Reproductive Health Subcommittee was co-led by staff from the Adolescent Health Unit and the Sexual and Reproductive Health Program. The group met from June through November 2023 and again from January through May 2024.

In 2023, the subcommittee focused on reducing stigma around sexual health topics and providing clear, youth-friendly information. The subcommittee recognized that Washington has comprehensive sexual health education, but there is room to improve and make requirements clearer and more standardized so all youth get the education they need. Members identified 4 priority topics: menstrual health, LGBTQ+ inclusive sexual health education, pleasure, and emergency contraception.

Emergency contraception: The group chose to focus on emergency contraception. The subcommittee researched and developed a youth-friendly Frequently Asked Questions guide. This guide covers:

- What emergency contraception is and what it isn't

- How to access it and how much it costs
- What to expect when using emergency contraception

The completed guide is available in [English](#) and [Spanish](#) on [Teen Health Hub WA](#).

Recommendations to Improve Sexual Health Education in Washington:

After completing and approving the guide, the Sexual and Reproductive Health Subcommittee voted to continue meeting through the end of the academic year and focus on comprehensive sexual health education in schools. To support this work, the subcommittee learned about Washington’s sexual health education background and requirements, and how they compare to other states. The group also reviewed statewide youth survey responses about what students’ experience in sex education classes.

Based on this information and their lived experiences, the group brainstormed recommendations to share with statewide partners, including the Office of Superintendent of Public Instruction (OSPI) and WA Personal Responsibility Education Program (WA PREP).

The subcommittee’s recommendations include:

1. Maintain and strengthen a focus on inclusivity.
2. Continue the emphasizing relationship skills, social-emotional learning, and consent.
3. Increase support for schools to implement sexual health education laws, including support for educators to become more comfortable teaching the material.
4. Encouraged student-centered and inclusive teaching approaches, such as anonymous ways to ask questions, requirement to include LGBTQ+ content.
5. Help students understand if new sexual health education laws are creating a noticeable change in schools.
6. Expand the use of student surveys to assess whether sexual health education meets



YAC Suggestion: Offer online classes available in earlier grade levels so students can opt in and access this information when they need it.

students' needs.

7. Introduce sexual health education earlier and gradually, rather than limiting instruction to brief units focused on pregnancy and STI prevention. This narrow focus reinforces the idea that sex is the only part of relationships.
8. Ensure content is accessible and meets the needs of all kinds of learners.
9. Provide connections to trusted online resources, like Teen Health Hub WA.

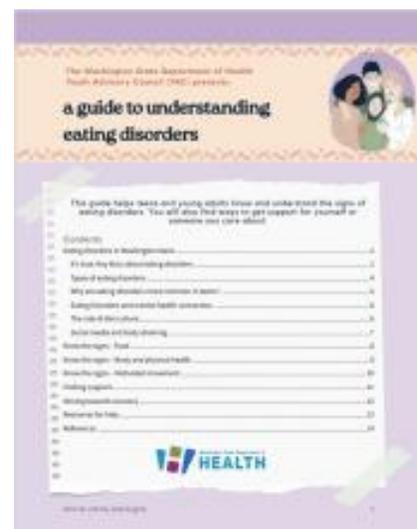
Mental and Behavioral Health Subcommittee

This subcommittee was co-led by staff from the Adolescent and Young Adult Health Unit with support from the Children and Youth with Special Health Care Needs (CYSHCN) team. The group met from July through October 2023. Members discussed the importance of recognizing healthy and unhealthy behaviors, understanding the different pathways to health and wellness, and the value of peer support. YAC members shared that teens and young adults want more tools to support their own mental and behavioral health and to support their peers. **The subcommittee recommended that health systems support and fund peer-to-peer programs and spaces for teens and young adults with mental and behavioral health needs. They also noted that these should be available where young people spend their time, like school settings.**

These discussions directly informed the development of DOH's School-Based Behavioral Health Peer Support Services grant opportunity, which was released in early 2024 and operated from July 2024 through June 2025.

Food and Nutrition Subcommittee

This subcommittee met from January through June 2024. It was led by a Clinical Nutrition Consultant from the CYSHCN team and a staff member from the Office of Public Affairs and Equity. Members explored topics of interest, including food access and dietary guidelines. The YAC ultimately chose to focus on discussing disordered eating. **Their discussions informed the development of a Guide to Understanding Eating Disorders, which is available in [English](#) and [Spanish](#) on Teen Health Hub WA.**





Youth with Special Health Care Needs Subcommittee

Led by 2 members of the CYSHCN team, this subcommittee met from March – June 2024. Members discussed how special health care needs and disabilities affect teens and young adults. **The group also shared thoughtful feedback on strengths and gaps related to financing and access to services. This feedback was informed the CYSHCN team’s Blueprint for Change.**

Subcommittee Evaluation and Future Directions

At the end of their subcommittee experience, members were invited to complete a brief survey for quality improvement. We received 3 responses from the Food and Nutrition Subcommittee and 4 from the Sexual and Reproductive Health Subcommittee.

Participants reported high satisfaction with their experience (average score: 9.7/10). They described the sessions as well-organized, informative, and useful. Respondents agreed or strongly agreed with the following statements:

- I feel that the input I shared in the subcommittee will influence work at DOH and the health of Washington youth.
- I felt comfortable participating in group discussions.
- Everyone practiced our group norms.
- My facilitator(s) valued my ideas.
- I would participate in this subcommittee again in the future.

Participants also shared helpful feedback about the facilitation. They appreciated having multiple ways to participate, engaging slides, varied presentation styles, and a balance between learning new information and then being able to contribute their ideas. The AYA team will apply lessons learned from this successful pilot and plans to use subcommittee model again with the Youth Advisory Council in 2026.



Committed to Action: YAC Activities

Over their service period, members of the YAC worked with the Department of Health to support implementation of recommendations from the previous cohort. This resulted in several new adolescent health projects and products. Members provided input on how recommendations could be carried out, collaborated on content and design, and helped promote resources and products to youth across Washington.

All resources are available on [Teen Health Hub WA](#) and we have also shared them with youth-serving health care providers.

Teen Health Hub WA

Feedback: Most young people get their health information online and from social media, where misinformation is common.

Recommendation: Young people want DOH to improve access to trusted, youth-friendly health information that they can access online on their own.

Action: DOH collaborated with the second YAC cohort, youth interns, and youth volunteers to co-create a new DOH webpage just for teens and young adults. [Teen Health Hub WA](#) is a curated directory of accurate and reliable health information.

Young people’s contributions guided: the type of content featured on the page, how information is organized, how users interact with the page, and the overall look and design. After DOH vetted each resource, YAC members determined if resources are relevant and even a favorite.

In 2024, the YAC received the Excellence in Adolescent Health Award from the University of Michigan’s Adolescent Health Initiative for Teen Health Hub WA and their innovation and dedication to young people.





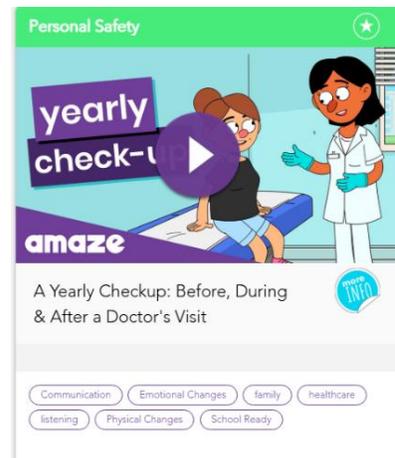
Health Care How Tos

Feedback: Many young people don't know how to navigate the health care system, including common tasks like scheduling a doctor's appointment for an annual well visit.

Recommendation: Young people need better and more youth-friendly communication with and from providers and health systems. Communication should be easy to understand, factual, and include guidance on how to navigate health care.

Action: The YAC collaborated with DOH staff to develop several easy-to-follow guides and explainer videos on common health care topics. These topics include how to [schedule a doctor's appointment](#), [how to keep your information confidential](#), and [how to prepare for an adolescent well visit](#).

They helped identify the questions young people have about these topics, and how they want information to be delivered. DOH partnered with local animators and Amaze.org to produce the videos, along with related tools and resources for young people and their providers. Work on additional guides will continue in 2026 when we will focus on materials about navigating health insurance, accessing resources, and related topics.



Youth Mental and Behavioral Health

Feedback: Young people shared they want to talk with peers about their mental health issues, but they don't always know when someone needs more support. They also said they don't have enough safe spaces where these conversations can happen.

Recommendation: Young people need more adult-supported and non-clinical peer-to-peer spaces to talk about their mental and behavioral health needs. They emphasized that these spaces should be available in places where young people spend time, like schools.

Action: In response to this recommendation, the Department of Health allocated \$195,000 to pilot school-based peer-to-peer projects to support youth mental and behavioral health

during the 2024-2025 school year. DOH awarded 3 School-Based Behavioral Health Peer Support Services grants (\$65,000 each) to Manson School District, Medical Lake School District, and Seattle Public Schools. Each district designed and implemented its projects based on its students' unique needs, and the projects were a huge success. Learn more about these and other school-based health projects at: [School-Based Health Center](#)

Youth Friendly Care Network

Feedback: Young people said it can be challenging to find health care providers and services that are inclusive, compassionate, non-judgmental, centered on youth experiences, and responsive to their needs.

Recommendation: Young people want safe, compassionate, welcoming, and nonjudgmental health care environments. They also want health care systems to adopt youth-centered policies, practices, and procedures, with support for implementation.

Action: The Youth Friendly Care Network is a statewide initiative that brings together youth-serving medical and behavioral health providers who want to learn more about youth-friendly care and connect with other youth-serving providers. Throughout 2024, YAC members and youth interns worked together with DOH staff to outline the guiding principles of youth-friendly care. These principles serve as a youth-defined framework that anchor the Network's approach.

DOH staff invited youth-serving medical and behavioral health providers and professionals from across the state to join the Network. The Network is intended to help providers and professionals better understand young people's perspectives and preferences and to support improvements in care delivery for teens and young adults. Learn more on the [Youth Friendly Care Network](#) webpage.





Adolescent and Young Adult Health Unit Action

Based on recommendations from the Youth Advisory Council 2023–2024 Cohort, the Adolescent and Young Adult Health Unit at DOH will:

- **Continue collaborating with the YAC to maintain and improve [Teen Health Hub WA](#).**
- Continue partnerships and activities that **increase equitable access to sexual health information, education, and services for young people.**
- Leverage partnerships to **develop new youth-friendly how-to guides on common health care tasks**, like getting and understanding health insurance, and finding youth-friendly providers.
- Continue **supporting and promoting physical and behavioral health care and services in schools, including school-based health centers.** The Adolescent and Young Adult Health Unit currently administers the DOH School-Based Health Center Grant program as directed by state law (RCW [43.70.825](#)).
- **Expand the Youth-Friendly Care Network** to reach more youth-serving providers and promote youth-centered, age-appropriate, and culturally relevant health care principles and procedures.
- **Seek funding opportunities to support behavioral health services in schools and youth training for mental and behavioral health**, including peer support, Mental Health First Aid training, and related resources.

Share How You're Using Youth Feedback

If you, your practice, organization, or agency make changes based on YAC feedback or this report, please share them with us! We would love to feature them on our webpage: [Youth Engagement and the Youth Advisory Council](#)

To learn more about how to engage young people in your work, email us at adolescenthealthunit@doh.wa.gov



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