

Universal Mental Health Screening of Children and Youth

Project Plan Proposal

The Commission has been asked to identify and report information and recommendations to the Legislature related to universal mental health screening for children and youth in California. Below is a background and summary of activities to support this project.

Background

Between 50 and 75 percent of mental health symptoms begin during youth and young adulthood.ⁱ In California alone, at least one in every three people between the ages of 12 to 17 report having a significant mental health challenge. Yet, the mental health needs of young people are frequently undetected and unsupported. The consequences of such oversight can be dire, even fatal.

A slew of evidence confirms that a young person living with unaddressed mental health needs is more likely to experience social, economic, and health-related challenges later in life – shortening their life expectancy by 10 to 20 years.ⁱⁱ In the short term, a lack of mental health support leads to suffering and in the worst case, can result in suicide for young people.ⁱⁱⁱ Fortunately, when a person’s mental health needs are identified and supported early, their outcomes greatly improve.^{iv}

Universal screening, where all children are assessed for risk, is a key strategy for detecting and responding to the earliest signs of mental health needs. Young people spend a large portion of their time in school settings and because of this, schools provide an opportune setting for screening.^v

Despite its potential, California’s schools vary widely in their use of mental health screening tools and practices. Concerns around stigma, capacity limits, and legal considerations further discourage the use of screening in schools. California wants to understand the opportunities and barriers around mental health screening as part of its broader commitment to improve the mental health of young people and to prevent challenges later in life which stem from unaddressed mental health needs.

Project Goal

The Legislature has requested that the Commission, in consultation with the Department of Health Care Services, report information and make recommendations to the state and Legislature related to universal mental health screening of children and youth by March 1, 2024. It is the intent of the Legislature that the report informs future budget and policy

considerations around expanding mental health screenings to children in California, with an emphasis on school settings.

The Legislature requests that the Commission's report include the following:

- a. A review of existing research and standards related to universal mental health screening policies and practices for identifying and addressing mental health needs for children and youth.
- b. A review of the evidence on the effectiveness and cost of existing screening tools and how they are administered across various setting and populations.
- c. Information on existing mental health screening in California including the Sonoma County Office of Education universal screening program, among other screening programs.
- d. Recommendations to the Legislature related to tools, best practices, and costs of administering and responding to universal mental health screening for children and youth in California.

Project Activities

Below are proposed activities to support progress towards the Legislatures goals.

Research and review:

The Commission will conduct research to support the development of a foundational knowledge of screening models, tools, and best practices as they are recognized in academia, clinical practice, policy, and government. This may include the following:

- a. Summary of evidence to support universal screening for mental health and summary of best practices.
- b. Identity universal screening models and standards including those in other states and/or countries.
- c. Landscape analysis for mental health screening in California.
- d. Cost analysis for implementing universal screening for children and youth.

Outreach and Engagement:

The Commission will engage with a diverse array of experts, stakeholders, people with lived experience and other key partners to better understand opportunities and concerns regarding universal mental health screening for youth. Activities may include:

- a. Key informant interviews
- b. Site visits to universal screening programs
- c. Public meetings

Final Report:

Proposed activities will inform a final report, developed by the Commission, with a summary of findings and recommendations to satisfy the requirements of the Legislature’s request outlined above. Staff will present a drafts report to the Commission for review and consideration of adoption.

Funding

The Commission’s proposed budget includes \$200,000, allocated by the Legislature, to support the Commission in its activities to meet the Legislature’s goals for universal mental health screening. Below are considerations for the use of these funds.

Research and Review: Funding for one or more contracts to support literature reviews, landscape analysis, cost analysis, and other research activities.

Consult and Support: Funding to secure ongoing consult, review, and other support from subject matter experts.

Operations: Funding for travel expenses, material development, and communication activities.

Timeline

Staff will develop and execute a formal work plan of activities and milestones, with the goal of delivering a final report to the legislature prior to March 2024.

ⁱ Kessler, R. C., Amminger, G. P., Aguilar-Gaxiola, S., Alonso, J., Lee, S., & Ustün, T. B. (2007). Age of onset of mental disorders: A review of recent literature. *Current Opinion in Psychiatry*, 20(4), 359-364. <https://doi.org/10.1097/YCO.0b013e32816ebc8c>

ⁱⁱ Chesney, E., Goodwin, G. M., & Fazel, S. (2014). Risks of all-cause and suicide mortality in mental disorders: A meta-review. *World Psychiatry: Official Journal of the World Psychiatric Association (WPA)*, 13(2), 153–160. <https://doi.org/10.1002/wps.20128>

ⁱⁱⁱ Ivey-Stephenson, A.Z., Demissie, Z., Crosby, A.E., Stone, D.M., GAylor, E., Wilkis, N., Lowry, R., & Brown, M. (2020). Suicidal ideation and behaviors among high school students — Youth risk behavior survey, United States, 2019. *MMWR Supplements*, 69(Suppl-1):47–55. [http://dx.doi.org/10.15585/mmwr.su6901a6external icon](http://dx.doi.org/10.15585/mmwr.su6901a6external%20icon)

^{iv} Csillag, C., Nordentoft, M., Mizuno, M., Jones, P. B., Killackey, E., Taylor, M., Chen, E., Kane, J., & McDaid, D. (2016). Early intervention services in psychosis: From evidence to wide implementation. *Early Intervention in Psychiatry*, 10(6), 540–546. <https://doi.org/10.1111/eip.12279>

^v Mental Health America Board of Directors. (2016, September 18). Position statement 41: Early identification of mental health issues in young people. Mental Health America. [https://www.mhanational.org/issues/ position-statement-41-early-identification-mental-health-issues-young-people](https://www.mhanational.org/issues/position-statement-41-early-identification-mental-health-issues-young-people)