

THE STATE OF PLAY

Each month, we examine how the mental health conversation is evolving, focusing on youth, women, and the justice system.

The diagram below illustrates the conversation on youth mental health, as it has taken place in roughly 4,000 new articles from August 2019 to February 2020. Takeaways from the data analysis include:

College campuses leave gaps in care – and students are demanding action.

There is an increasing recognition that the mental health needs of college students are not being met – and that the lack of care continuity on campus takes much of the blame. Recently, students have begun to organize to **demand** better mental health services.

Discussions of youth substance abuse have not merged with other youth mental health topics

Perhaps surprisingly, the deep correlations between youth substance abuse and other youth mental health issues – from a clinical perspective – are not frequently connected in public discussion.

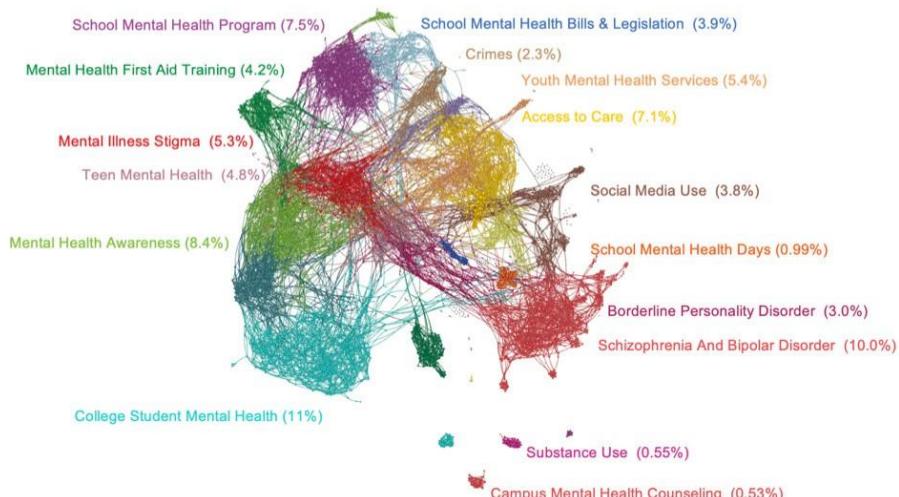
Mental health support in schools finds funding.

In September 2018, New York and Virginia were the first states to **announce** that they were requiring mental health curriculum in schools. Since, there has been an increasing amount of attention to **funding**, as more school districts across the country work to implement mental health programs.

The clusters in the diagram show the key words, people, and companies under discussion, while the linkages between clusters illustrate the connections between the themes.

The Shape of the Youth Mental Health Conversation

August 2019 to February 2020



THOUGHT STARTERS

A round up of thought-provoking pieces on mental health for youth, women, and the justice system.



Youth Mental Health: Lockdowns and Breakdowns

Across the U.S., 40 states now require “lockdown drills” to prepare for active shooter scenarios. A coalition – including the American Federation of Teachers, National Education Association, and Everytown for Gun Safety Support Fund – has **released a white paper** questioning this nationwide response. Key to their skepticism is the consequence on student mental health:

“Mental health professionals have begun warning about the effect of these drills on students’ well-being and about the possible short- and long-term consequences on school performance and physical and mental health. According to Melissa Reeves, former president of the National Association of School Psychologists, ‘What these drills can really do is potentially trigger either past trauma or trigger such a significant physiological reaction that it actually ends up scaring the individuals instead of better preparing them to respond in these kinds of situations.’”



Women’s Mental Health: Not Well in the Workplace

A WebMD survey of **2,000 working adults** finds that women prioritize emotional wellbeing more than men – but experience stress, loneliness, and isolation more often. The survey’s other key findings include:

“*Women with children are the most lonely*”

“*Women place more importance than men on seeking support from others*”

“*Women are less satisfied with parental leave than men*”

“*Millennials prioritize “emotional well-being” most, whereas Gen X and Boomers prioritize physical well-being*”



Justice and Mental Health:

The Scattergood Foundation and its collaborators have **issued a white paper**, arguing that community behavioral health systems can and should play a greater role in “meeting the needs of justice-involved people.” Specifically:

“The community behavioral health system is well positioned to address the structural risk factors that drive justice involvement of people with serious mental illness (e.g., poverty, homelessness, and unemployment), either directly or through the coordination of services. There is evidence that suggests that addressing these social determinants of health within the purview of the community behavioral health system can lead to successful outcomes. For instance, supported employment and Housing First initiatives have been shown to effectively increase treatment engagement among people with serious mental illnesses (SMIs) and also help them gain independent housing or competitive employment and reduce reoffending.”

THE PUNCHLIST



3 ways to take action on this month.

1 For your calendar:

If the white paper on school lockdown drills has you thinking about solutions, [The Council of State Governments](#) (CSG) is hosting a [webinar](#) on Thursday, March 26th titled “School Safety and Collaboration: Building A Behavioral Health and Justice Response.” A panel of experts – from CSG, the Bureau of Justice Assistance, the National Center for Youth Opportunity and Justice, and the Schenectady school district – will discuss how to effectively implement a cross-sector solution for safer schools.

2 For your feed:

The U.K. presents a good foil to examine how policymakers consider mental health in the U.S., thanks in part to the Royal Family’s openness on the issue. Louise Haigh, a British Labour politician, is a fiery advocate for women’s health, caregivers, youth, and a better system of mental healthcare, especially as it relates to law enforcement and criminal justice. Follow her on Twitter [@LouHaigh](#).

3 For your commute:

The American Psychiatric Association produces a podcast called “The Medical Mind” that explores innovations in mental health care. In a 12-minute episode titled [“Supporting Young People with Substance Use Disorders,”](#) a Harvard psychiatry professor offers suggestions for how parents can be part of the treatment team when a young person is at high risk of developing a substance use disorder.

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