SPEAKER: Welcome to *PublicHealthOnCall,* a podcast from the Johns Hopkins Bloomberg School of Public Health where we bring evidence, experience, and perspective to make sense of today's leading health challenges.

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STEPHANIE DESMON:	This is Stephanie Desmon. Today's episode is a tough one. Recent CDC data suggests that teenage girls and LGBTQ students are really struggling with their mental health, with three in five teen girls reporting symptoms of sadness and hopelessness in 2021. I talked to Kathleen Ethier, Director of the CDC's Division of Adolescent and School Health, about the devastating numbers and how we can and must help our kids. Let's listen. Kathleen Ethier, thanks so much for joining me.
KATHLEEN ETHIER:	Thanks so much for having me.
STEPHANIE DESMON:	I brought you here today because I had read the recent CDC report on youth and adolescent behavior. And it tells us the kids are not all right. And some of the results are really scary. And I'm wondering if you could run through a little bit about what you found
KATHLEEN ETHIER:	Yeah, sure. These data are really clear. Young people are telling us that they are in crisis. And we have to act on that. So we see that all students across all of the different groups that we look at got worse in terms of their mental health. And so at this point now, 42% of high school students experienced depressive symptoms in the last year. 29% said that their mental health was poor in the last month. And 10% attempted suicide in the last year. And the results are even more disturbing for teenage girls and for LGBTQ youth. So the thing that stands out to us is that 14% of teenage girls said that they had been physically forced to have sex when they did not want to. So in the last 10 years, that number had stayed way too high, but consistent around 10% or 11%. And we saw this jump from 11% to 14% between 2019 and 2021. And as folks who-- we monitor this. We've been monitoring this data for more than 30 years. To see that kind of jump in just two years is really alarming. Really sadly, LGBTQ+ youth continue to face extremely high levels of violence and mental health challenges. So about a quarter of them said that they were bullied. 14% didn't go to school because of safety concerns. Almost a quarter attempted suicide. These numbers are devastating. And so really calls on us to act.
STEPHANIE DESMON:	So when you're faced with something this devastating, where do you start?
KATHLEEN ETHIER:	I think trying to understand what's going on with young people, so both looking at our data, looking at other research. But for us, we work really closely with schools and on improving the health and well-being of students in schools. And so we know that schools are on the front lines of the mental health crisis in this country. We hear from educators all the time that they are dealing with the mental and behavioral effects of their students in their classrooms. And so, for us, really trying to help schools navigate through this crisis is first and foremost for us.

STEPHANIE DESMON: Well, what can schools do?

KATHLEEN ETHIER: There's really, actually very clear things that schools can do. And I know that we talk a lot about how burdened schools are right now. And I think our intent is not at all to increase the burden. It's actually to alleviate the burden.

So when we hear from teachers, for instance, that their classrooms are just full of young people who are having mental and behavioral problems, what we do is we help school districts put in place training programs for teachers to help them be able to better manage their classrooms. And improved classroom management has been demonstrated to improve health and well-being of students in classrooms. And so that's one thing that we do.

We also know that these positive youth development programs that engage young people, get them out into their communities to provide service, bring mentors into programs, really improve young people's sense of connection and their sense that they are cared for and supported. And so putting those kinds of positive youth development programs in place is incredibly important.

And I think the third set of things that we really focus on is making sure that schools have inclusive policies and practices, because we know that when schools are less toxic for the most vulnerable youth, they improve for everybody. So when schools are more inclusive, the mental and behavioral impacts, we see them not just in, for instance, LGBTQ+ students, but in all students. And so we're really focused there on making sure that schools are safer and more supportive for everyone.

STEPHANIE DESMON: Why these numbers at this moment in time? I mean, what's your analysis of why we're seeing this?

KATHLEEN ETHIER: It's really complicated. And I think there's probably not a single cause. We get asked all the time, is it social media. And I think it would be great if there was a silver bullet, a magic thing that we could do that if we fixed it, everything would get better. But I think we know that there have been some biological changes over the last few decades.

Puberty is starting earlier. This is impacting brain development. And it is likely impacting brain development in ways that impacts mental health. It may be impacting girls more than boys since puberty has decreased more for girls than for boys. And so I think we're still learning. There are some really wonderful researchers who are looking at brain development and changes in brain development and how that might be impacting mental health. And I think that understanding that better is really important.

Second, there's the psychology. And I think we're doing a better job of helping young people talk about their mental health, have the language to describe what they're feeling. We may be seeing gender differences in the way that boys versus girls understand their emotions and then are able to talk about them and act on them.

So we have to figure out whether-- the good news is that we're giving young people better language. We have to make sure that we are then addressing what they're telling us in the ways that they're telling us. So I think both understanding how we see mental and behavioral health, both for girls and for boys and for those young people who don't identify as either boy or girl, is really important.

But the third thing is really the place that in some ways we can have the most impact. And that's in our social environment. So I think at the root of many of the things that we're seeing is social isolation. We know that social isolation impacts mental and behavioral health. And so there's a lot of things happening in our social environments that are exacerbating social isolation.

So certainly the pandemic is one of those things. I mean, we were literally kept away from each other for long periods of time. And I think for young people, missing out on both their socialization and also the supports that they get in, for instance, schools and in their communities, really significantly impacted them. And I think we have more conflict in our social environment in general, regardless of age.

And I think it would be naive to think that that's not impacting young people. And so really looking at the environments where young people play and work and go to school and making sure that they are safe and as conflict-free as possible is really important.

STEPHANIE DESMON: So I have a 16-year-old daughter. And I've watched her through the past several years of the pandemic. And I know that all of this rings true to me. And I'm wondering what advice we have for parents.

KATHLEEN ETHIER: I can imagine that, for parents who are seeing these data, it is incredibly alarming. And there are some things that parents can do. The first is they can understand, get as good a sense as they can of where their young people are currently in terms of their mental health.

There are some signs and symptoms to watch out for, like changes in behavior, changes in eating patterns, changes in sleeping patterns, that give you some indication that something's not going well.

You can know where your young people are or who they're with, what they're doing, from a technical standpoint. We call that parental monitoring. And it is a protective factor that has long-term impacts on health and well-being for young people. And one way that you do that is you make sure you have this open line of communication with your young person, but also being connected to their schools, being connected to the parents of their friends, that gives you a sense of really what's going on with them. And I think all of those things are really, really important when your kids are teenagers.

But I do think that for parents of younger children, I think it's never too early to start to have conversations about how they're feeling. So getting used to hearing from them, how they describe their emotions, how they describe their sense of well-being, and continuing to have that conversation because I think starting early, in terms of those conversations about their mental health, by the time they get to be teenagers, this is also just a part of the way that they talk to you and that you talk to them.

I know that feels like a lot to add on to what parents are already dealing with. But I also think that these are things that you can really incorporate into your day-to-day that will definitely help.

STEPHANIE DESMON: So these data are from 2021.

KATHLEEN ETHIER: Yes.

STEPHANIE DESMON:	I mean, I'm wondering if you're concerned that it's just gotten worse since.
KATHLEEN ETHIER:	I'm not sure. Again, we collect this data every two years. And this data was collected in the fall of 2021. So I think that is always of concern. We will do smaller studies along the way. I think this data is disturbing enough that it is a call to action for us. And I'm not sure that we need-- I certainly don't think that there's anything that is incredibly comforting here that suggests that we can wait to address it.
STEPHANIE DESMON:	Mm-hmm. Talk a little bit about your findings on violence. What are those about do you think?
KATHLEEN ETHIER:	One of the things that I think about this a lot and get very concerned about is that we have to make sure that when we look at the data on violence, the experience of violence, particularly for girls and particularly for LGBTQ+ students, we have to remember that this data is about experience of violence, which is really about perpetration.
	So we're not assessing who is doing the perpetrating. I really want to make sure that what we don't do is ask the question, what's wrong with girls or what's wrong with LGBTQ+ students because I think that leads us to the wrong solutions and also can further stigmatizes those groups of young people.
	I think we have to think about the environments where our young people are and ask the question, what's creating the level of conflict in those environments that is leading to the increase in experience of violence, or even if we haven't seen increases, the level of experience of violence that we're seeing.
	And so what's happening in our school environment if we're seeing that such a high proportion-- almost a quarter of LGBTQ+ students said that they were bullied at school-- in a year where there's a good chance that they were not in school for a portion of that year, since it was 2021.
	How do we make our schools safer for those young people? I am extremely concerned, and have been for a while, at the level of sexual violence that girls are experiencing. And it's been too high for too long. The fact that one out of every 10 teenage girls, before we saw this increase, has been raped. And now it is likely even more than that.
	I know that that's really hard for people to take in. I would guess as a parent it is really hard to think about the fact that of every 10 high school girls that you know, at least one of them, and probably more, have been raped.
STEPHANIE DESMON:	Yeah.
KATHLEEN ETHIER:	But we have to start asking the question that, what is going on, not just with our girls, but what's going on with our boys that is leading to such a high level of sexual aggression. And so those are the kinds of questions that we really have to ask. Where are they learning that this is not only acceptable behavior, but where are they learning that they don't need to get the consent of their partner? I mean, there's just so many layers of this, how we think about how to reduce sexual aggression among boys that we have not spent nearly enough time with.
STEPHANIE DESMON:	Kathleen Ethier, thank you so much for your time. This has really giving us a lot to think about.

KATHLEEN ETHIER: Thank you so much for having me and for taking on these really important issues.

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SPEAKER: *Public Health On Call* is a podcast from the Johns Hopkins Bloomberg School of Public Health, produced by Joshua Sharfstein, Lindsay Smith Rogers, and Stephanie Desmon. Audio production by JB Arbogast, Holly Cardinale, Philip Porter, Spencer Greer, and Matthew Martin, with support from Chip Hickey.

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