Fostering Healthy Mental, Emotional, and Behavioral Development in Children and Youth
Study Sponsors

• Substance Abuse and Mental Health Services Administration, Center for Mental Health Services
• Centers for Disease Control and Prevention, Division of Human Development and Disability
• National Institutes of Health, National Center for Complementary and Integrative Health
• National Institutes of Health, National Institute on Drug Abuse
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Statement of Task

- Review key research and strategy advances and challenges since publication of the 2009 report
- Describe recent progress in understanding what is necessary to effectively implement strategies
- Identify program, policy, and research gaps for promoting healthy MEB development

Conduct a consensus study on fostering mental, emotional, and behavioral health
Specific Task Considerations

- Trends in prevalence of specific MEB conditions
- Current context for health promotion strategies
- Public health framework
- Two-generation approaches
- Biological and environmental influences
- Health equity and attention to cultural differences
- Complementary and integrative approaches (mindfulness)
- Role of practice-based evidence, data systems, and QI methods
Vision: MEB Health is a National Priority

Imagine what the United States would be like if all sectors of society joined together to use current knowledge to establish policies, communities, and programs designed to ensure that all young people have an opportunity to thrive. Envision that 10 years from now, the U.S. Surgeon General can celebrate that children’s healthy development has become a foundational value, and as a result, effective programs to promote mental, emotional, and behavioral (MEB) health and development are in place. The Surgeon General is able to document decreases in rates of MEB disorders of all types and evidence that increasing proportions of young people are attaining adulthood having met key developmental milestones, and having developed the skills and attributes they need to lead meaningful, productive, and engaged lives.
Reducing Risks for Mental Disorders
(1994)

The National Academies of
SCiences • Engineering • Medicine
Preventing Mental, Emotional, and Behavioral Disorders Among Young People (2009)
Fostering Healthy Mental, Emotional, and Behavioral Development in Children and Youth: A National Agenda (2019)
Prevalence for MEB Disorders in Children and Adolescents

- Anxiety: 31.9 percent
- Behavior disorders: 19.1 percent
- Depression: 14.3 percent
- Substance disorders: 11.4 percent
- Comorbidity: 40 percent
- Suicide: second most common cause of death, ages 15-24; third most common, ages 10-14
New Research: Expanded Spectrum of Opportunities

- Integrated understanding of influences on MEB health
- Expanded understanding of implementation
Influences on MEB health

Complex neurobiological processes interact with physical and social environment—from before conception through adolescence, and across generations
Strategies

**Generational:** Interventions designed to affect the behaviors and attitudes of parents and caregivers may also improve MEB outcomes for young people.

**Education System:** Strategies delivered in school settings for promoting MEB health achieve positive outcomes that last for years.

**Health Care:** Primary care settings provide opportunities for promoting health MEB development for children and their families.

**Community:** Living in communities with access to social, economic, and physical resources that promote health and well-being, increases opportunity to thrive.

**Policy:** The evidence base regarding the use of local, state, and federal policies to promote MEB health is growing but incomplete.
Moving the Dial:
Implementation Process

To implement effective interventions at population scale:
• Identify core components necessary for long-term outcomes
• Adapt them for diverse settings
• Establish ongoing interactive implementation system
Key elements of effective implementation system include:

• Active engagement of an array of partners—community coalitions
• Well-trained workforce
• Active leadership and management
• Continuous fidelity monitoring and feedback

• System for monitoring quality and outcomes
• Learning through evaluation and improvement
• Multiple methods of communication with stakeholders
Recommendations to the U.S. Department of Health and Human Services and Related Agencies
Recommendation 1: Lead and collaborate with agencies at the state and local levels, as well as private partners, in coordinating a highly visible national effort to make the promotion of MEB health a national priority.

• Develop integrated plan for data collection and monitoring
• Integrate and coordinate new and existing efforts
Recommendation 2: Use program creation, regulatory, and other policy capabilities to promote healthy MEB development and mitigate risks to MEB health.

- Guidance
- Accountability
- Coverage for behavioral health services
- Alignment of policies
Recommendation 3: Support implementation by providing funding and other resources to support:

• research and demonstration projects
• cross-sector partnerships
• innovative funding mechanisms
• benefit/cost and other economic analyses
• sustainability
Recommendation 4: Assess existing data sources and develop plan using existing and new sources to track:

- Status of MEB development
- Exposure to risks
- Access to interventions
- Implementation of programs and policies and impact
Research Agenda

1. Design and evaluation of scalable interventions at the population level.
2. Design, evaluation, and implementation of effective school-based interventions.
4. Policy strategies to address effects of social, racial, and economic disparities on MEB health.
5. Design and evaluation of implementation strategies.
National Agenda for a Decade of Children and Youth: Aspirations

• Stakeholders recognize the critical importance of measuring and tracking the MEB health and development of young people.
• Public health campaigns have raised broad awareness of the need for improved MEB outcomes for children and youth.
• Communities empowered to organize across sectors.
• Families have support in making advantageous decisions for their children.
• Child care providers and educators work to advance MEB health.
• Health care providers attend to MEB health of parents and children.
• Businesses invest in the well-being of employees and their families.
• Government entities consider MEB data in policy decisions.
Full report is available online:
https://www.nap.edu/catalog/25201
The Board on Children, Youth, and Families (BCYF) is a nongovernmental, scientific body within the National Academies of Sciences, Engineering, and Medicine that convenes top experts from multiple disciplines to analyze the best available evidence on critical issues facing children, youth, and families today.
Thank you!

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