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Written by: Questions?



What's Behind the Latest Kids Count Rankings?

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The suicide rate among youth ages 10-19 has doubled since 2008. Nationally Utah has one of the highest rates of youth suicide, and the highest for teenage girls. The rate of suicide among girls in Utah is almost double the national average.

The suicide rate is significantly higher than all other fatal injuries for youth—both intentional and unintentional. The Utah Department of Health 2015 survey data confirms that youth depression and suicide ideation rates are on the rise. Among surveyed youth (grades 6-12), 14.4% said they had seriously considered attempting suicide; this is up from 7.4% in 2011. Depression among youth also increased; 22.7% of all youth experienced depression related indicators in 2015. The increase is particularly significant for younger children: since 2011, the rate of depression among 6th graders has more than doubled to 16.2%.

Researchers and advocates point to a variety of possible reasons for the rise in youth suicide. Some reports suggest that Utah <u>LGBTQ youth</u> are at a higher risk. Others point to a rise in bullying, <u>especially online</u>, and increased pressure and social demands on our youth. The <u>Utah Department of Health</u> notes that children

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who are involved in the juvenile justice system or experience school disciplinary action can be at a higher risk. In addition, children living in rural and frontier areas may have higher rates of suicide, because they have a harder time accessing services and care. There is no one clear answer to explain this alarming rise, and the reasons are often complex.

But there are important steps we can take now, moving forward to keep families and children safe.

Policy Implications and Action to Keep All Children Safe

Expand mental and behavioral health services for children and youth. Start early and screen often to promote children's behavioral, developmental and mental health. All children should have access to comprehensive mental health screenings and care. The earlier we start, the more likely we can prevent disorders from occurring or escalating. At least 14% of all children in Utah report one or more mental, behavioral or developmental conditions, according to 2011-2012 data. Investment in early mental health promotion and intervention strengthens outcomes for children, families and communities.

Safeguard homes. Over a third of all youth suicides in Utah are committed with firearms. Keeping children safe and firearms stored properly is a critical factor in suicide prevention. For more information, visit www.projectchildsafe.org.

Cover all kids. 85,000 children in Utah do not have health insurance, limiting their access to mental health services. When children are not insured, they are less likely to get care and build consistent relationships with providers. Health insurance is the starting point to keep our kids healthy and safe.

Cover all parents, too. Too many parents are uninsured in Utah because they fall into the <u>Medicaid coverage gap</u>. When parents are uninsured, they cannot get the mental and physical health care and treatment they need. We need to close the insurance gap for all parents and individuals. To create a safe and healthy home for their family, all parents need affordable health insurance.

Improve access to regular check-ups and preventive care. Well-child visits are important opportunities to assess children's physical and mental health. Children of

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all ages should receive timely, comprehensive check-ups, including regular, standardized developmental screenings. But less than 50% of adolescents receive their well-care visit. Parents should also be screened during well-care visits to assess family history and provide comprehensive care.

Support and strengthen school-based, after school and out-of-school time counseling and resources. Ensure that children can access counseling and care, and build trusted support networks with peers and adults.

Support ongoing research and improved data. We need to ensure our public health and safety systems have accurate and comprehensive information. They need to have the tools, measurements and support necessary to fully understand who is affected, how Utah families are accessing the quality care they need, and how to connect children with treatment.

Out of the Shadows

Recent <u>reports</u> and <u>media</u> attention are bringing this important issue to light. Now it is time to act. No one in Utah should have to experience this tragedy. Through strong policies, dedicated resources and coordinated action, we can keep our youth safe and build communities where all Utah children and youth can thrive.

For additional information

Help is available 24 hours a day 7 days a week.

If you live in Utah, call the Statewide Crisis Line at 801-587-3000 or

call the National Suicide Prevention LifeLine at 1-800-273-TALK (8255)

Or visit suicidepreventionlifeline.org

For 30 years now, Voices for Utah Children has called on our state, federal and local leaders to put children's needs first. But the work is not done. The children of 30 years ago now have children of their own. Too many of these children are growing

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up in poverty, without access to healthcare or quality educational opportunities.

How can you be involved?

<u>Make a tax-deductible donation</u> to Voices for Utah Children—<u>or join our Network</u> with a monthly donation of \$20 or more. Network membership includes complimentary admission to Network events with food, socializing, and opportunity to meet child advocacy experts. And don't forget to <u>join our listserv</u> to stay informed!

We look forward to the future of Voices for Utah Children and we hope you will be a part of our next 30 years.

Special thanks to American Express for sponsoring our 30th Anniversary Year.

