

Alaska Department of Health and Social Services

2020 Title V Needs Assessment Summary June 2020

Adolescent Health

The Title V Maternal and Child Health Services Block Grant Program promotes and improves the health and well-being of Alaska's women, children, young adults and families. Every five years, states are required to conduct a statewide, comprehensive needs assessment which serves as a strategic planning and resource allocation tool. States survey the community and review data in order to select priority areas to focus their work for the 5-year grant cycle. Below is a summary of needs assessment findings and priority areas for Alaska's adolescent population.

Strengths + Successes

- The teen birth rate for Alaskan mothers ages 15-19 continues to decline; down from 26.7 in 2015 to 17.1 per 1,000 in 2018.1
- Among sexually active high school students, 84.3% reported using birth control to prevent pregnancy.²
 - Use of intrauterine devices (IUDs) increased from 4.9% in 2013 to 11.6% in 2019.²
- Sexual dating violence in Alaska has significantly decreased since 2013 (from 11.4% to 7.0% in 2019).²
- Most Alaskan adolescents report that they do not currently:
 - smoke cigarettes (92.5%)²
 - drink alcohol (79.1%)²
 - use marijuana (78.4%) ²



"I think Title V is doing an excellent job with having youth involved with the public health process through YAHA [Youth Alliance for a Healthier Alaska]." – Needs assessment survey respondent

Challenges, Gaps, + Needs

Child Abuse + Violence

- Alaska's child and teen death rates (ages 1-19) are twice the national average, at a rate of 52 per 100,000, compared to 26 per 100,000 nationally.³
- Assault was the 3rd leading cause of death for Alaskans age 15-24.4
- From 2015-2019, Office of Children's Services maltreatment reports increased 42% for victims ages 12-14 and 40% for victims ages 15 years and up.⁵
- Among dating students, 13.1% experienced sexual violence, 7% sexual dating violence, 9.7% physical dating violence during the past year (2019).²
 - Almost 1 out of 2 adolescents (49%) had access to a loaded gun.²
 - About 1 in 6 adolescents (16%) had been bullied outside of school or on the way to or from school during the past year.²

Homelessness

 More than 1 out of 10 adolescents (12%) experienced homelessness during the past year.²

VAPING USE

Current use of **e-cigarettes**

among Alaska high school students increased from **15.7%** in 2017 to **26.1%** in 2019.²



During the needs assessment, one priority area was identified to improve adolescent health:

Behavioral and Mental Health Problems (including suicide):

- Suicide was the leading cause of death for Alaskans ages 15-24.⁶
- Mood disorders were the leading cause of inpatient hospitalization for Alaskans ages 15-24.⁶
- An estimated 5,581 Alaskan youth, ages 9-17, have a serious emotional disturbance.
- Suicide attempts were the leading cause of non-fatal hospitalized injuries for Alaskans ages 15-19 and the second for those ages 10-14. ⁸
- Between 2007 and 2019, significantly more traditional Alaska high school students felt sad or hopeless for two weeks or longer during the past year (27% in 2007; 38% in 2019).²
- Increases were observed in the percentage of students who seriously considered suicide (17% in 2007; 25% in 2019), made a suicide plan (14% in 2007; 22% in 2019), or attempted suicide (11% in 2007; 20% in 2019) during the past year.²

Title V Priorities for 2020-2024

Increase the number of children who are living in safe, stable, nurturing environments.

Reduce substance misuse (including alcohol, tobacco and drugs) among caregivers of infants and toddlers and women of childbearing age.

Increase or promote equitable access to medical and pediatric specialty care and family supports for Children and Youth with Special Healthcare Needs (CYSHCN).

Increase safe and healthy relationships.

Increase connection to behavioral and mental health information, training and resources for parents and caregivers, and providers who serve women, adolescents, and children.

Improve social supports, with a focus on wellbeing and resilience, to prevent and reduce the impact of Adverse Childhood Experiences (ACEs).

Strengthen systems, services and partnerships to help families and health care providers respond to the impact of a collective emergency, disaster or other trauma.

Key Strategies

To address the challenges, gaps and needs that were highlighted during the needs assessment, the State of Alaska's Section of Women's, Children's and Family Health developed strategies to guide actions for the next five years. A few key strategies are listed below. The complete strategy list is included in the 2020-2024 Title V Five-Year State Action Plan, which will be available on the <u>Alaska Title V website</u> once finalized.

- Increase the number of youth friendly clinics.
- Coordinate and provide continuing education and workforce development for providers working with adolescents.
- Promote preventative medical visits (whether through school nurses, the Fourth R, adult preparation skills curriculum, healthy life skills or with community partners) and education on youth health literacy, including education on the importance of a well visit.

The Title V Administrative Agency in Alaska is the Section of Women's, Children's and Family Health, located in the Department of Health and Social Services.

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References

- 1. HAVRS; Alaska IBIS Indicator Report
- 2. Alaska Youth Risk Behavior Survey, 2019
- 3. Kids Count Data Center, 2019
- 4. HAVRS Annual Report, 2014-2018

5. Office of Children's Services (OCS) ORCA Report

- 6. Alaska Health Analytics and Vital Records (HAVRS), 2018
- 7. Alaska Mental Health Trust Authority Scorecard, 2019
- 8. Alaska Trauma Registry, 2013-2017