

STATEWIDE MENTAL HEALTH YOUTH SERVICES

WHAT ARE THE NEEDS OF YOUTH IN CALIFORNIA?

Updated 11/2023

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MENTAL ILLNESS AMONG CALIFORNIA CHILDREN AND YOUTH

- 50% of lifetime cases of mental illness begin by age 14
- 75% of lifetime cases of mental illness begin by age 24
- 19% of children have mental, emotional, developmental, or behavioral conditions*
- 15% of youth had a depressive episode in the past year**
- 3RD leading cause of death for youth 10 to 24 is suicide***
- * Includes children and youth ages 3 to 17 years old who have 1+ mental, emotional, developmental or behavioral conditions and/or qualify on CSHCN Screener emotional, behavioral or developmental criteria: 2020-2021
- ** Includes data on children and youth ages 12 to 17 years old: 2022
- *** Higher rates were found among male youth, and most common mechanism for suicide was use of firearms: 2020

CALIFORNIA YOUTH: SOCIAL DETERMINANTS OF HEALTH

2020-2021 NATIONAL SURVEY OF CHILDREN'S HEALTH

FAMILY DEMOGRAPHICS

- Compared to their peers nationwide, California youth are more likely to be from immigrant families, where English is not the primary language and parental education is below the high school level
- Any parent is foreign-born:
 - o California: 47%
 - Nationwide: 26%
- Single-parent household:
 - o Nationwide: 24%
 - o California: 24%
- Primary household language- not English:
 - o California: 30%
 - o Nationwide: 15%
- Parental Education- Below High School:
 - California: 16%
 - Nationwide: 10%

FAMILY ECONOMICS

- Children in working poor households*: 13%
- Received food or cash assistance in past year**: 45%
- Could not always afford nutritious food: 24%
- Health insurance not adequate to meet needs: 22%

FAMILY DYNAMICS AND SAFETY

- Adverse experiences in childhood can have a crucial influence on the future well-being of youth and whether they develop long-term mental health needs
- Had 1 or more adverse childhood experiences: 34%
- Adverse childhood experiences by type:
 - Some difficulty covering basic necessities: 11%
 - Parent/guardian divorced or separated: 20%
 - Parent/Guardian served jail time: 5%
 - Domestic violence exposure: 4%
 - Neighborhood violence exposure: 4%
 - Lived with mentally ill person: 7%
 - Lived with alcohol/drug addict: 8%

^{*} Household with income less than 100% of the federal poverty level with at least one caregiver employed full- or part-time

^{**} Even for a month-long period



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Racial/ethnic discrimination: 5%

EMOTIONAL AND MENTAL HEALTH

- Mother's overall health not excellent or good: 41%
- Father's overall health not excellent or good: 35%

CALIFORNIA YOUTH: MENTAL HEALTH NEEDS

CHILDREN IN PUBLIC SCHOOLS

- K-12 students: 56%
 - Eligible for free/reduced school lunch
 - English language learners
 - In the foster care system
- Students who are homeless: 172K
- Students who dropped out of school: 39K
- Chronic absenteeism rate: 30%
- Unprepared for UC/CSU system: 49%

CHILDREN WITH SPECIAL HEALTH CARE NEEDS(CHCN) (2020-2021) *

- Children with special health care needs (CSHCN): 1.4M
- Have ongoing emotional, developmental, and/or behavioral needs: 57%

HOMELESS & UNACCOMPANIED YOUTH (2021) *

- Roughly 36% of all Californians experiencing homelessness are youth
- Roughly 35% of homeless youth are unsheltered
- More than 1 in 3 unaccompanied homeless youth in the U.S. are in California

JUVENILE JUSTICE YOUTH (2022)

- Over 75% experienced childhood trauma before and are further traumatized by incarceration
- Up to 75% of youth in the juvenile court system have a diagnosable mental health condition

FOSTER YOUTH (2022)

- Foster youth are 4 times more likely to have a mental health condition than general youth
- Have 4 or more adverse childhood experiences: 48%
- Under age 5 have developmental health issues: 60%
- Experience 3 or more placements*: 37%

SOURCES

California Department of Education
California Homeless Youth Project
Centers for Disease Control and Prevention
California Department of Health
Children Now
Mental Health America
National Alliance on Mental Illness
National Survey of Children's Health
Office of Juvenile Justice and Delinquency Prevention

^{*} CSHCN are at an increased risk for chronic health conditions and require care beyond those required by children generally

^{*} Includes Homeless Management Information System (MHIS) data on homeless youth 24 years and under and U.S. Department of Housing and Urban Development point-in-time data on unaccompanied youth 25 years and under

^{*} Includes youth in foster care for 24 months or longer



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The Annie E. Casey Foundation (Kids Count Data Center)

