

Adolescent Health

Objective 4.2 Adolescent Health and Well-being

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REPORT – October 2021 through September 2022

Youth Health Guide: During FY21 and as part of the Title V 5-Year Needs Assessment, adolescent focus groups were convened and provided data on topics youth and young adults were most interested in learning more about. One topic noted was the need for reputable and quality information, rather than taking their chances searching for information on the Internet. Eight major themes emerged from the focus group data analysis: healthy eating, fitness, mental wellness, substance use prevention, managing stress, technology and social media use, healthy relationships, well visits and transitioning to adult care. The [Youth Health Guide](#) provides vetted information on these topics and was an integral part of the back-to-school WHY campaign efforts.

Awareness of 2-1-1 and 1-800-CHILDREN: Kansas youth indicated during the Needs Assessment process that they are not always aware of all the community resources that are available. As such, Title V continued to promote community service organizations, such as 2-1-1 and 1-800-CHILDREN with youth, young adults, and child/adolescent serving organizations in the state. Title V intended for the Child and Adolescent Health Consultant to collaborate with Kansas Children's Service League, the 1-800-CHILDREN access line, and 2-1-1 representatives to brainstorm ideas on how to build awareness about the statewide resource directory for the adolescent population. Due to the Child and Adolescent Health Consultant vacancy, this collaboration did not occur during this report period. Upon successful recruitment of a qualified candidate for the position, and as part of transitioning the Help Me Grow (HMG) framework implementation support work back to Title V, planned activities will be reviewed and prioritized.

Youth Transition Booklets: Several years ago, the Family Advisory Council (FAC) created a series of transition planning booklets called *The Future is Now, THINK BIG!! Preparing for Transition Planning*. There are three booklets available in English and Spanish that include a booklet for youth/young adults ages 14 to 19 years. The booklet consists of an easy-to-use checklist on: Self-advocacy; Health & Wellness; Healthcare System; Social & Recreation, Independent Living Skills; and School & Work. The KS-SHCN program currently uses these with adolescents and families to begin the transition conversations and help in developing transition goals and objectives for the youth's Action Plan. When the Child and Adolescent Consultant position is filled these will be reviewed and updated to be more inclusive for all youth with input from the FAC and youth. Booklets are shared with schools, MCO's, providers and others upon request and made available to all ATL grantees, community partners and through dissemination at Title V booths and conferences. They are also available to download at <https://www.kdhe.ks.gov/789/Publications>.

Through a KSKidsMAP outreach activity, the KSKidsMAP Social Worker connected an Exceptional Family Member Program (EFMP) Systems Navigator with the Fort Riley military base to Title V. The Navigator was seeking transition resources to use with the 1,200 special needs families they support on an annual basis. The Future is Now, THINK BIG!! printed booklets for ages [0-6](#), [7-13](#), and [14-19](#) in English and Spanish were delivered to the Program.

Justice-Involved Youth: In December 2021, the Kansas Department of Corrections Division of Juvenile Services connected with Title V to explore partnership opportunities to better support and service adolescents and their families involved in the juvenile justice system. To achieve these, the Juvenile Justice Oversight Committee (JJOC) convened a meeting with state agencies and the priority topic based on need was shifted to funding and programs regarding mental health and substance abuse treatment needs of justice involved youth. JJOC requested technical assistance from SAMHSA’s Opioid Response Network (ORN) to explore gaps in services and access, racial equity, and a more in depth understanding of challenges, opportunities and reduce identified barriers to expand access. ORN completed site visits in several locations in Kansas and compiled a summary report. Findings include: SB367 (Kansas Juvenile Justice Reform Act) has reduced the number of youth in locked facilities and has shifted service provision to local communities; Kansas does not have the behavioral health workforce and infrastructure to provide for youth and families in all communities; and the COVID-19 pandemic further strained the behavioral health system and created new challenges.

ORN reflected that there are barriers to accessing evidence-based treatment, particularly among low-income and rural families. While there is a growth in telehealth treatment opportunities, those have complications. While growth in telehealth services is often a good thing, the outcomes, experience, and quality of the treatment experience vary. The ability to engage and benefit from virtual treatment is dependent on the personality of the youth, internet speed, access to quality video equipment, level of privacy in the youth’s home, and the engagement skills and comfort of the provider. Providers who are not familiar with the communities they are serving, may lack the cultural context that is relevant in developing a treatment plan.

The ORN identified barriers and some recommendations for steps that the state can take to improve availability:

1. identify and support educational programs that supervision staff can facilitate for trauma and resiliency
2. support cross-sector convenings for local communities
3. support opportunities to address secondary trauma that probation officers and staff experience

In August of 2022, JJOC shared the detailed results and formed a small work group with individuals representing the Kansas Department for Aging and Disability Services (KDADS), KDHE, and Kansas Department of Children and Families (DCF) to further review the information from ORN and make recommendations on implementation of new programs, services, or funding to address gaps in needs and service. Per the Report, “The goals of this work group are to identify the most critical needs and use a multi-disciplinary approach to get beyond these barriers. Kansas was once ranked 8th in the nation for its services addressing mental health. Over the past years, there has been a great decline in the state’s rankings for mental health services. With the information received from ORN, JJOC will partner with Kansas agencies to explore opportunities for improvement.”

For reference, [Kansas’ Youth Rankings according to the Status of Mental Health in America reports are:](#)

2015	2016	2017	2018	2019	2020	2021	2022	2023
8 th	15 th	18 th	19 th	21 st	37 th	26 th	33 rd	50 th

Awareness of Community Services: Based on information the KS-SHCN team has gathered over the years of offering holistic care coordination to clients, a need for transition training was identified. While a variety of ways to provide training and support is being developed by the Title V team for clients on the program, one activity to increase transition awareness, guidance and provide tools and resources for success for all youth with and without special health care needs identified was based off the successful Systems Navigation Training for Families (SNTF). The SNTF helps parents/guardians who have children with special health care needs learn how to navigate the complicated systems of care while forming peer-to-peer connections. Read more about this in the CYSHCN report section.

In partnership with Title V Directors, an intern from Saint Louis University assisted the Title V team in the summer of 2022 to develop an adolescent transition training based on the current SNTF. While the SNTF is

focused on the special need population, the new training was intended to be for all transition age adolescents and had to begin with youth voices to share what they need and the best way to provide it. Title V Directors understood that youth would relate better and provide greater insight if they were communicating with a peer, so by having the intern host focus groups and gather information about topics, activities and resources they need during their transition journey, they were able to open up and share their goals, dreams, challenges and lack of knowledge around a holistic approach to transition. Focus groups were held both virtually and in-person with 81 youth (with and without special health needs) participated and a wealth of data gathered. From information gathered during focus groups, transition research and the use of the SNTF program model, the intern was able to develop training presentation, resources, activities, tools, and a training manual for trainers for a new Systems Navigation Training for Youth (SNTY). Final review and approval are being completed by the CSHCN Director followed by the establishment of a recruitment and training process targeted for college students. Training college students to be the SNTY trainers will give youth individuals closer to their own age, who have or are still, experiencing transition themselves. Read more information on the SNTY in the CYSHCN report/plan section.

Youth continue to be encouraged to participate in leadership programs such as the Kansas Youth Leadership Forum (YLF) and the Faces of Change program offered by the [Kansas Youth Empowerment Academy](#), and transition workshops conducted by [Families Together, Inc.](#)

PLAN – October 2023 through September 2024

Youth Work Group: The Family and Consumer Partnership Coordinator plans to bring a dynamic group of youth with different experiences from across the state together to provide insight and strengthen MCH programs that are designed for youth. The Systems of Supports team have been working to identify best practices for a youth advisory group based on others already existing in Kansas as well as nationally. The adolescent work group will be tied to the Family Advisory Council (FAC) referenced in the Cross-cutting section.

Key considerations for engaging with youth that will be addressed:

- Identifying appropriate ages for participation.
- Exploring age related restrictions such as in-person meetings (i.e. travel, reimbursement, time constraints, etc.), requesting feedback, stipends.
- Identifying how often meetings would occur and the duration of the meetings. We plan for these to occur in shorter time periods but more frequently than the full FAC.
- Any issues if we bring the full FAC together with this youth group, and what those may look like.

Once we can address all questions and concerns, we will begin to develop guidance and move into recruitment.

System Navigaor Training for Youth: Life skills and community-based education will be a large focus of the System Navigator Training for Youth (SNTY). A trainer of trainer model will be established using college students as trainers. It is important to utilize trainers who are currently experiencing or have just completed the process of transitioning to independence, so that the participating youth will be able to better relate. Trainers will begin the training session sharing their own personally experience in their transition journey to help the youth feel comfortable in opening up and sharing their struggles. The SNTY is designed for all youth and young adults including those with special needs. For these individuals' special emphasis will be given to help address their unique needs as well.

During this reporting year the CYSHCN Director will finalize the training curriculum, tools, activities; develop trainer applications and interview questions; finalize a step-by-step trainer manual; develop a person fidelity assessment for trainers; and develop a training process structure that includes (e.g., a trainer assessment, contracts, payment structure, data collection, pre and post assessments).

The goal is to offer these trainings twice per year for up to 50 youth. Initial trainings will be evaluated using a fidelity assessment, trainer observation, pre and post participant surveys and other quality improvement tools. Based on information gathered changes will be made until the training is refined. Based on requests from partners for the SNTY additional trainings could be added in subsequent years.

Youth Transition Booklets: The “Think Big” Youth Transition Booklets will continue to be used by the Title V team and shared widely with partners and schools. These were designed for youth with SHCN but can be used with any youth. Once a Child and Adolescent Health Consultant is hired, the CSHCN Director will work with that individual to modify these booklets to be more inclusive for all adolescents. The suggested modification will be taken to the Family Advisory Council for input from them before a final version is approved and used.

Youth Health Guide: The [Youth Health Guide](#) provides vetted information on these important health topics, as identified by youth through focus groups that were facilitated as part of the Kansas Title V 5-Year Needs Assessment. This resource was primarily developed prior to the COVID-19 pandemic, and MCH staff believe that it is important to revisit resources and topics to ensure that the content, messaging and overall tone of the guide is still applicable and resonates with the youth audience. Once a Child and Adolescent Health Consultant is hired, they will review all resources and connect with stakeholders to solicit feedback regarding potential changes and updates. They will also work with the Title V CYSHCN Director to incorporate transitions information into the Youth Health Guide. Additional topics might include insurance coverage, how to make doctor appointments, preparing for an appointment, medications/therapies prescribed, what to look for in a “good fit” patient-doctor relationship, and confidentiality/consent laws. After the revisions have been completed, the Child and Adolescent Health Consultant will develop a marketing plan for the year to ensure that materials for the [WHY \(Whole Healthy You\) Campaign](#) and Youth Health Guide are widely accessible to all previous partners as well as strengthening outreach to schools and youth-serving organization.

Awareness of 2-1-1 and 1-800-CHILDREN: It is important that youth are equipped with accurate information on where and how to locate resources and services in their areas. The Title V team will continue to promote the 1-800-CHILDREN phone line and mobile app so adolescents can easily access the services and supports needed. Title V leadership will work with Kansas Children’s Service League over the next year to develop more promotional awareness campaigns targeted for all MCH populations including adolescents.

Local MCH Agencies:

- Barton County Health Department will partner with their Chronic Disease Risk Reduction program to promote education on dangers of tobacco/vape use by adolescents. The digital bulletin boards in the health department lobby and outdoors on health department grounds will contain monthly messages about adolescent use of tobacco and how to contact KS Tobacco Quitline.
 - Clay County Health Department in partnership with USD379 Clay County Schools and the Clay County Coalition will engage 200 adolescents in activities to promote social, physical, mental well-being and decreased youth substance use. Some activities that are planned include “Not in Our House” and the 5th Quarter Program which sponsors a safe environment for teens to gather after school and community events.
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- Leavenworth County Health Department will provide “Move Your Way” education and counsel on the importance of physical activity. 100% of adolescents who are seen for a well visit will receive counseling on physical activity.
 - Nemaha County Community Health Services will provide immunizations to 200 adolescents during fall and spring clinics at area schools. Relationships exist with USD 113, USD115 and USD 380, as well as Prairie Meadows Academy and Saints Peter and Paul private schools. While immunization clinics had been on hold due to the pandemic, the schools have expressed readiness to resume.
 - Ottawa County Health Department will bring the Stop Human Trafficking program to USD 240 schools. They partnered with the Community Association for Safety & Prevention of Abuse (CASPA) to offer the program to USD 239 in the most recent program year and it was well received.
 - Rooks County Health Department will provide health promotion activities and programs to 100 adolescents across their rural, three-county service area. They provided dental checks in the schools, anti-smoking/vaping education, health eating summer programs, seat belt safety, and immunizations to 73 adolescents at area schools in the most recent program year and believe they can reach 27 more with increased promotion across all health department programs that serve adolescents.
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