

Project CRATERS

Creating Responsive Action Through Empowering Resources & Strategies

Liz Barnett & Supervisor: Ebonee Johnson, PhD
CPH: 3999: Undergraduate Research Experience in Public Health

Introduction

Youth today experience a myriad of mental health issues and disorders.

- One in six youth living in the U.S. from 6-17 years of age will face a mental health disorder annually.²
- Suicide is the second leading cause of death for those in the U.S. between 10-14 years of age.²
- ½ of lifetime mental disorders are present in individuals by the age of 14.²
- The average time between the onset of mental health disorder symptoms and treatment is around 11 years.²

Purpose

- Develop and implement a new evidence-based intervention for teen mental health that is influenced by teens and meant for teens.
- Expand access and types of care available to teens by creating an intervention centered on promotion and prevention.
- End goal: creation of an evidence-based curriculum for teens to improve mental health outcomes
 - Dissemination of resources, knowledge, coping skills, and methods of introspective thinking
- Public health connections:
 - Community and behavioral health: goal of improving the health of Iowa teens
 - Primary prevention focus
 - Holistic view of health (specifically mental health)
 - Qualitative data collection and analysis

Materials & Methods

- Youth Participatory Action Research Project Approach.
- Gaining youth input on the current issues faced by teens, facilitating conversations about what can improve these challenges
 - Monthly meetings with teen board
 - Planned questions, discussions & activities to facilitate different approaches to interventions
 - Participation in and evaluation of current curriculum
- Development of curriculum based on teen input and suggestions
- Dissemination of mental health information and materials through social media
- Creation of four module curriculum and different activities tailored to teens

Data Collection

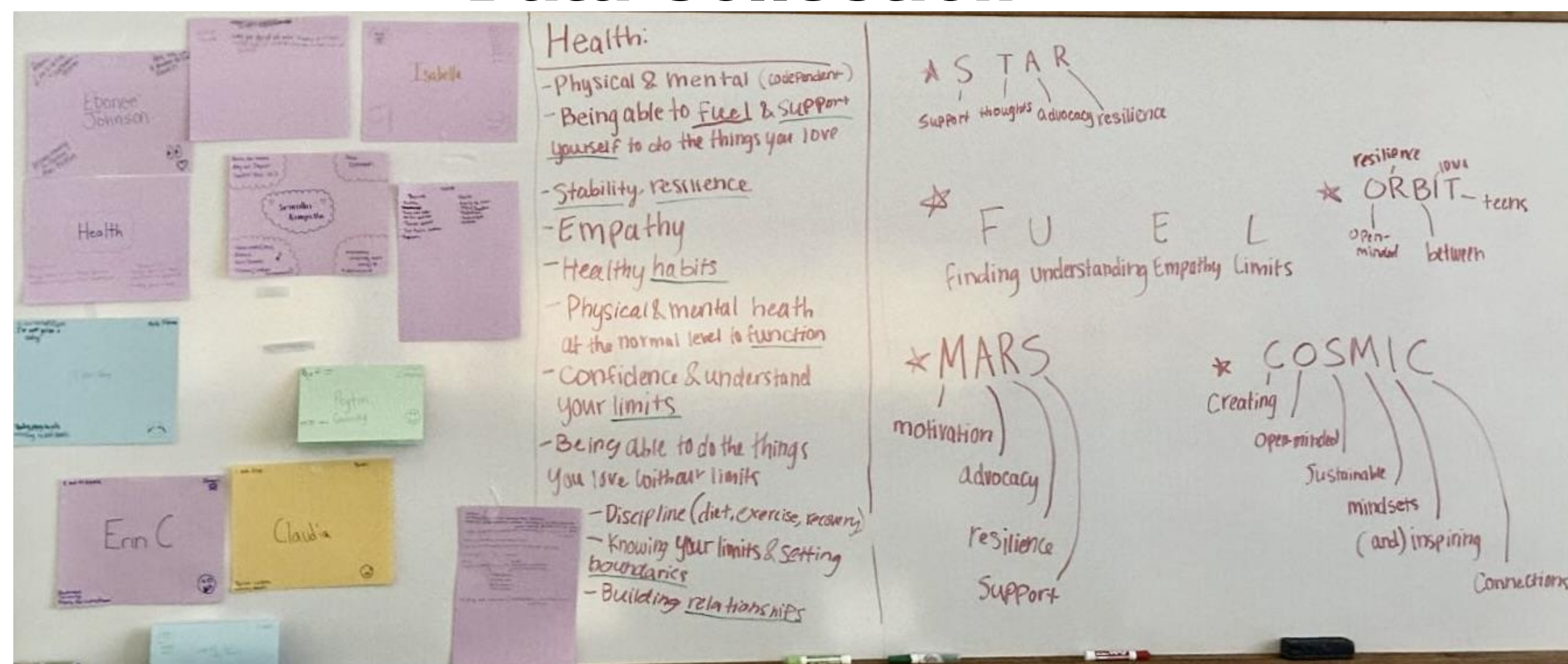


Figure 1: a whiteboard activity from a teen monthly meeting creating definitions of health and acronyms related to mental health.

Results

- The curriculum is disseminated in four modules:
 - Module 1- It's Okay to Not Be Okay.
 - Core ideas/questions: what is mental health, what is stigma, how can we describe emotions, how can we recognize changes in mental health and wellbeing?
 - Module 2- Building Hope, Resilience, and Healthy Habits.
 - What strategies can we use to foster resilience, optimism, self-awareness, and positive coping mechanisms?
 - Module 3- Mental Health in Relationships.
 - What ways can we ensure we foster healthy supportive connections? What do these sort of connections look like? Sound like? Feel like?
 - Module 4- How to Support Others.
 - Ways to support peers, friends, and others through mental health struggles.

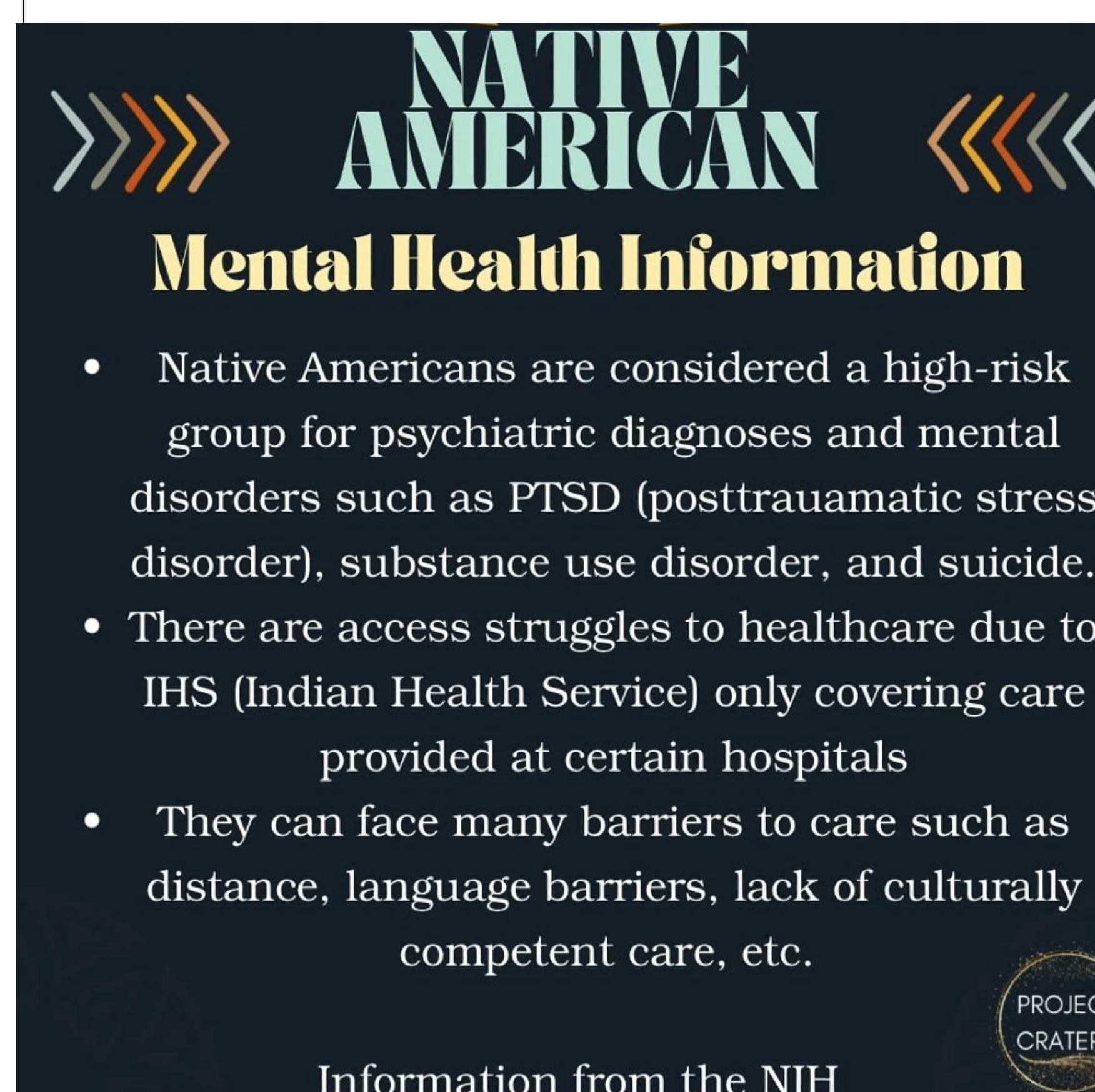


Figure 2: This is a post I created for our Instagram for Native American Heritage Month to disseminate and raise awareness of the disparities in quality and access to mental health care for Native Americans.

01. Youth With At Least One Major Depressive Episode in The Past Year

According to Mental Health America's Youth Rankings Report, 20.88% of youth in Iowa experienced at least one major depressive episode in the past year.

Data from Mental Health America's Youth Rankings (2024)

Figure 3: Above is a post on our Instagram that detailed five different mental health statistics in Iowa; this specific image is about the percent of youth who have experienced a major depressive episode.

Discussion

- Our project has completed all content of modules 1-4 of our curriculum & we are working on finishing touches and feedback
- First test run of module 1 with a Hawkeye Visit Day group was deemed successful- applied any feedback they had
- Expanded our social media platform- larger audience for dissemination

Conclusion & Future Directions

- The purpose of the project has been achieved: we created a four-module curriculum for teen mental health centered on promotion and prevention
- This experience has changed my view of public health
 - Renewed my passion for advocacy and public health
 - Motivated me to pursue health law and advocate for individuals and their rights
- I learned the importance of advocacy, data dissemination, how a YPAR project is run, qualitative research, and how to build a curriculum
- I will continue my role as a research assistant with this project throughout my undergraduate career and continue working to improve access and quality of mental health care for teens

Acknowledgements

I want to thank Dr. Ebonee Johnson for her support as my research supervisor and mentor. She provided me with the special opportunity to be part of this research project, to work on providing a new approach for teen mental health and supported me in every step of my journey on her team. I also want to thank the University of Iowa's GOLDrush platform for allowing us to fundraise on their platform. And lastly, I want to thank the University of Iowa College of Public Health for allowing us to hold our teen meetings in their building and for supporting our project.

References

- 1) "Mental Health of Adolescents." *World Health Organization*, World Health Organization, 10 Oct. 2024, www.who.int/news-room/fact-sheets/detail/adolescent-mental-health.
- 2) "Mental Health by the Numbers." *NAMI*, NAMI, Apr. 2023, www.nami.org/about-mental-illness/mental-health-by-the-numbers/.