

# Child Wellbeing During the Pandemic Webinar

Thursday, November 18, 2021









Viewpoints and thoughts shared are not necessarily representative of the California Department of Public Health, the California Department of Social Services, or the State of California



#### Zoom Housekeeping



#### **Minimize Distractions**

Please **mute** your phone lines. Please unmute yourself to speak in Zoom and on the line.



#### **Engage and Participate!**

Ask **questions** in the chat box when they come up for you. The team will read them aloud during Q&A.



#### **Technology Problems?**

For any technical issues, please send a message directly to Blanca Enriquez through the chat log.



# Essentials for Childhood Initiative Mission & Vision



All California children, youth, and families thrive in safe, stable, nurturing relationships, and communities where they live, work, and play.



Support and participate in mutually reinforcing activities and strategies across multiple agencies and stakeholders that optimize the health and wellbeing of all children in California.



#### Webinar Presenters



Lori Turk-Bicakci, Ph.D. Senior Program Director for KidsData Population Reference Bureau



Tracy Macdonald Mendez Executive Director California School-Based Health Alliance



#### **Essentials for Childhood Initiative**



### Family Experiences the During COVID-19 Pandemic: Three Waves of Data

Lori Turk-Bicakci

November 18, 2021

www.kidsdata.org



#### **Agenda**

- Questionnaire Overview
- California Findings
- Accessing California Data





### Questionnaire Overview



#### **About the Questionnaire**

- Purpose: Inform on effect of pandemic on children and families
- Audience: Child-serving organizations, medical practitioners, advocates...
- Approach:
  - Web-based questionnaire, 48 questions
  - Internet panel samples
  - About 1,500 respondents per wave
  - All data weighted to reflect California caregivers for children under age 18.



#### **About the Questionnaire**

- Approach (continued):
  - Three waves:
    - November 9, 2020 to December 11, 2020
    - March 22, 2021 to April 12, 2021
    - July 8, 2021 to July 27, 2021



#### Background

#### **National**

- American Academy of Pediatrics (AAP)
- Centers for Disease Control and Prevention (CDC)
- Prevent Child Abuse America (PCAA)
- Tufts Medical Center, Healthy Outcomes from Positive Experiences (HOPE)

#### **California**

- Essentials for Childhood (EfC) Initiative
- Lucile Packard Foundation for Children's Health (LPFCH)
- KidsData at PRB



#### California Sample Size and Demographics

Wave	Count
Wave 1: Nov. 2020	1,526
Wave 2: Mar. 2021	1,520
Wave 3: Jul. 2021	1,602

Nov. 2020	Percentage	
Female	54%	
HS diploma or less	42%	
4-year degree or more	30%	
Black	5%	
White	28%	
Hispanic/Latino	49%	
Asian	9%	
Native American	2%	



#### California Sample Demographics (cont.)

	California Sample		
	Nov. 2020	Mar. 2021	Jul. 2021
CSHCN	29%	35%	34%
Married or Domestic Partnership	69%	72%	73%
Under \$30,000	28%	25%	22%
\$100,000 and Above	25%	25%	29%



#### **Questionnaire Content**

- Education, health care, and social activities
- Economic security
- Supportive Services
- Emotional and behavioral health
- Child and caregiver safety
- Adverse childhood experiences
- Positive childhood experiences
- Caring for children with special health care needs



#### **Data Breakdowns**

Seven Regions Within California

At state level,

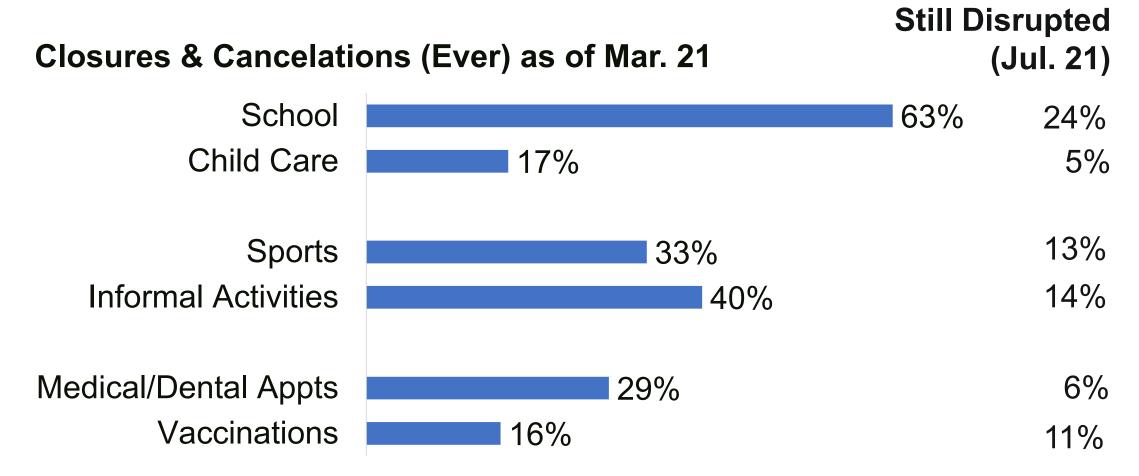
- By caregiver's race/ethnicity
- By household CSHCN status
- By household income level

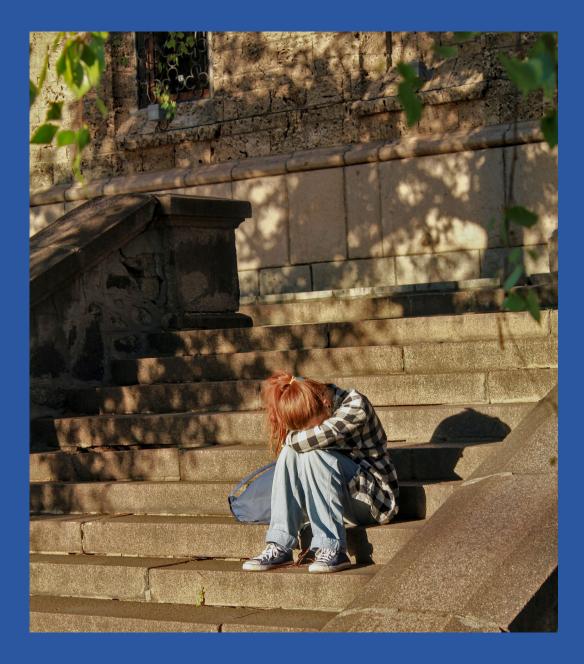




### California Findings

#### **Disruptions**

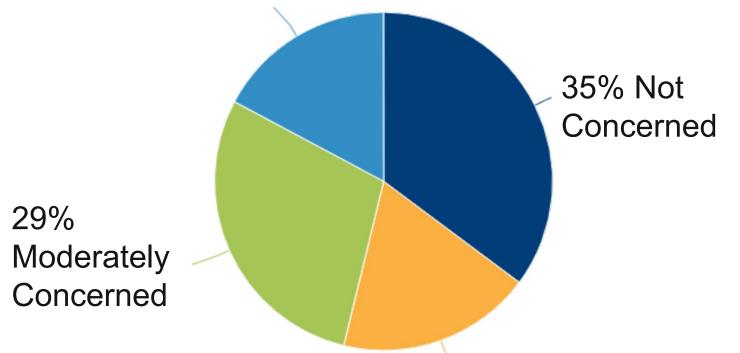




### Education

#### Concern for Child's Educational Progress, July 2021





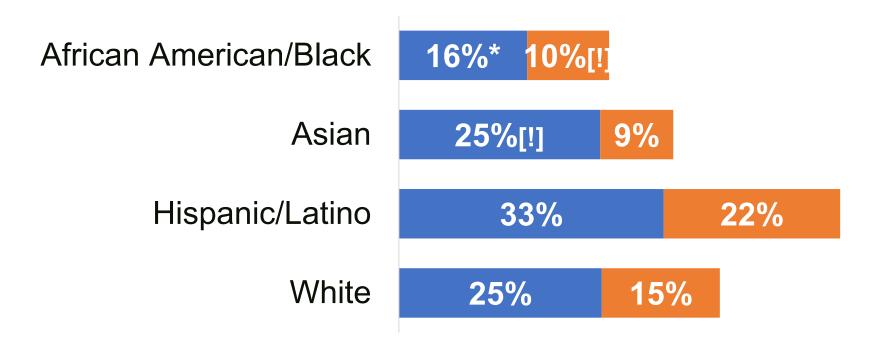
46% of caregivers at least moderately concerned

17% of caregivers extremely concerned

19% Slightly Concerned



### Concern for Child's Educational Progress by Race/Ethnicity, July 2021



55% of
Hispanic/Latino
caregivers at least
moderately
concerned about
child's educational
progress

\* Data from March 2021[!] Margin of error between 5 and 10 percentage points.



Moderately Concerned
Extremely Concerned

### Concern for Child's Educational Progress by Family Income, July 2021

 Less than \$30,000
 22%[!]
 24%[!]

 \$30,000-\$59,999
 26%[!]
 20%[!]

 \$60,000-\$99,999
 35%[!]
 18%[!]

 \$100,000 or Higher
 32%
 12%

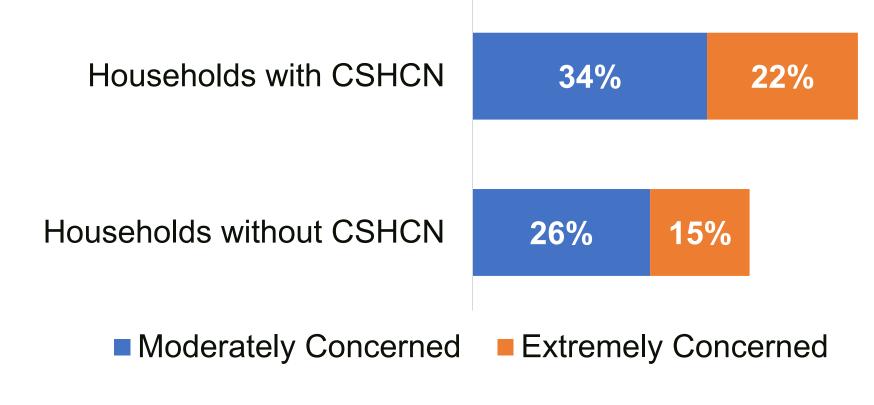
Caregivers across income groups concerned about child's educational progress

[!] Margin of error between 5 and 10 percentage points.

Moderately Concerned
Extremely Concerned



# Concern for Child's Educational Progress by CSHCN Status, July 2021



56% of caregivers of CSHCN concerned about child's educational progress

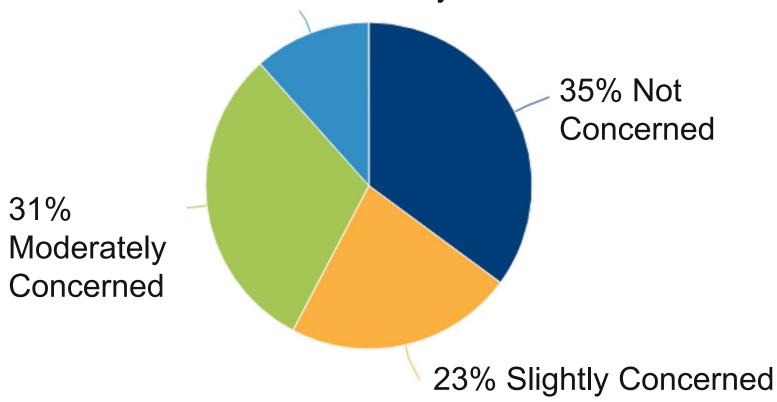




### Mental Health

#### Concern for Child's Mental Health, July 2021



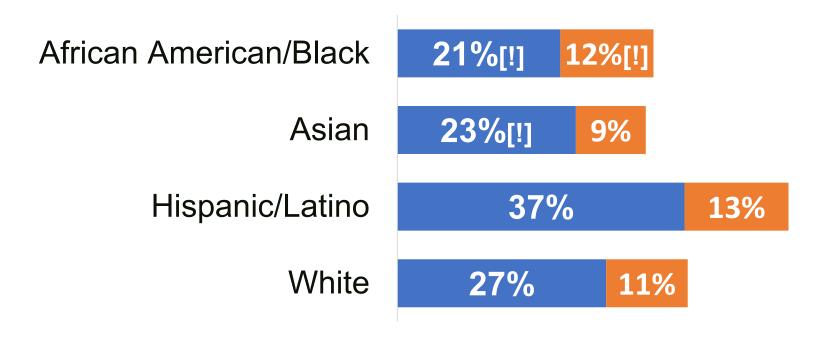


43% of caregivers at least moderately concerned

12% of caregivers extremely concerned



# Concern for Child's Mental Health by Race/Ethnicity, July 2021



50% of
Hispanic/Latino
caregivers at least
moderately
concerned about
child's mental health

[!] Margin of error between 5 and 10 percentage points.

Moderately Concerned
Extremely Concerned



# Concern for Child's Mental Health by Family Income, July 2021



Caregivers across income groups concerned about child's mental health

[!] Margin of error between 5 and 10 percentage points.

Moderately Concerned

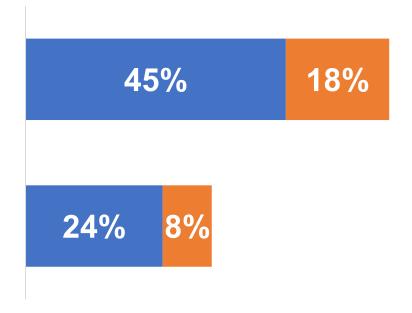
Extremely Concerned



# Concern for Child's Mental Health by CSHCN, July 2021

Households with CSHCN

Households without CSHCN

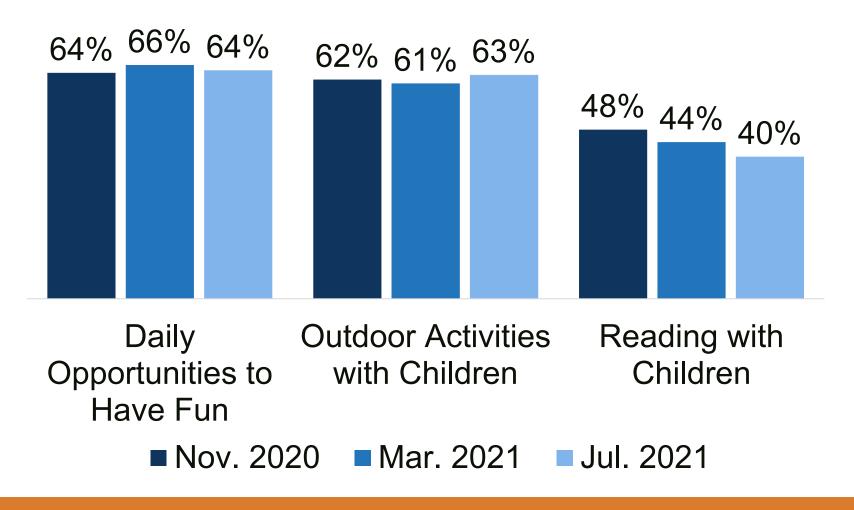


Twice as many caregivers of CSHCN at least moderately concerned about child's mental health

- Moderately Concerned
- Extremely Concerned

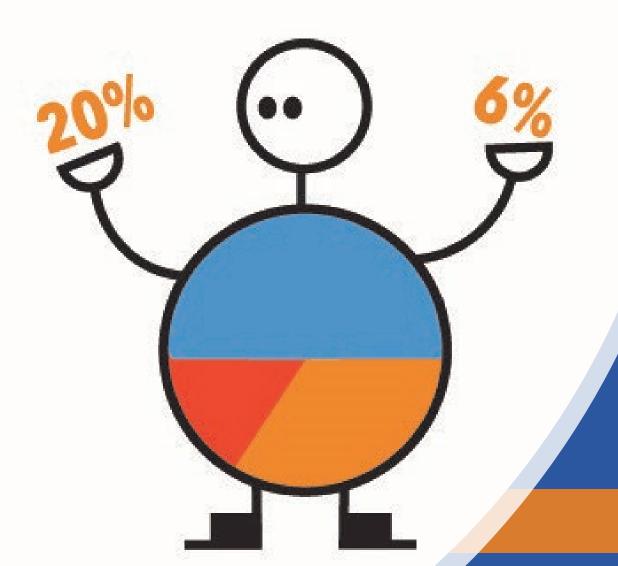


### Positive Childhood Experiences in Previous Week Among Children Ages 0-17



Children had positive experiences throughout the pandemic





# Access Data www.kidsdata.org





#### Polling questions

In the chat box, please share how you have used these data, if you answer "yes" to #2





#### Thank you

Lori Turk-Bicakci lturk@prb.org

www.kidsdata.org

# ADDRESSING CHILD WELL-BEING THROUGH SCHOOL-BASED HEALTH CENTERS:

Focus on the COVID-19 Pandemic



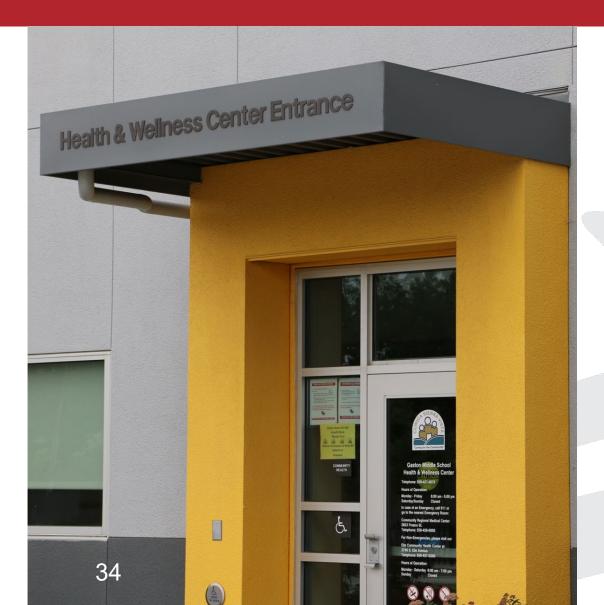


### **Putting Health Care in Schools**

The California School-Based Health Alliance is the statewide non-profit organization dedicated to improving the health & academic success of children & youth by advancing health services in schools.

Learn more: schoolhealthcenters.org



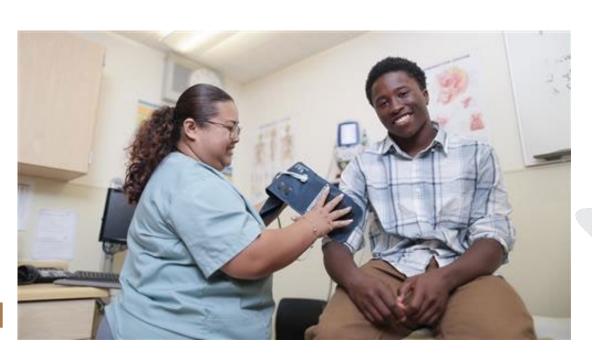


### Agenda

- 1. About School-Based Health Centers (SBHCs)
- 2. Impact of the pandemic on children and youth
- 3. How SBHCs help address child well-being
- 4. Opportunities to improve and expand school health services

#### WHAT IS A SCHOOL-BASED HEALTH CENTER?

- Delivers primary medical care PLUS
- Located on or near a school campus
- Serves students and sometimes siblings, family members, and the community
- Promotes schoolwide health



# PEDIATRICS

#### OFFICIAL JOURNAL OF THE AMERICAN ACADEMY OF PEDIATRICS

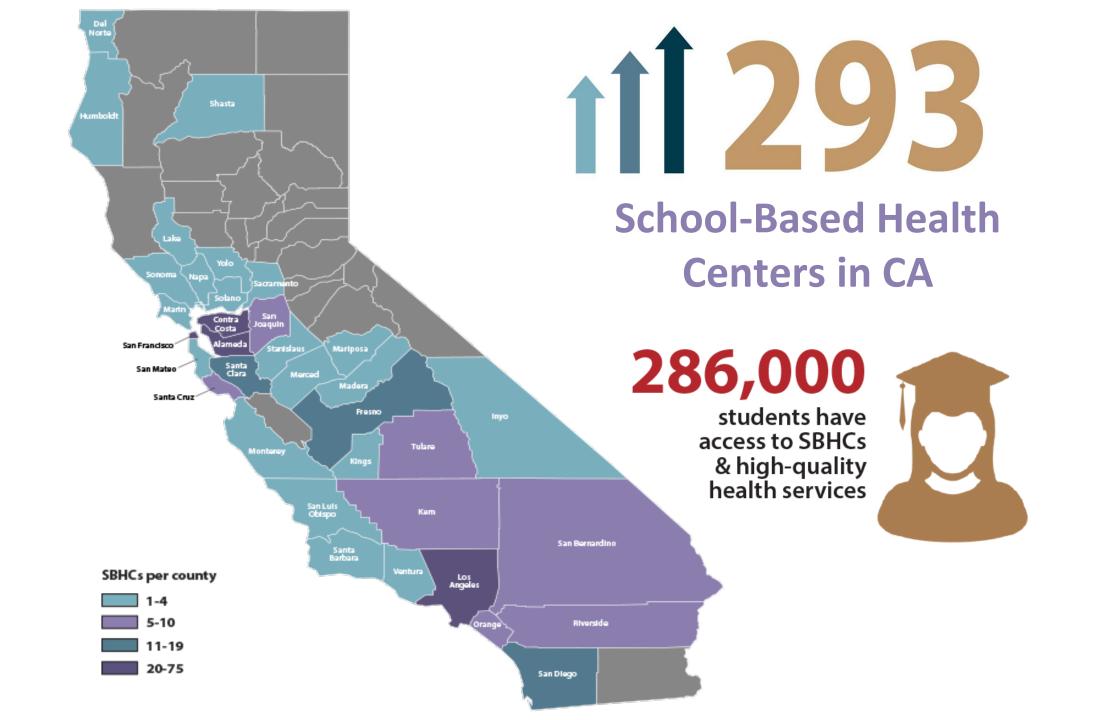
From the American Academy of Pediatrics Policy Statement

### School-Based Health Centers and Pediatric Practice

Chris Kjolhede and April C. Lee; COUNCIL ON SCHOOL HEALTH
Pediatrics October 2021, 148 (4) e2021053758; DOI: https://doi.org/10.1542/peds.2021-053758

"SBHCs serve a critical role in increasing access to quality comprehensive and coordinated primary care for children and adolescents, especially underserved, at-risk, and stressed children and adolescents."

- American Academy of Pediatrics



### **SBHC IMPACT**

- increased seat time, decreased absenteeism
- use primary care more consistently
- 10-21x more likely to use MH services at SBHC
- reduced ED utilization for asthma
- increased school connectedness
- reduced risky behaviors especially LGBTQ+ youth

### Task Force Recommends School-Based Health Centers to Promote Health Equity



The Community Preventive Services Task Force recommends the implementation and maintenance of school-based health centers (SBHCs) in low-income communities, based on sufficient evidence of effectiveness in improving educational and health outcomes. This recommendation is based on a systematic review of all available studies that was conducted—with oversight from the Task Force—by scientists and subject matter experts from the Centers for Disease Control and Prevention (CDC) in collaboration with a wide range of government, academic, policy, and practice-based

## **TESTIMONIAL**



### THE PANDEMIC BEFORE THE PANDEMIC

- Earlier onset, increased prevalence, and greater intensity and complexity of student mental health needs
- Youth suicide rates ↑ 20% per year for past decade, especially among 10–14 year-olds
- 13–22% of school-aged youth experienced a mental health challenge at a level associated with formal diagnoses
- 80% of those children and youth had unmet treatment needs
- 70% of those who DID receive treatment did so in school
- Many more faced challenges that put them at risk for future mental health difficulties

Mental health is the #1 reason children are hospitalized and suicide is the 2nd leading cause of death

# MORE RISKS for kids and caregivers

COVID illness & death in family and community

Job loss, eviction, food insecurity

Parental stress

Trouble with remote learning & learning loss

Social isolation/ loneliness

Increased screen time

Disruption in routines

# BUT FEWER PROTECTIVE FACTORS

Fewer visits with health care professionals

Fewer normal childhood activities ↓ normal childhood activities

Less exercise, Insomnia, Less self-care

Less time with peers

Less contact
with
supportive
adults outside
home (teachers, coaches
churches, etc.

stress &

anxiety

School

failure

fear, grief,

loss

Substance

**→ WORSENING** 

**OUTCOMES** 

Conflict & violence

Depression

& suicide

Obesity & eating disorders

Self-harm

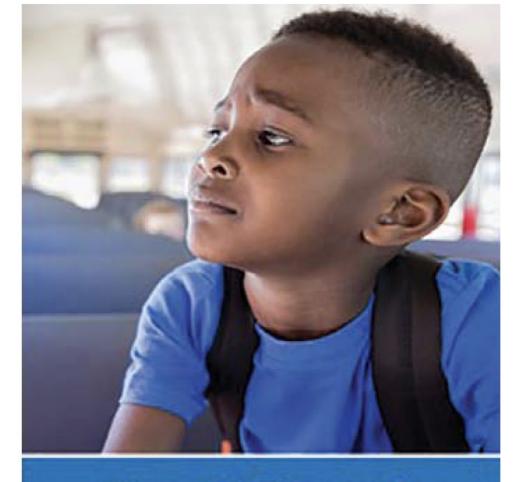
**The Perfect Storm** 

### **ANTONIO'S STORY**

## SBHCs support healing and resilience



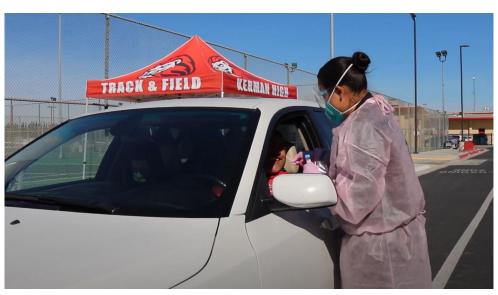




Our kids and teens face a MENTAL HEALTH CRISIS.

### SBHCs DURING SCHOOL CLOSURES

- Pivot to telehealth
- Practical supports:
  - food distribution
  - Wi-Fi/tech support
- Active student outreach
- COVID testing & tracing
- Support culture & climate:
  - Wellness Wednesdays
- Youth-to-youth vaccine education and promotion



### **SBHCs WITH IN-PERSON LEARNING**

- Most re-opened
- Workforce shortages
- Vaccines for students, others
- Addressing deferred care
   & MH crisis
- Ongoing telehealth options
- ACEs & other screening
- Trauma & adjustment groups
- Planning for 5-11 year-old vaccines!





I will be asked for my immigration status before I get the vaccine.



### FACT

Immigration status or a social security card are not required for a vaccine.



Claclinicasbhc

 $SOURCE: Community\ Health\ Center\ Network's\ COVID-19\ Vaccine\ Myth\ vs.\ Fact\ Card$ 

# Recipe for Self-Love PARTII

Follow accounts that portray different types of bodies

"Practice not calling food 'good' or 'bad.' All food can be nourshing!

••••• Write a love letter to your body

Talk to your friends about how they feel ... about their bodies ........... Wear clothes that make you feel comfortable



These tips comes from

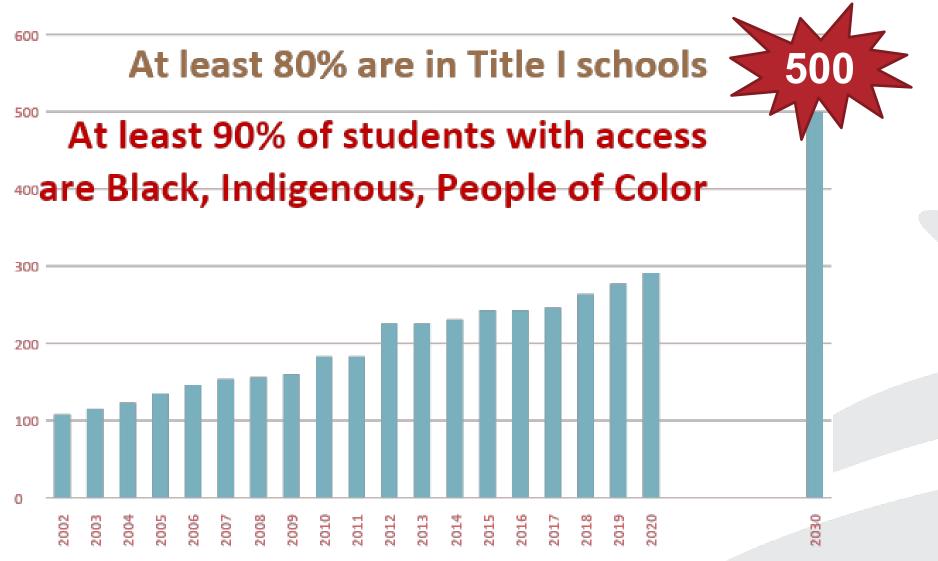
The Self-Love Revolution: Radical Body Positivity for Girls of Color by Virgie Tovar

### **OPPORTUNITIES & OPTIMISM**

- State investments:
  - CYBHI
  - MCO incentive program
  - Community Schools
- CDE new Office of School-Based Health
- CDPH position
- State/local/federal funding for SBHCs:
  - More comprehensive programming
  - More school integration
- Definitional clarity/ common data and performance measures

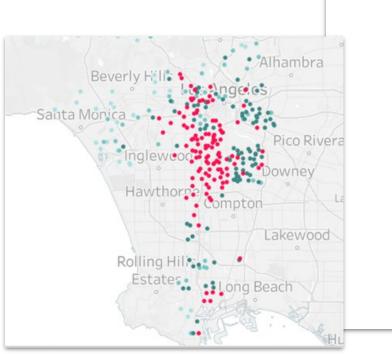


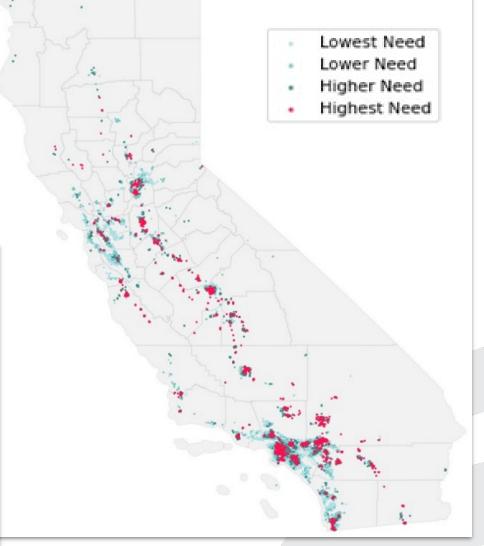
# 500 New SBHCs by 2030



# MORE & BETTER SCHOOL-BASED HEALTH CENTERS!!

The **Student Health Index** shows where to invest in SBHCs for the greatest impact on student health and learning.





### WAYS TO COLLABORATE

- Get to know your local SBHCs
- Consider partnership opportunities
- Join CSHA/attend conferences and webinars



### **SAVE THE DATE!**

## 2022 California School Health Conference

Thursday, April 28: Welcome Reception

Friday, April 29: Full Day Conference

University of Redlands

San Bernardino





PRESENTED BY





## STAY CONNECTED



schoolhealthcenters.org



info@schoolhealthcenters.

org



sbh4ca



sbh4ca





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# Questions?





Provides support and resource referrals to parent and youth during the current COVID-19 pandemic, 7-days a week from 8:00 a.m. to 8:00 p.m.

Call or text 1-855-4APARENT (855-427-2736) for services in English, Spanish and other languages. For more information, please visit:

https://caparentyouthhelpline.org/

### Resources

- KidsData: kidsdata.org
- California School-Based Health Alliance: https://www.schoolhealthcenters.org/
- HOPE: positiveexperience.org



## **Share Your Thoughts!**



https://tinyurl.com/ChildWellbeingDuringCOVID



# Thank You!

