



HEALTH OF CHILDREN & YOUTH IN KING COUNTY

September, 2016



Assessment, Policy Development & Evaluation Unit



Profile overview

- This report summarizes a set of 14 health indicators for the children and youth (ages 0-24) in King County using current data to report subgroup percentages and trends.
- King County has a diverse population of over 600,000 children and youth. Health indicators vary significantly within this population, and highlighting differences can inform decisions about making equitable improvements.
- Key findings
 - People of color, students in the Seattle and South regions, and lower SES populations frequently experience more adverse health outcomes than other groups.
 - Many health indicators show no change over time and disparities between subgroups are constant.
 - There is currently not enough data to reliably identify disparities among children and youth.

Health Indicators

Physical & Preventive Health

- Healthy weight
- Physical activity
- Eating fruits & vegetables
- Eating breakfast
- Preventive health visits
- Asthma

Behavioral & Mental Health

- Illicit substance use
- Impaired driving
- Depressive feelings
- Suicide
- Future goals

Community & Safety

- Family connection & parental involvement
- Adult support
- Feeling safe at school

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Background

This report examines the health of children and youth in King County through 14 different health indicators. These indicators are a set of population-level measures that help characterize physical, preventive, mental, behavioral, and community health. Together, they provide a snapshot of King County's children and youth, including their many diverse groups.

Children and youth are defined as anyone between the ages of 0 to 24 years. This period is a time of significant development and change, both physically and mentally, and health is an important part of being able to grow and learn in a positive way¹. Studying these indicators provides a snapshot of health that can be used to help make informed decisions about how to provide the safest, healthiest, most supportive environments for children and youth.

When looking at the data in this report, it is important to keep equity in mind. This perspective means we must look at the differences between different subgroups of this population to see where we can best focus our attention and interventional resources to ensure a healthy life at any age for all King County residents.

Data in this profile come from the Washington State Healthy Youth Survey (HYS) and the Behavioral Risk Factor Surveillance System (BRFSS). Further details about these surveys can be found at the end of the report.

Goals of this report

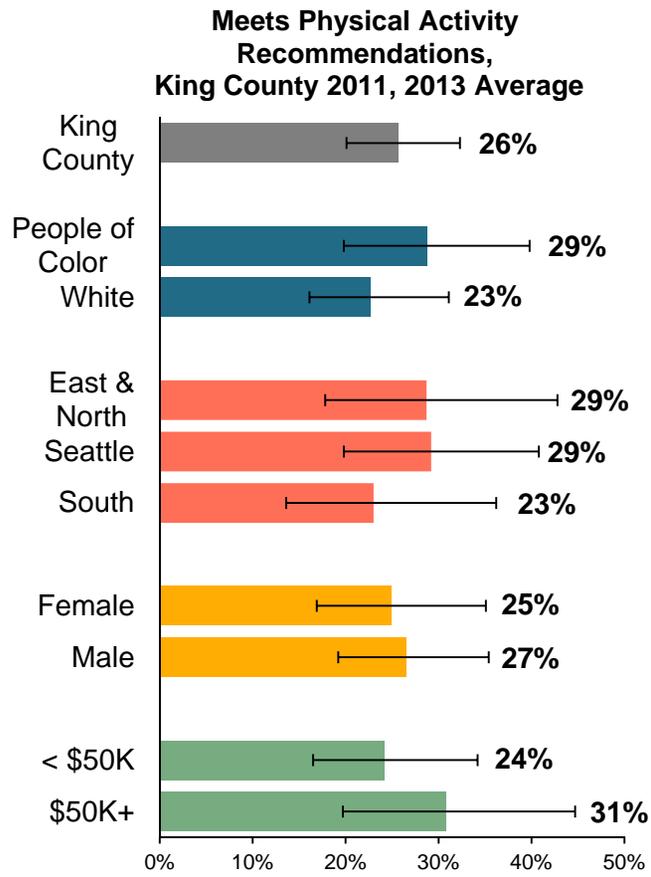
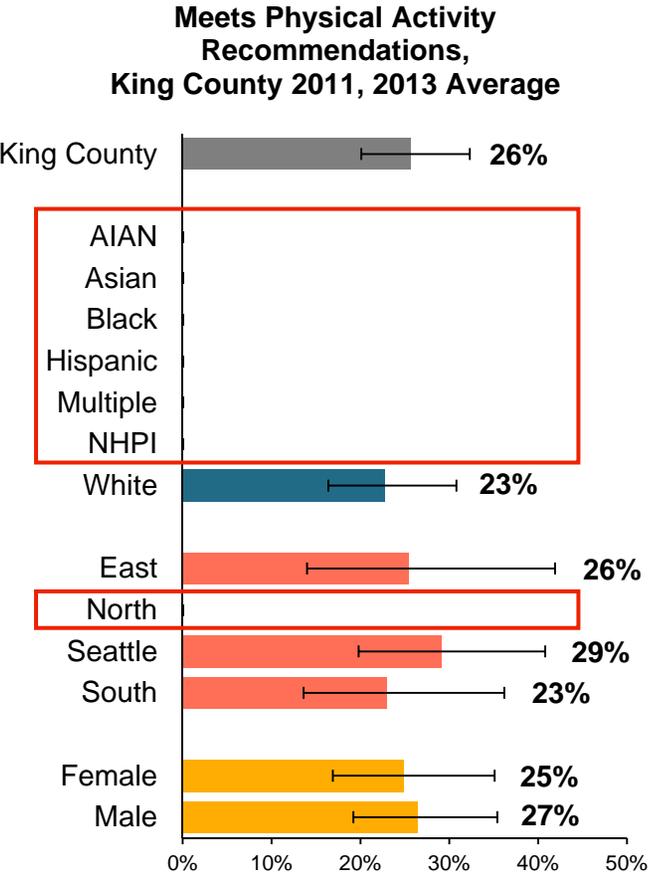
- Describe the health of children and youth in King County through a set of health indicators.
- Determine how health has (or has not) changed over time for both the overall population and subgroups.
- Highlight where there are differences in health among subgroups of the larger population in order to make more informed policy and program decisions.

How to read this report

- There is a demographics section, followed by three health indicator sections. For each indicator, there is a brief introduction to the indicator, which includes why it is important and how it is defined in this report. This introduction is followed by figures displaying percentages by subpopulation and trend graphs, both with textual descriptions of the data. The data are then followed by a brief interpretation of the findings' significance.
- There are several important abbreviations used throughout the report:
 - AIAN = American Indian and Alaska Native
 - NHPI = Native Hawaiian and Pacific Islander
 - NH = non-Hispanic
 - SES = socioeconomic status
- For the HYS data, mother's highest education level is used as a proxy for SES. For the BRFSS data, household income is used for SES.
- The lines on each bar graph, called error bars, represent the 95% confidence interval for estimates. A 95% confidence interval is the range of values that includes the true estimated percent 95% of the time. When confidence intervals do not overlap, the percentages are considered statistically significantly different—meaning that any difference is not likely due to chance alone, but rather another factor.
- The sample sizes of the BRFSS data are very small, making the estimates less statistically stable—interpret the differences between groups with caution.
- Data sources are cited in the bottom right-hand corner of each page. Additional resources cited in the text are listed at the end of this report.

A note on small sample sizes in BRFSS data

When subgroups contain fewer than 50 survey respondents, information about that subgroup cannot be presented to protect the respondents' confidentiality. In this report, data were grouped into broader-categories (as shown below) when sample sizes were too small in order to present the information. However, important subgroup differences may be hidden by grouping and any interpretation of the results should take this limitation into consideration. Additionally, the small sample sizes mean the estimates are less precise and results should be interpreted with caution.

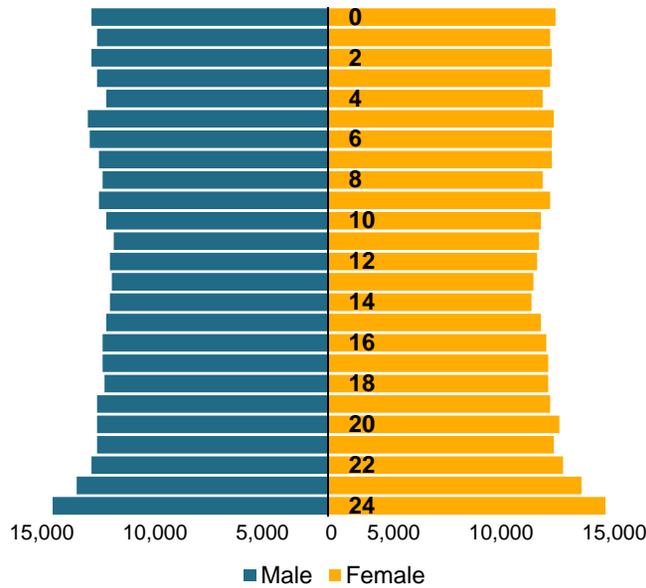


e.g. Without grouping, no information on young adults of color could be presented in this report.

DEMOGRAPHICS

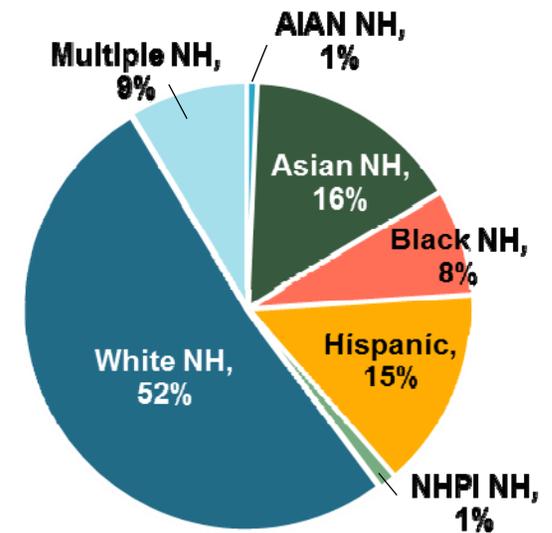
There are approximately 604,000 children and youth in King County

Children & Youth (0-24 Years) by Age, King County 2015 Estimates

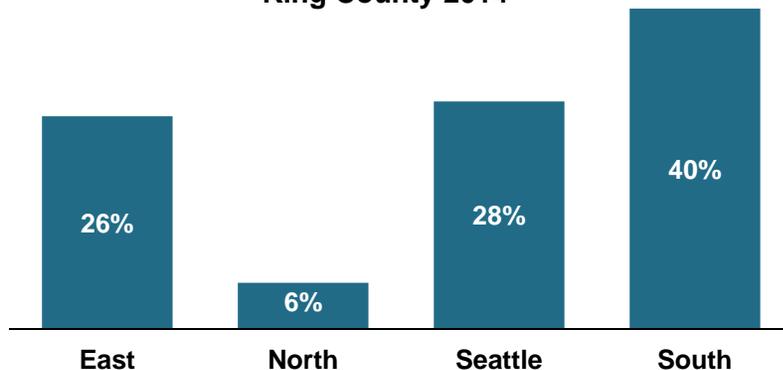


Children and youth ages 0 to 24 make up 30% of the total King County population.

Children and youth of color make up almost half of this population.



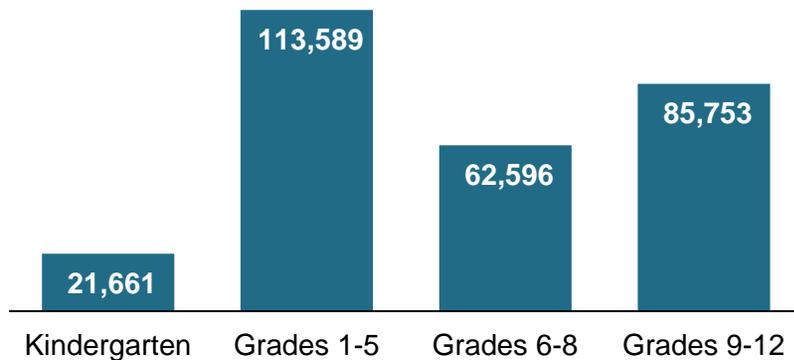
Percent of Children & Youth by Region, King County 2014



Most children live in the Seattle and South regions of King County.

Over one-third of these children & youth are enrolled in public schools

Students Enrolled in Public School During the 2015-2016 Academic Year



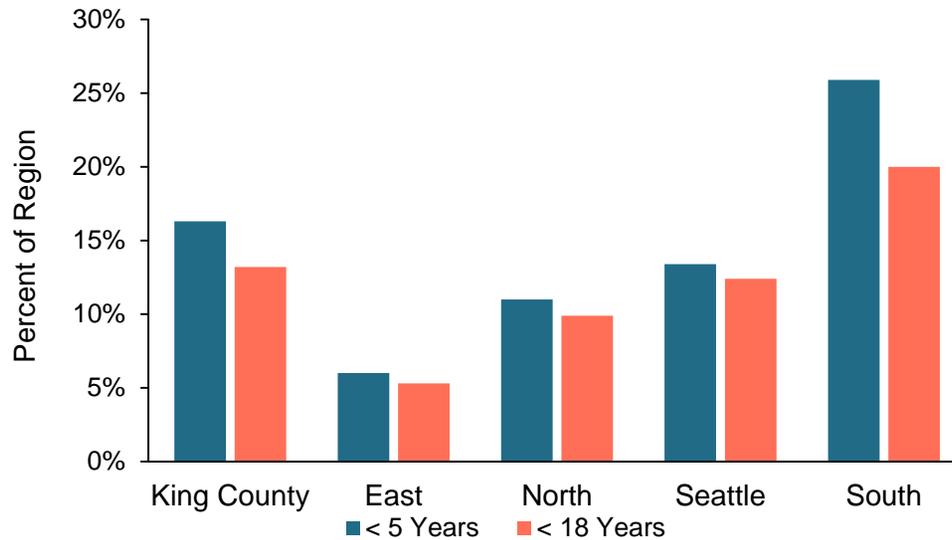
Elementary school students are the largest grade group enrolled in King County public schools.

12% of students are transitional bilingual—their first language is not English and they require language support at school. These children speak **over 30** different languages.



Thousands of children are affected by poverty

Children Living below 100% FPL,
King County 2010-2014 Average



The percent of children living in poverty varies significantly across King County and is particularly high in the South region.

Source: Poverty: US Census Bureau, American Community Survey 2010-2014

During the 2014-2015 school year **35%** of all King County students received free or reduced price lunch. However, this percent **ranged from 4% to 78%** across districts.

Source: Office of the Superintendent for Public Instruction

PHYSICAL & PREVENTIVE HEALTH

Healthy weight

What is considered a healthy weight?

Children & youth

(Under 20 years old)

A weight under the 85th percentile* for a specific age and gender.

Young adults

(20 - 24 years old)

A body mass index (BMI) between 18.5 and 25.



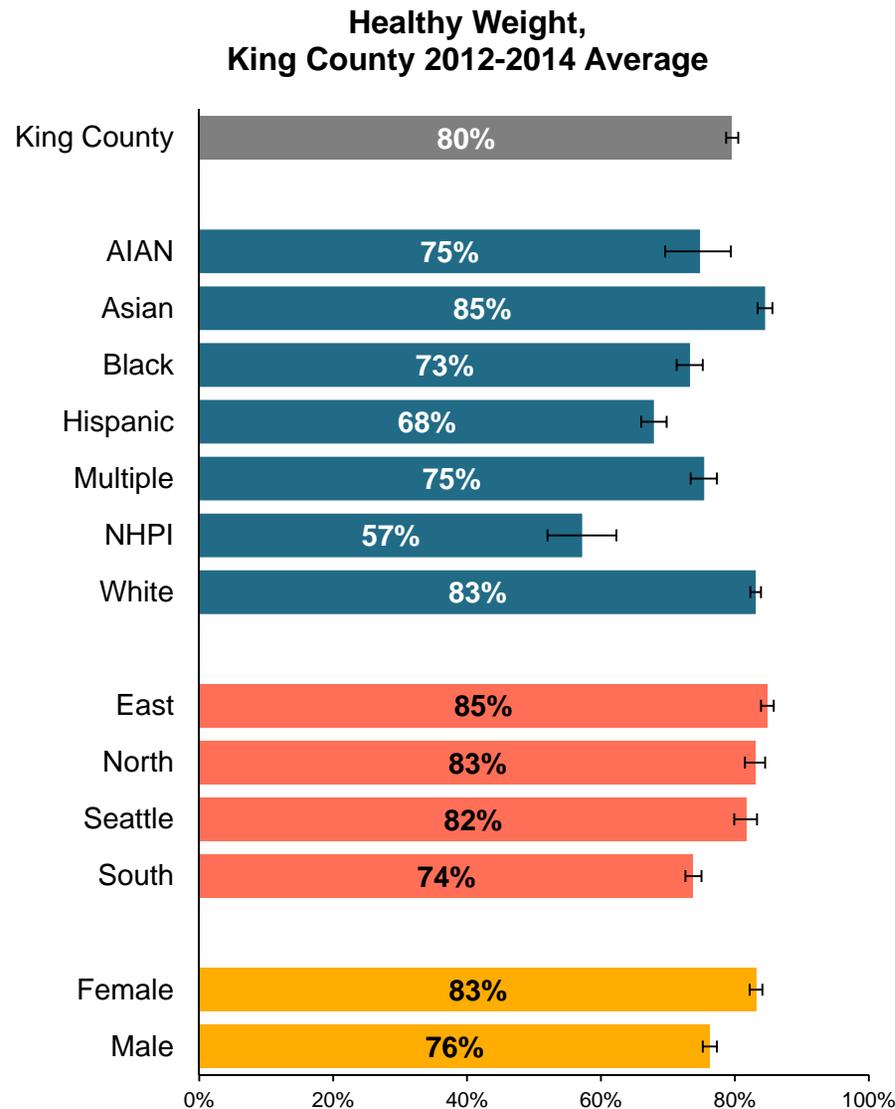
Why is a healthy weight important?

Being at a healthy weight lowers the risk of health problems like diabetes, asthma, heart disease, and mental illness. Eating a healthy diet and getting plenty of exercise can help you achieve and maintain a healthy weight.

*Weights considered overweight or obese are above the 85th percentile, which is the same as saying the top 15% of all weights for a specific age and gender.

Public Health
Seattle & King County 

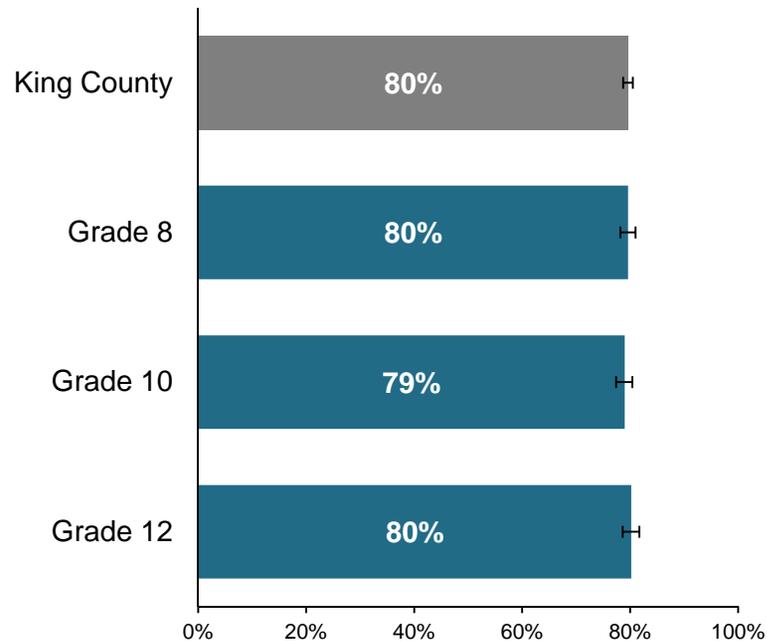
Most King County students are at a healthy weight



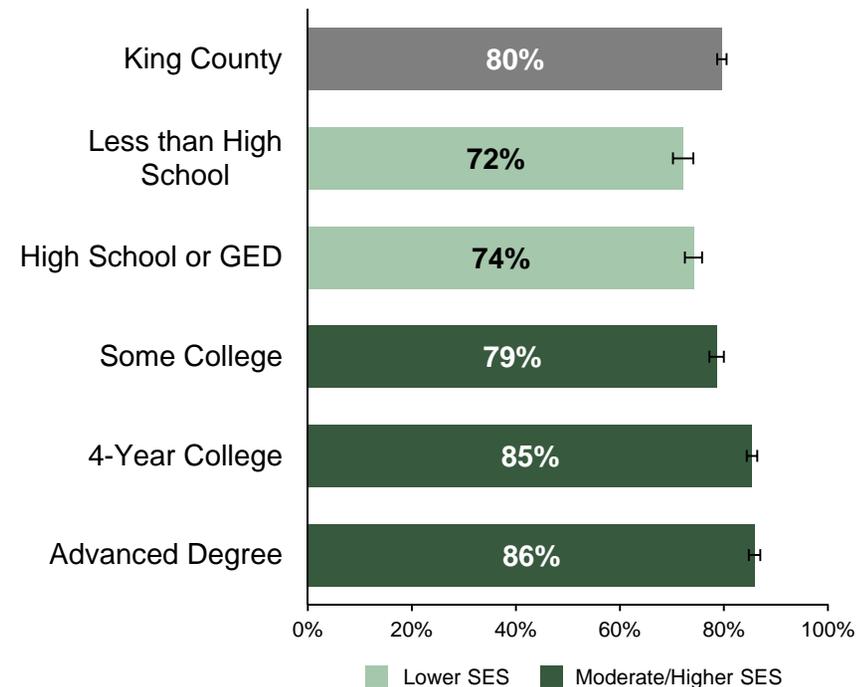
- Compared to Asian students, who had the highest percent at a healthy weight...
 - NHPI students were **33% less likely** to be at a healthy weight.
 - Hispanic students were **20% less likely** to be at a healthy weight.
- The South region had a significantly lower percent of students at a healthy weight than any other region.
- Girls were more likely to be at a healthy weight than boys.

Students' SES affects weight, but age does not

Healthy Weight by Grade,
King County 2012-2014 Average



Healthy Weight by SES,
King County 2012-2014 Average

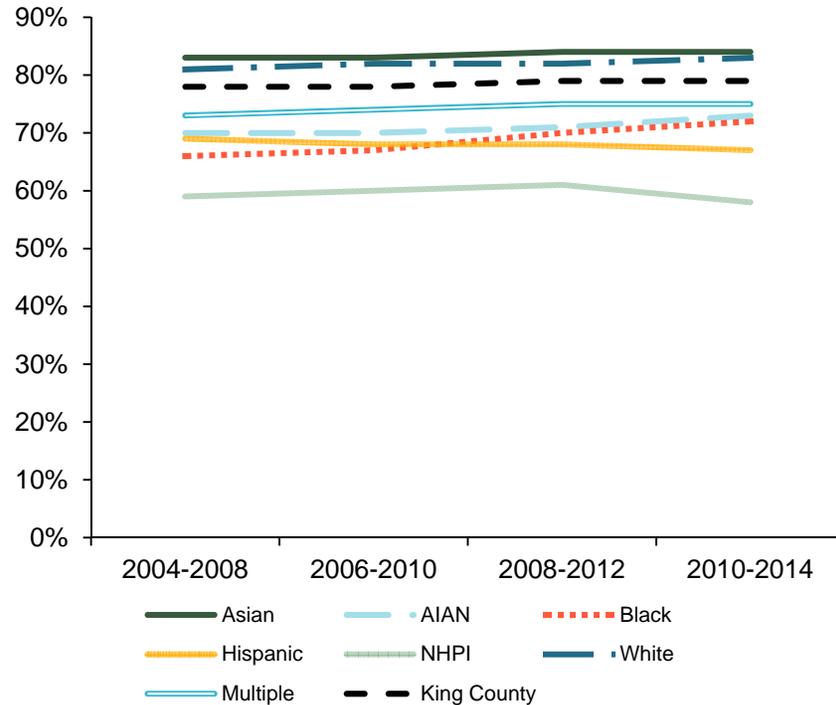


- The percent of students at a healthy weight did not differ by grade.

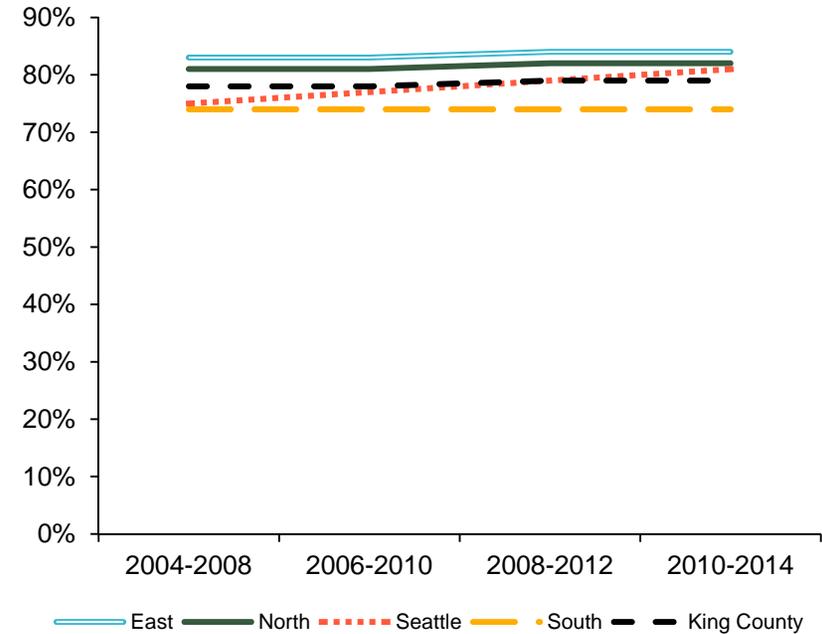
- Students of a moderate or higher SES were up to **1.2 times more likely** to be at a healthy weight than students of a lower SES.

Trends in weight have not changed over time

Healthy Weight by Race/Ethnicity, 3-Year Rolling Averages, King County 2004-2014



Healthy Weight by Region, 3-Year Rolling Averages, King County 2004-2014



- The overall King County percent at a healthy weight was constant between 2004 and 2014.
- Encouragingly, the percent increased slightly for black students and students in the Seattle region.
- NHPI students consistently had the lowest percent, while Asian and white students had the highest percentages.
- The South region consistently had the lowest percent of all four regions.

What can we learn?

- Students' weights have not changed and disparities between groups have not shifted, suggesting that interventions are necessary.
- Interventions should both be targeted at particular subgroups and be culturally appropriate in order to create effective, equitable change.

Physical activity

Physical activity is an important part of a healthy lifestyle because it reduces the risk of obesity and chronic diseases like diabetes. It is recommended that everyone exercises regularly, but the following are age-specific recommendations:

Children & youth (6 to 17 years)

At least 60 minutes per day with 3 days each of aerobic, muscle strengthening & bone strengthening exercises

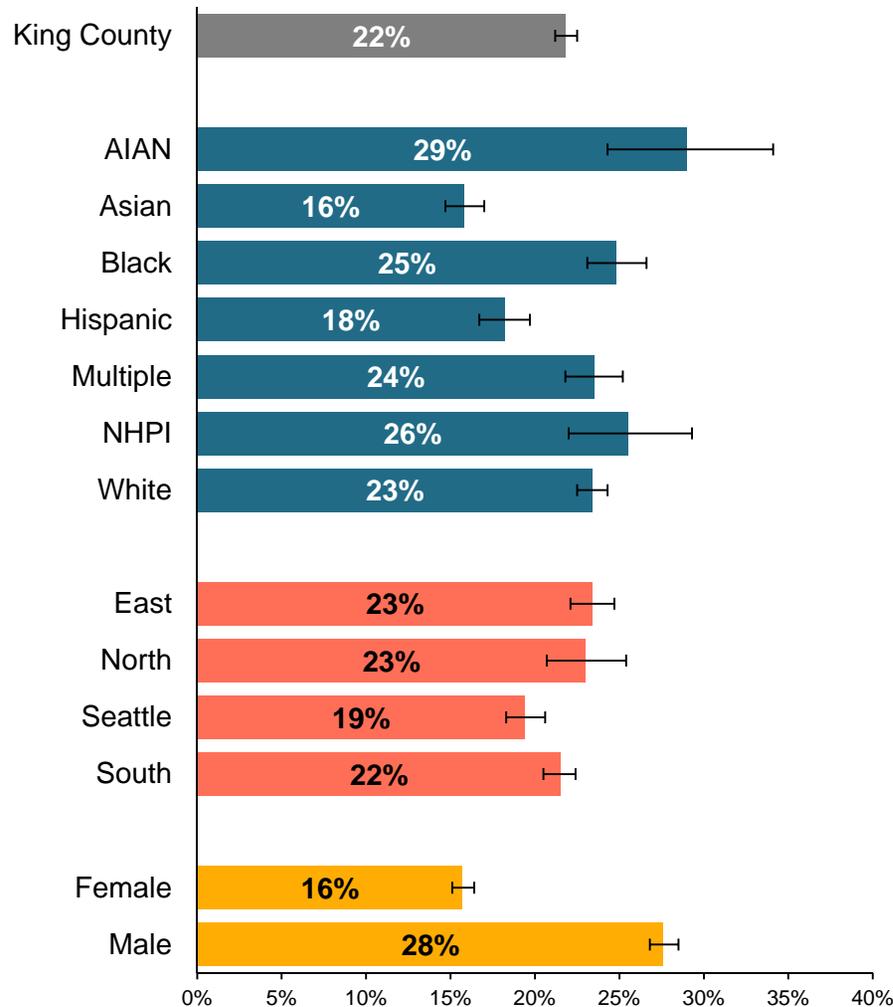


Young adults (18 to 24 years)

At least 150 minutes of moderate-intensity or 75 minutes of vigorous aerobic exercises per week plus muscle strengthening exercises on at least two days

King County students do not get enough exercise

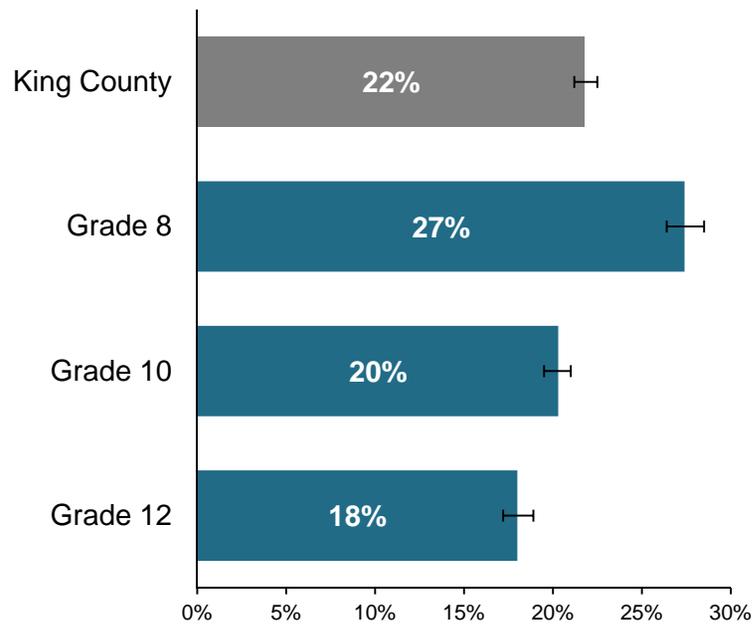
Meets Physical Activity Recommendations,
King County 2012-2014 Average



- Compared to AIAN students, who were most likely to meet physical activity recommendations...
 - Asian students were **46% less likely** to meet recommendations.
 - Hispanic students were **37% less likely** to meet recommendations.
- Girls were **43% less likely** to meet recommendations than boys.
- The overall county percent still falls below the Healthy People 2020 target of 24.1%².

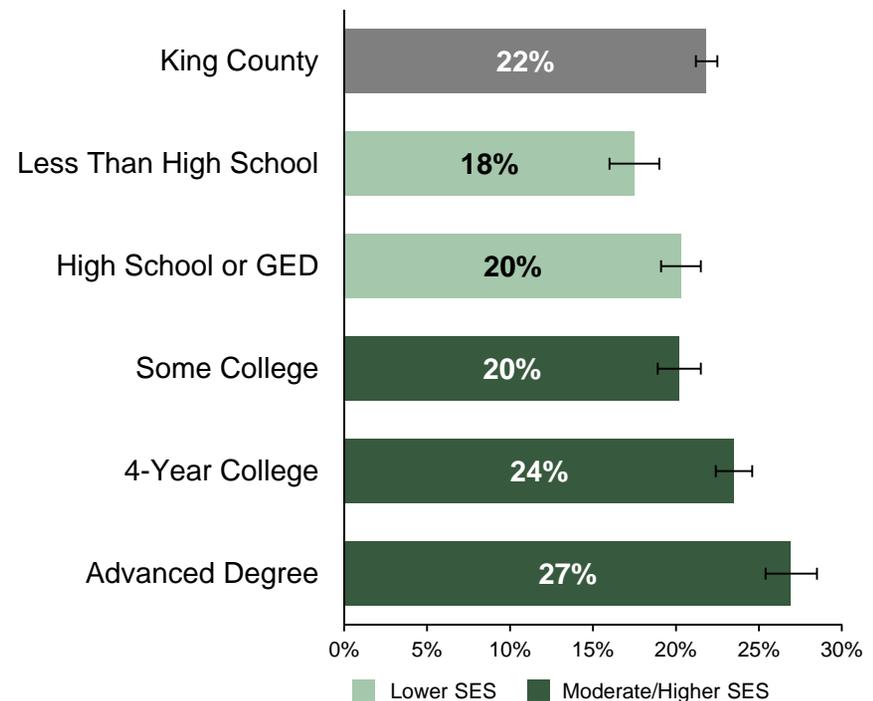
Both age & SES affect physical activity

Meets Physical Activity Recommendations by Grade, King County 2012-2014 Average



- 8th graders were **1.5 times more likely** to meet recommendations than 12th graders.

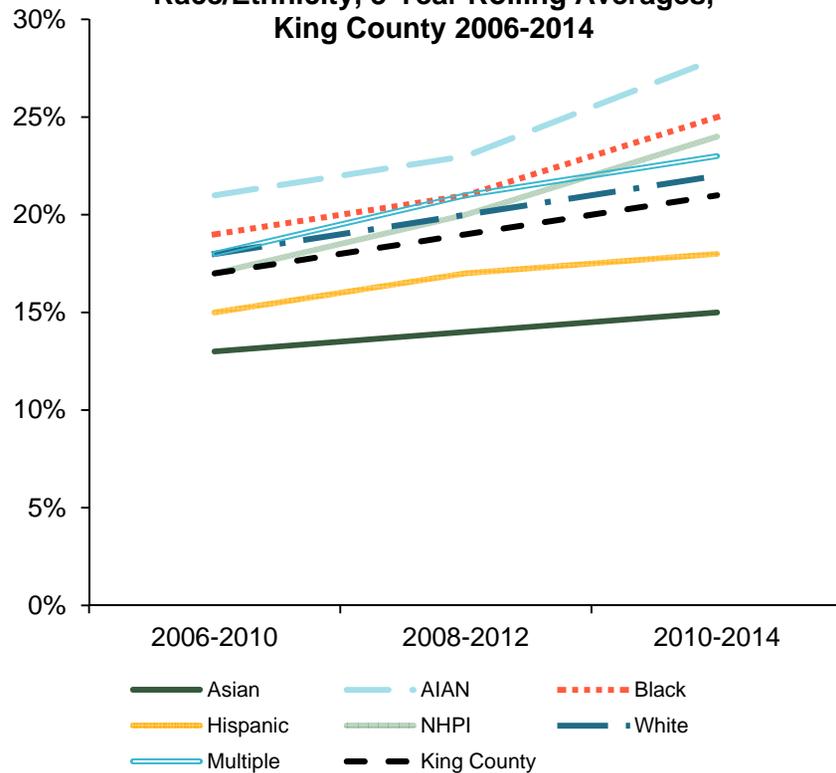
Meets Physical Activity Recommendations by SES, King County 2012-2014 Average



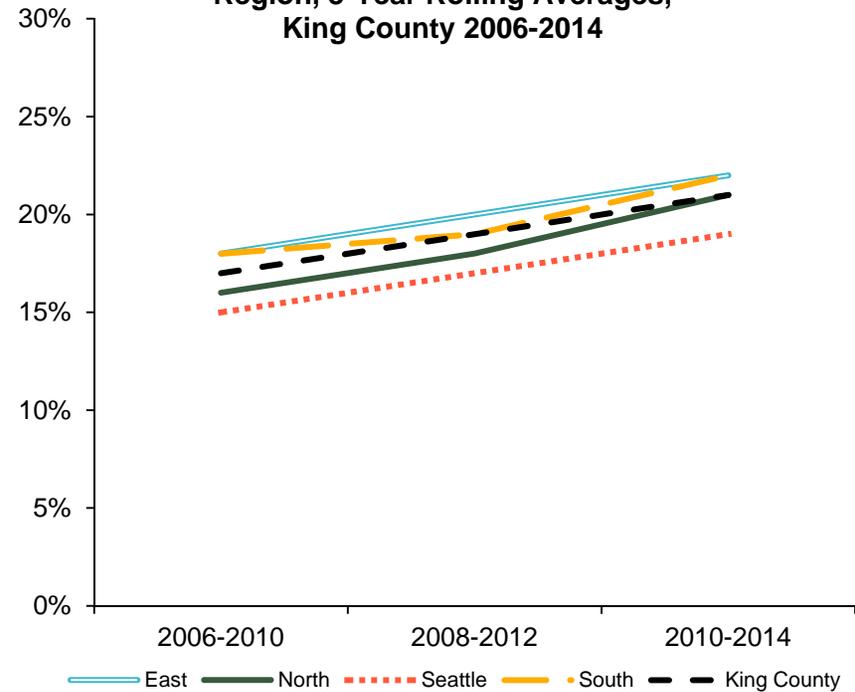
- Students of a moderate to higher SES were up to **1.5 times more likely** to meet recommendations than students of a lower SES.

More students are getting physical activity than in the past

Meets Physical Activity Recommendations by Race/Ethnicity, 3-Year Rolling Averages, King County 2006-2014



Meets Physical Activity Recommendations by Region, 3-Year Rolling Averages, King County 2006-2014

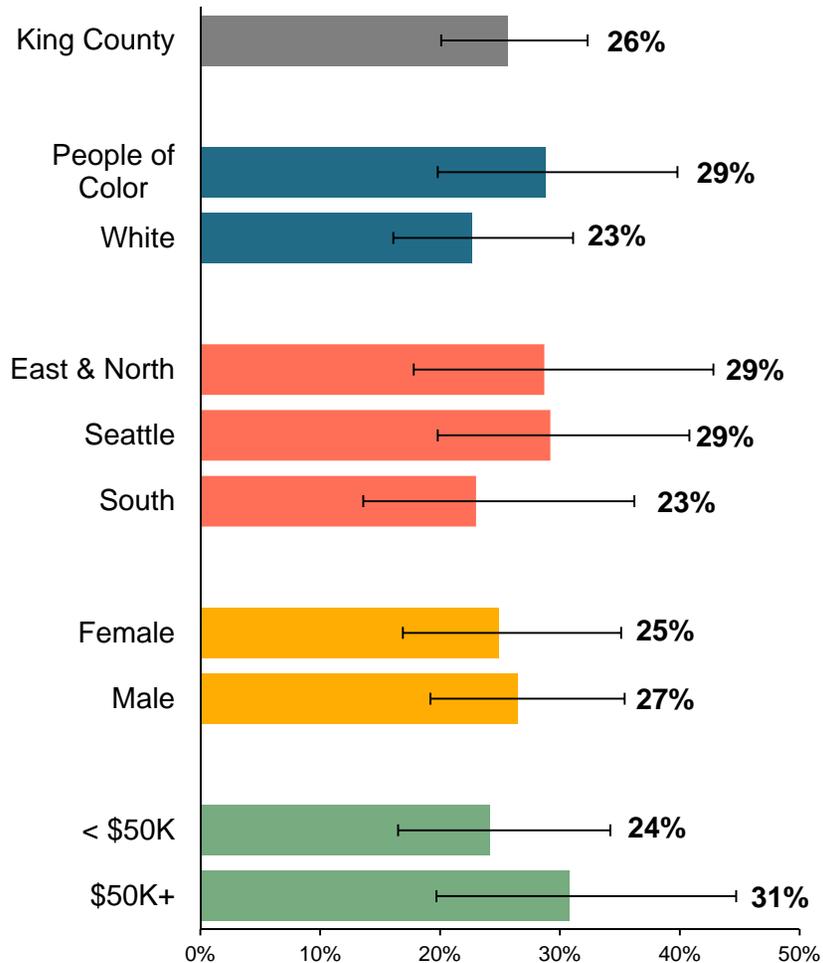


- The percent of students meeting recommendations increased significantly over time for all race/ethnicity groups and regions.

- The percent of Asian, Hispanic, Seattle, and North region students meeting recommendations consistently fell below the county average.

Physical activity levels are also too low among young adults

**Meets Physical Activity Recommendations,
King County 2011, 2013 Average**



- More young adults met recommendations than the Healthy People 2020 target of 20.1%².
- There were no statistically significant differences by race/ethnicity, King County region, gender or income level.
- The sample sizes for these subgroups were small and the estimates should be interpreted with caution.

What can we learn?

- Young adults are ahead of the Healthy People 2020 target, but school-age youth are not.
- While differences between SES populations and King County regions reflect overall trends across indicators, the differences between race/ethnicity groups do not. Unlike other indicators, more AIAN and NHPI students experienced the positive outcome than any other group.
- Further efforts to increase physical activity among youth and young adults are necessary.

Eating fruits & vegetables

Eating the recommended number of servings of fruit and vegetables per day is an important part of maintaining a healthy weight and obtaining the nutrients necessary for growth and development.



Although recommendations vary by calorie needs (which depend on age, gender, weight, and activity level), the following are the generalized recommendations used in this report:

Children & youth

(6th through 12th graders)

At least 5 servings of fruit and vegetables per day for the past 7 days.

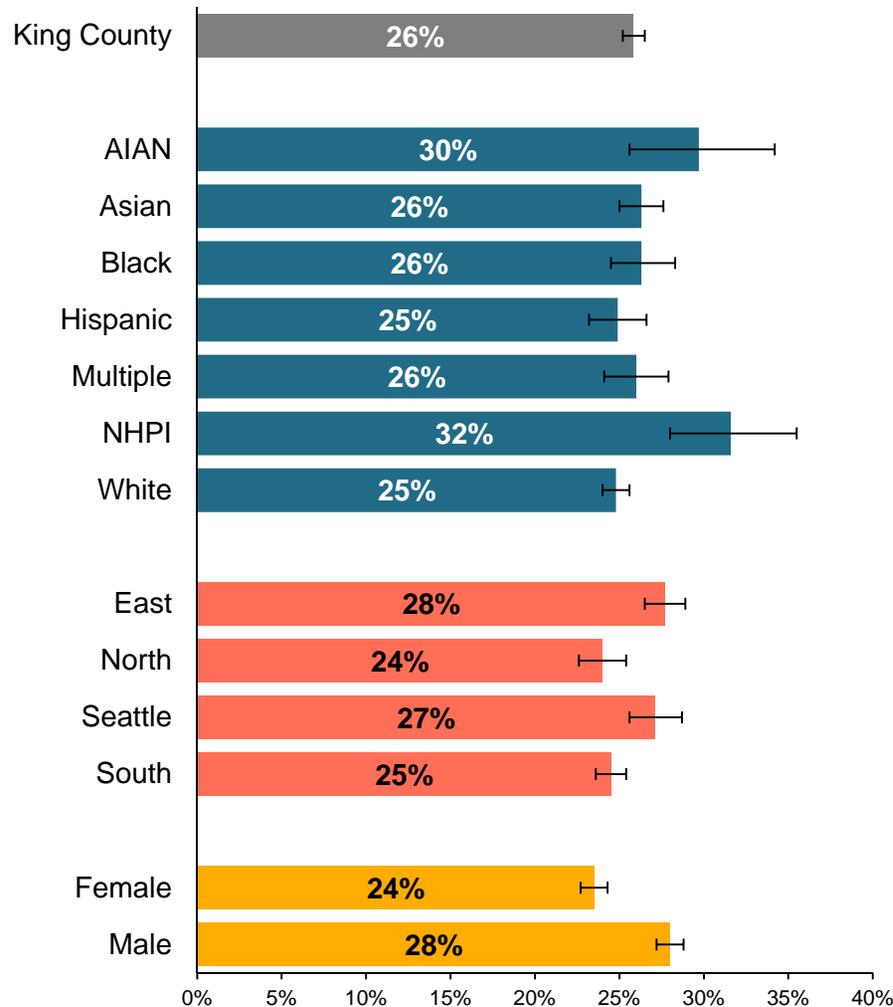
Young adults

(18-24 years old)

At least 1.5 cups each of fruit and vegetables per day.

King County students do not meet nutrition recommendations

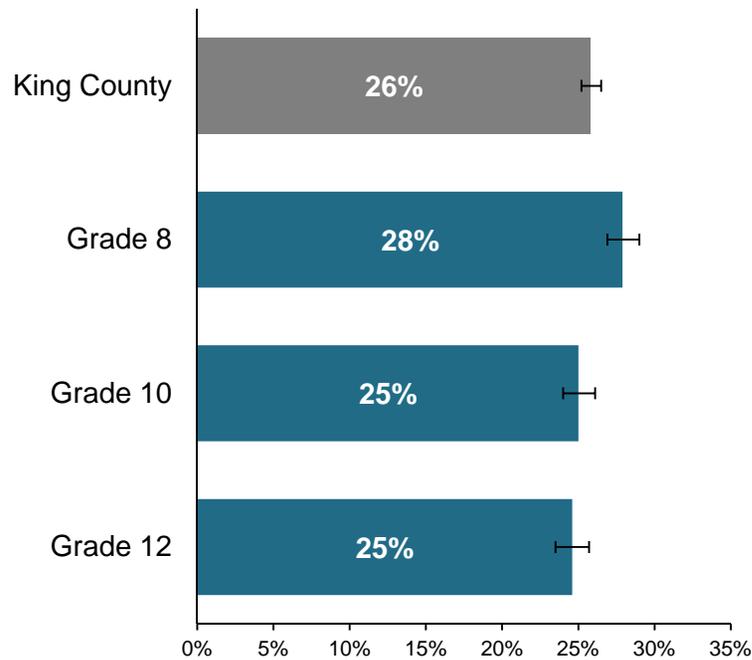
Eats 5 Fruits & Vegetables Per Day,
King County 2012-2014 Average



- **Less than one-third** of King County students eat the recommended amount of fruits and vegetables each day.
- Compared to NHPI students, who had the highest percent meeting recommendations, white and Hispanic students were **22% less likely** to meet recommendations.
- The percent of students meeting recommendations was not substantially different between boys and girls or King County regions.

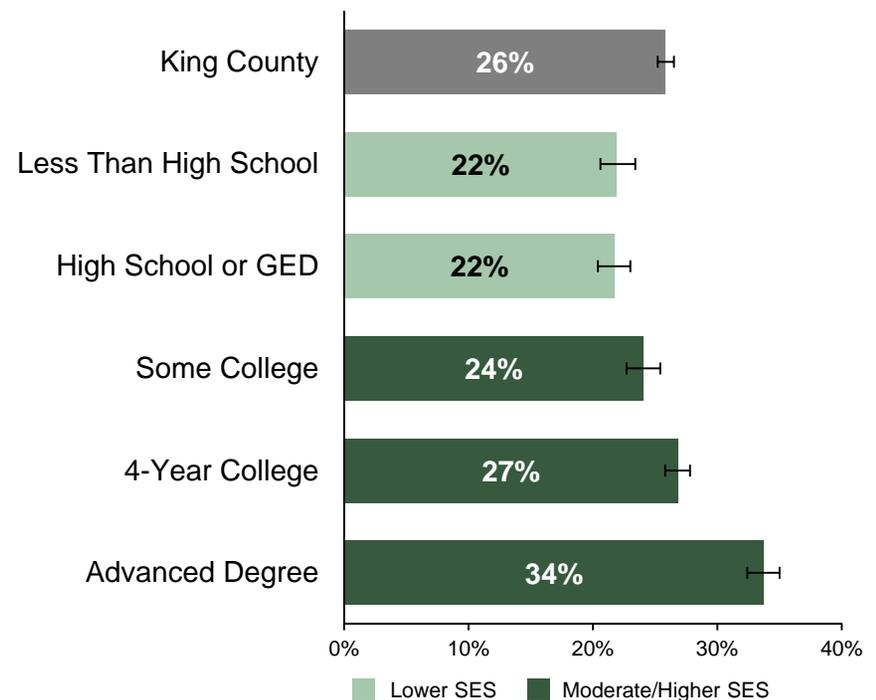
Students' SES affects nutrition, but age does not

Eats 5 Fruits & Vegetables Per Day by Grade, King County 2012-2014 Average



- Consumption of fruits and vegetables was similar across all grades.

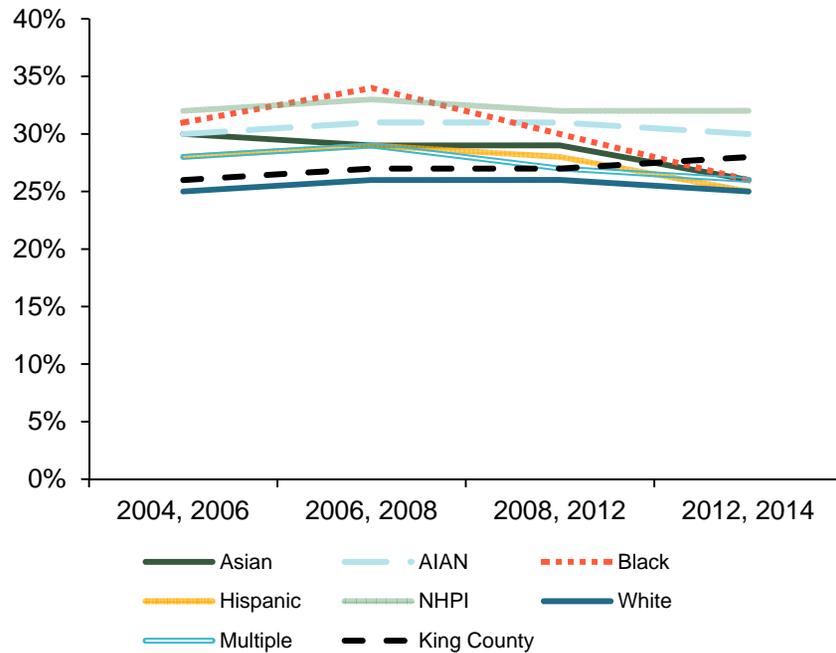
Eats 5 Fruits & Vegetables Per Day by SES, King County 2012-2014 Average



- Students of a moderate or higher SES were up to **1.5 times more likely** to meet recommendations than students of a lower SES.

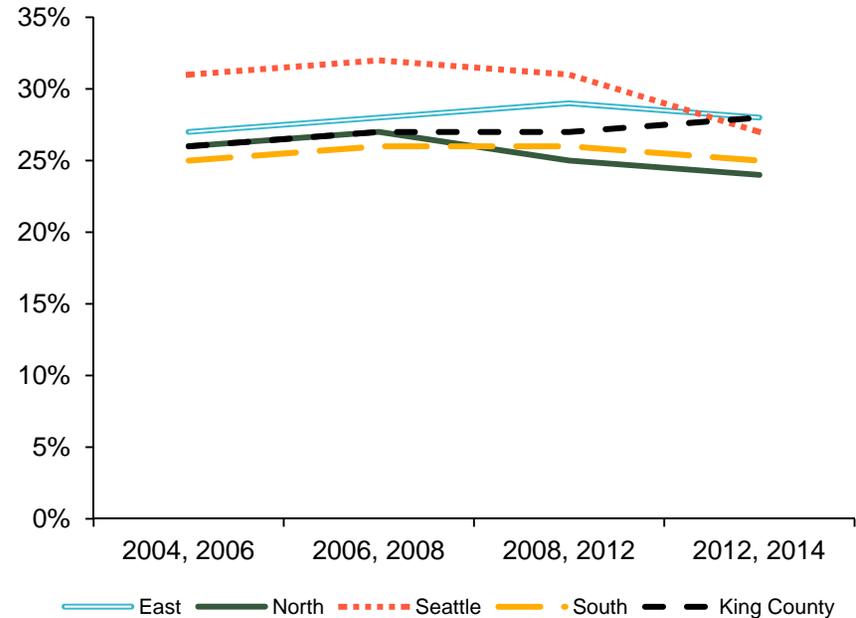
Nutrition has not improved significantly over time

Eats 5 Fruits & Vegetables Per Day by Race/Ethnicity, 2-Year Rolling Averages, King County 2004-2014*



- Overall, the percent of King County students eating the recommended number of fruits and vegetables per day has decreased over time.

Eats 5 Fruits & Vegetables Per Day by Region, 2-Year Rolling Averages, King County 2004-2014*



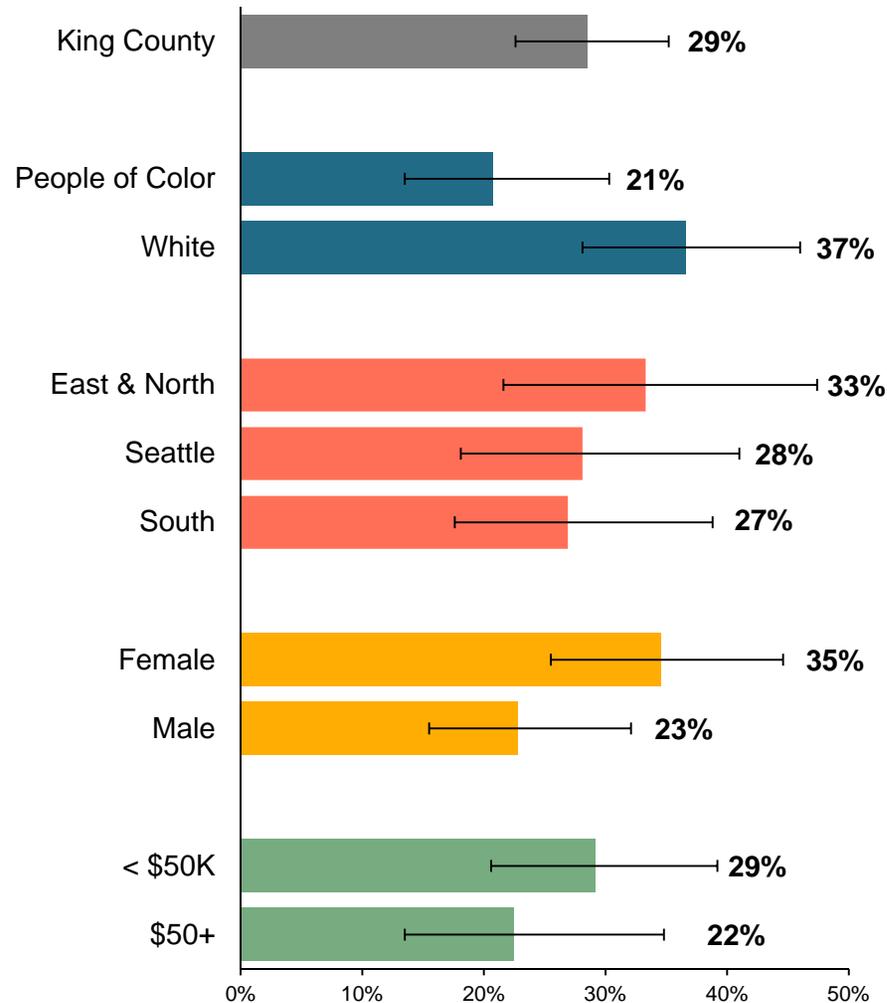
- AIAN, NHPI, white, and multiple race/ethnicity students did not experience this decrease.
- Students in the Seattle region experienced a decrease, although there was no significant change in any other region.

*Note: Data for 2010 not available. Instead, data are averaged across 2008 & 2012 as shown above.

Source: Washington State Healthy Youth Survey, 2004-2014

Young adults also do not meet nutrition recommendations

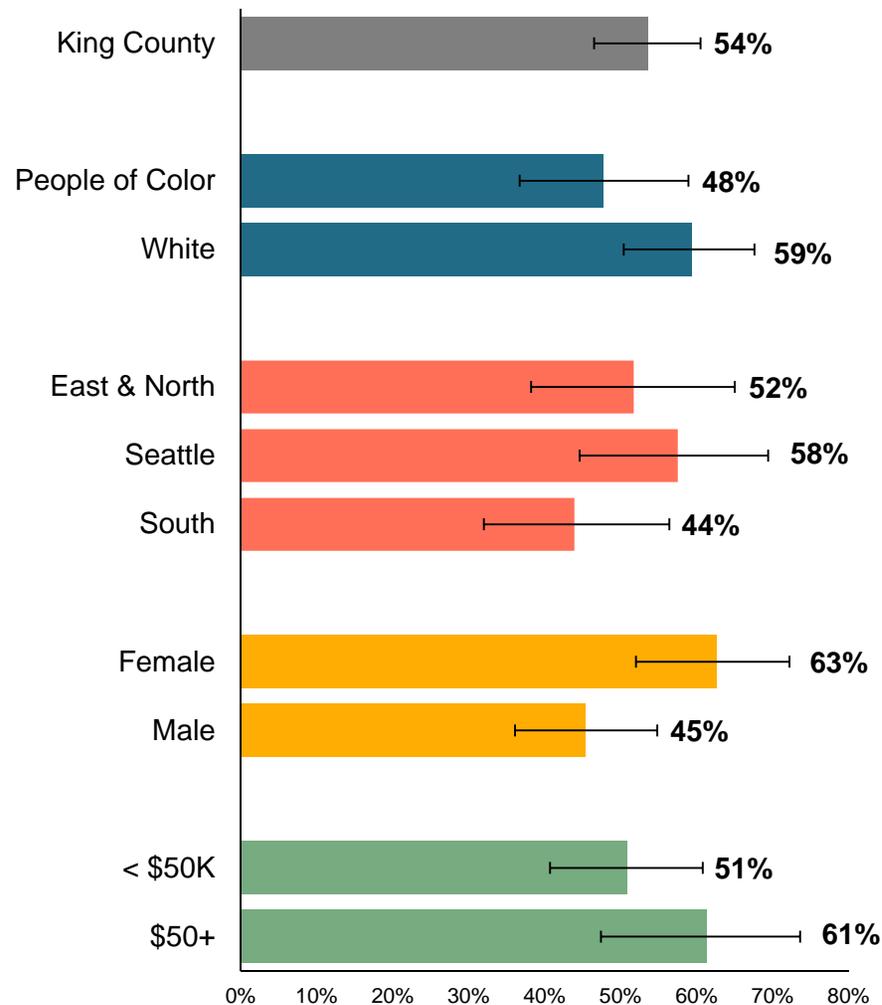
**Meets Fruit Intake Recommendations,
King County 2011, 2013 Average**



- As with students, many young adults are not eating fruit frequently enough.
- There were no statistically significant differences by race/ethnicity, King County region, gender or income level.
- The sample sizes for these subgroups were small and the estimates should be interpreted with caution.

Young adults also do not meet nutrition recommendations

**Meets Vegetable Intake Recommendations,
King County 2011, 2013 Average**



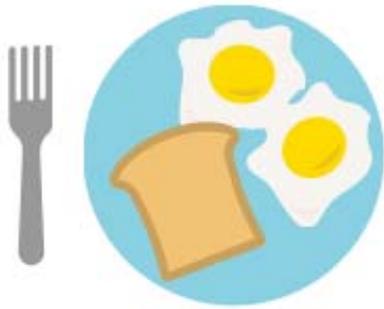
- As with students, many young adults are not eating vegetables frequently enough.
- There were no statistically significant differences by race/ethnicity, King County region or income level.
- The sample sizes for these subgroups were small and the estimates should be interpreted with caution.

What can we learn?

- Fruit and vegetable consumption does not improve as youth age, demonstrated by similar consumption between students and young adults.
- Not all race/ethnicity groups have the same consumption habits, and these differences will be an important consideration for any interventional activities.
- The data for young adults are not directly comparable to that for students due to differences in requirements and survey questions.

Eating breakfast

Eating breakfast helps children and youth start their day in a positive way.

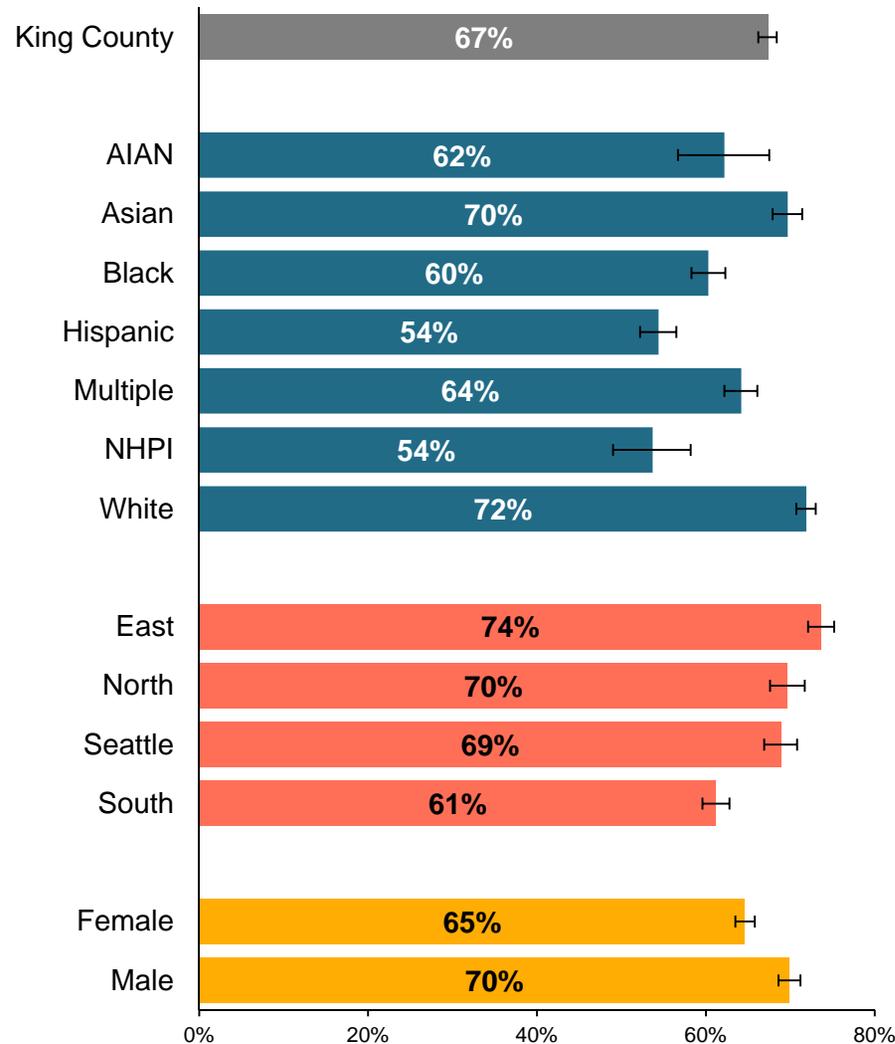


This important meal has been shown to improve academic performance, help maintain a healthy weight, and achieve nutritional goals.

Making sure everyone has a chance to have a balanced breakfast helps improve overall health and success among all children and youth.

Over half of King County students eat breakfast

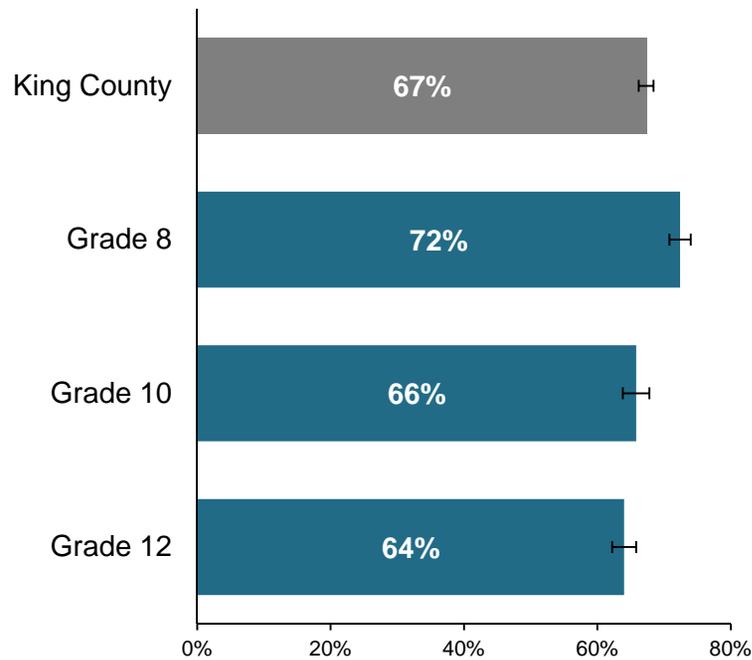
Eats Breakfast, King County 2012-2014 Average



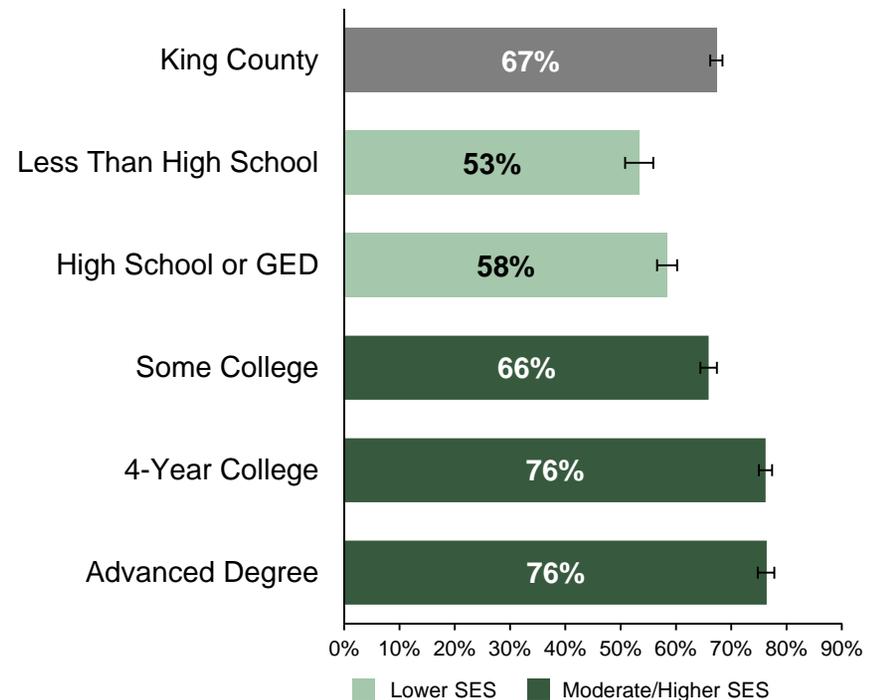
- Compared to white students, who had the highest percent reporting that they eat breakfast...
 - NHPI students were **22% less likely** to eat breakfast.
 - Hispanic students were **21% less likely** to eat breakfast.
- Students in the South region of King County were significantly less likely to eat breakfast than students in other regions.
- Girls were slightly less likely to eat breakfast than boys.

Breakfast habits differ by both age & SES

Eats Breakfast by Grade,
King County 2012-2014 Average



Eats Breakfast by SES,
King County 2012-2014 Average

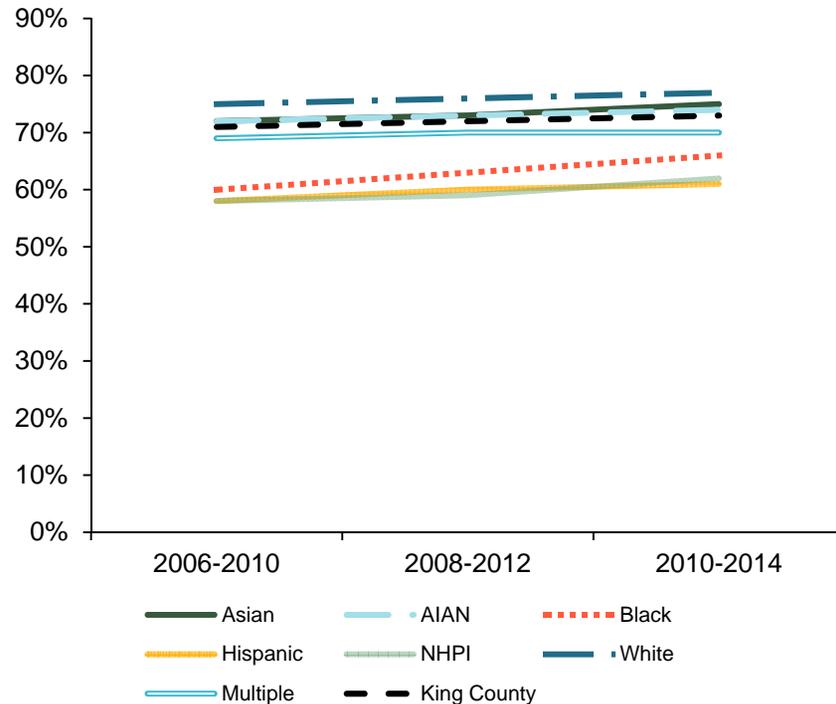


- Older students were less likely to eat breakfast than younger students—6th graders were **1.3 times more likely** to eat breakfast than 12th graders.

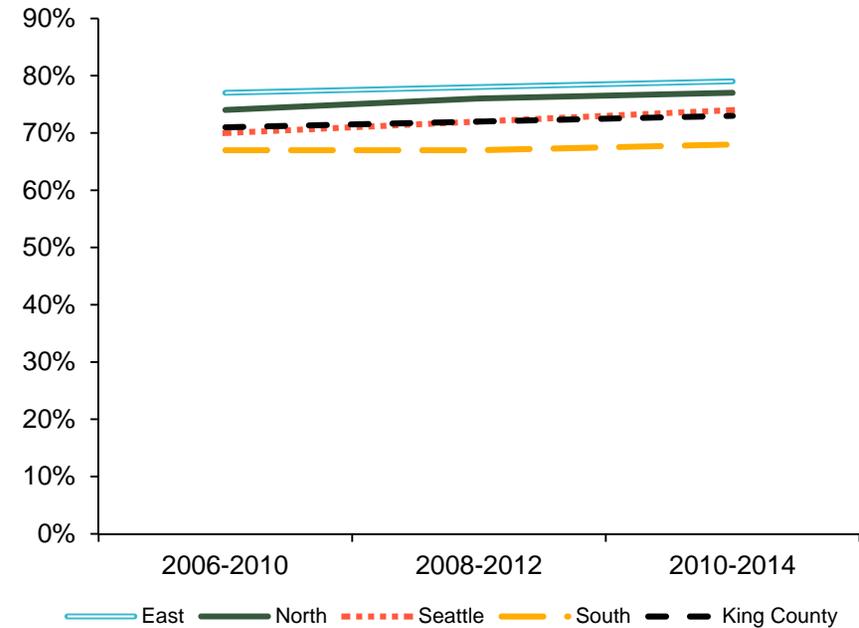
- Students of a moderate to higher SES were up to **1.4 times more likely** to eat breakfast than students of a lower SES.

The percent of students eating breakfast has remained constant

Eats Breakfast by Race/Ethnicity, 3-Year Rolling Averages, King County 2006-2014



Eats Breakfast by Region, 3-Year Rolling Averages, King County 2006-2014



- Overall, the percent of King County students eating breakfast did not change substantially over time.
- The percent of black students eating breakfast increased more over time than any other race/ethnicity group.

- The percent of Seattle students eating breakfast did increase slightly over time.

What can we learn?

- Significant differences between race/ethnicity and region subgroups suggest not all students have equal opportunity to eat breakfast.
- Most differences have been constant over time, suggesting a need for increased equity-focused intervention.
- An increase in black and Seattle students eating breakfast is a positive change. Further investigation as to why this change occurred could help inform future program activities.

Preventive health visits

It is recommended that children and youth over the age of three attend an annual preventive care visit. Many people do not meet this recommendation.



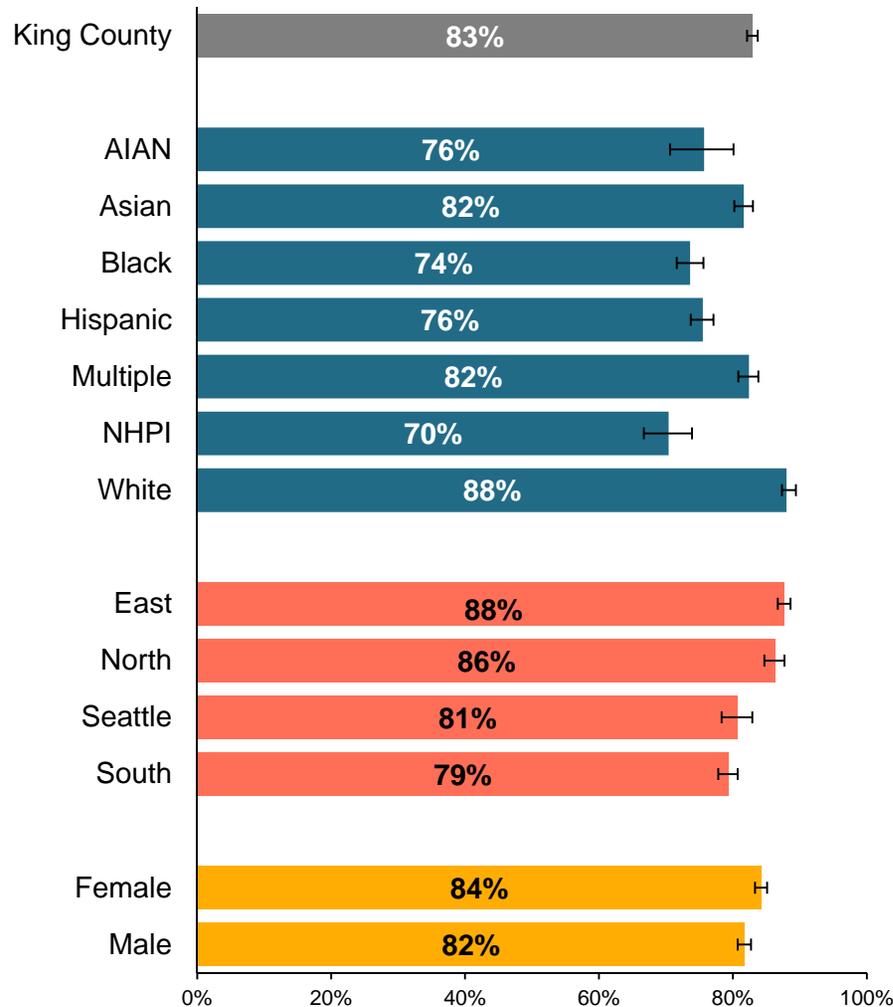
These visits are important because the provider can check on developmental progress, screen for physical and mental health issues, and give vaccinations.

Here, having a preventive health care visit is defined as having a primary care visit not related to an illness and/or a dental exam in the past 12 months.



A majority of King County students attend preventive health visits

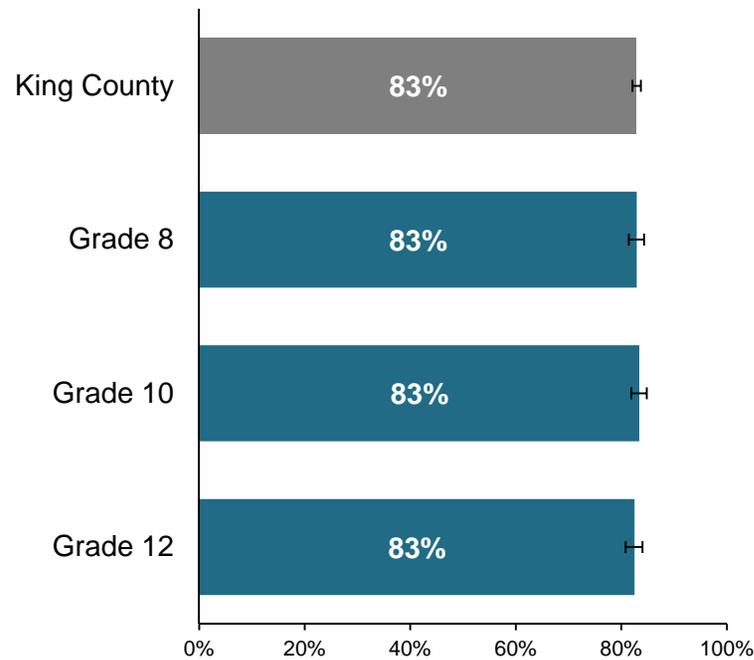
Preventive Health Visit in Last Year, King County
2012-2014 Average



- Compared to white students, who had the highest percent attending a preventive health visit...
 - NHPI students were **20% less likely** to have attended a visit.
 - Black students were **16% less likely** to have attended a visit.
- Students in the East and North regions of King County were more likely to attend preventive health visits than students in the Seattle and South regions.
- The percent of boys and girls attending visits was similar.

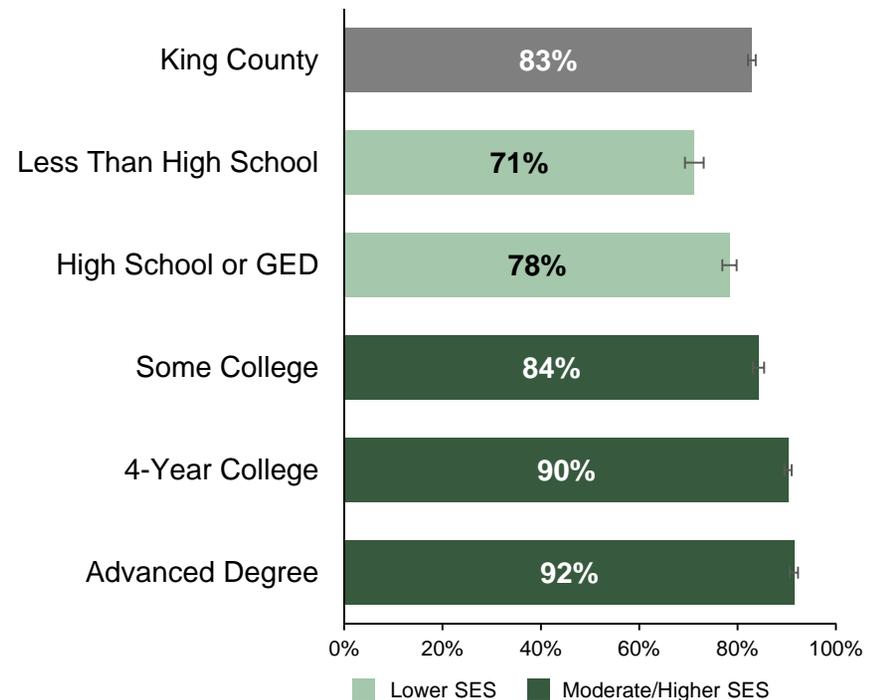
The percent attending visits varies by SES, but not by age

Preventive Health Visit in Last Year by Grade, King County 2012-2014 Average



- The percent of students attending preventive health visits did not differ by grade.

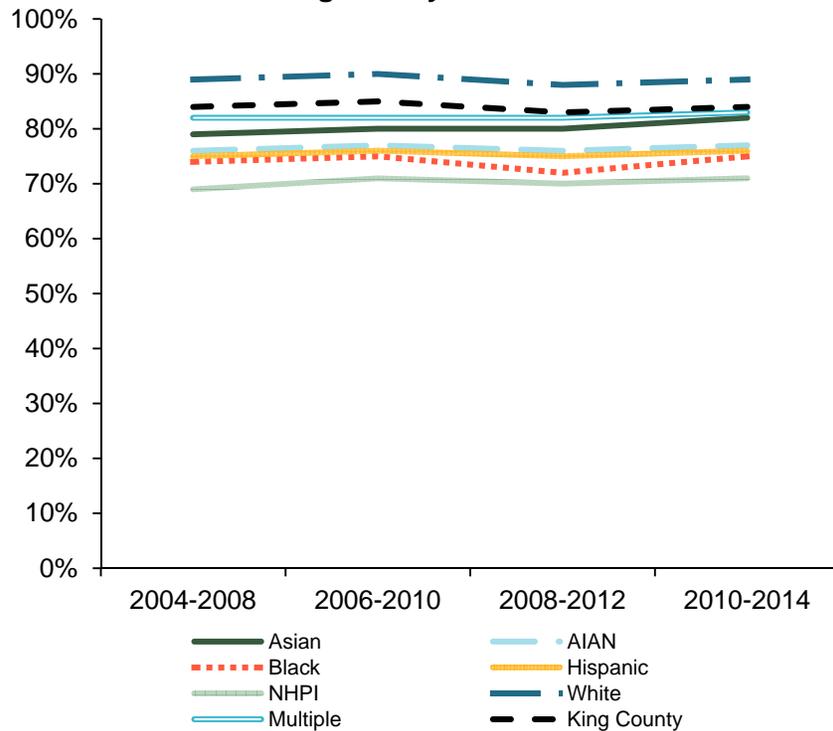
Preventive Health Visit in Last Year by SES, King County 2012-2014 Average



- Students of a moderate or high SES were up to **1.3 times more likely** to attend a preventive health visit than students of a low SES.

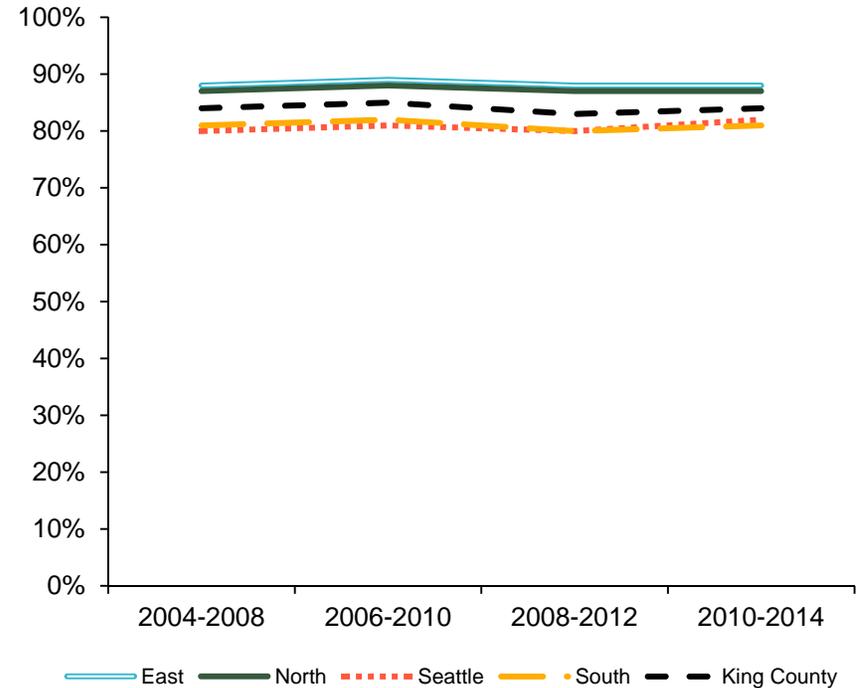
The percent of students attending visits has remained constant

Preventive Health Visit in Last Year by Race/Ethnicity, 3-Year Rolling Averages, King County 2004-2014



- The percent of students attending a preventive health visit did not change significantly over time except among Asian students.

Preventive Health Visit in Last Year by Region, 3-Year Rolling Averages, King County 2004-2014



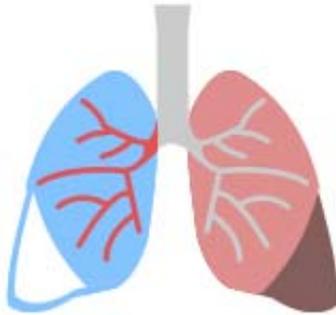
- The percent of students of color attending visits fell below the King County average every year between 2004 and 2014.
- Seattle and South regions had the lowest percent every year.

What can we learn?

- A majority of students across King County are receiving some form of preventive care each year.
- There has been no significant increase in preventive visits, even after the Affordable Care Act has started to reduce some barriers to accessing preventive care.
- Differences by race/ethnicity, region, and SES persist and interventions should consider ways to improve access to care for disadvantaged groups.

Asthma

Millions of children and youth in the United States currently have asthma. It is one of the most common childhood diseases.



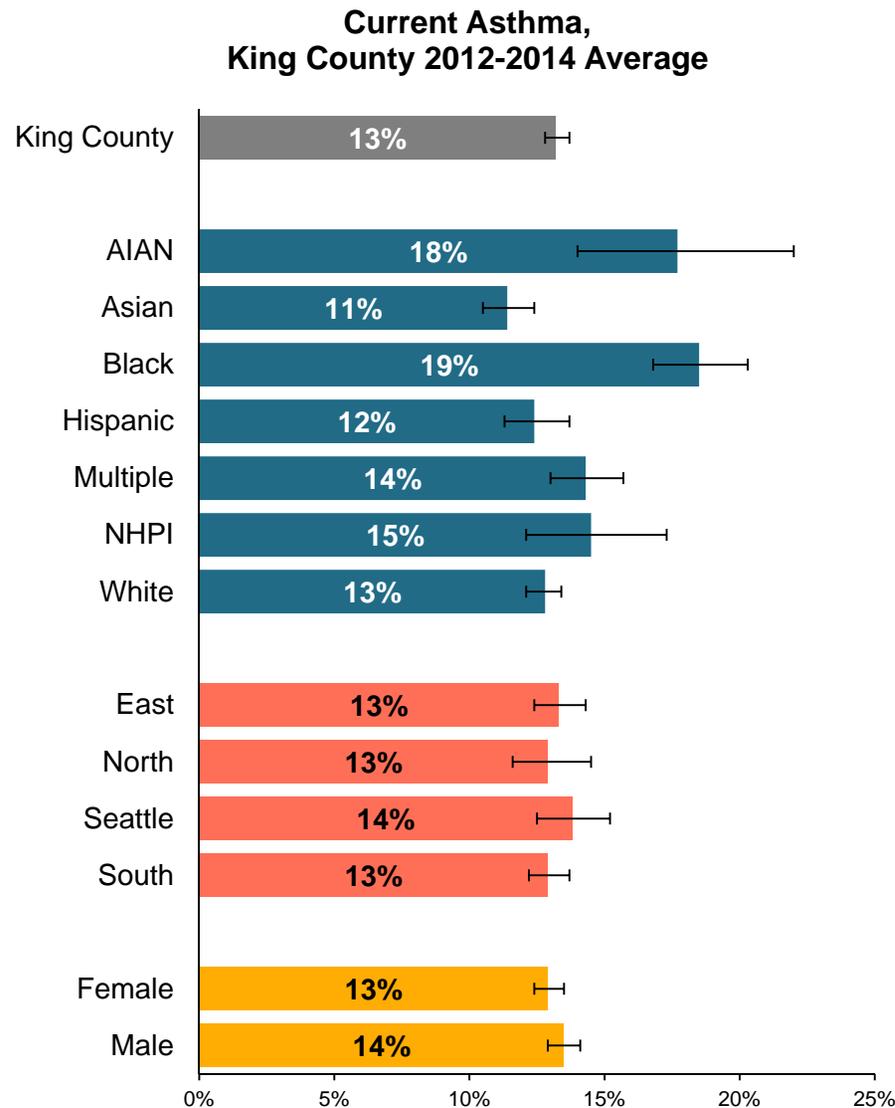
Asthma is one of the main reasons students have to miss school, which can hurt academic performance.

By knowing how many children and youth currently have asthma, as well as who is most affected, we can help everyone breathe better.



Public Health
Seattle & King County 

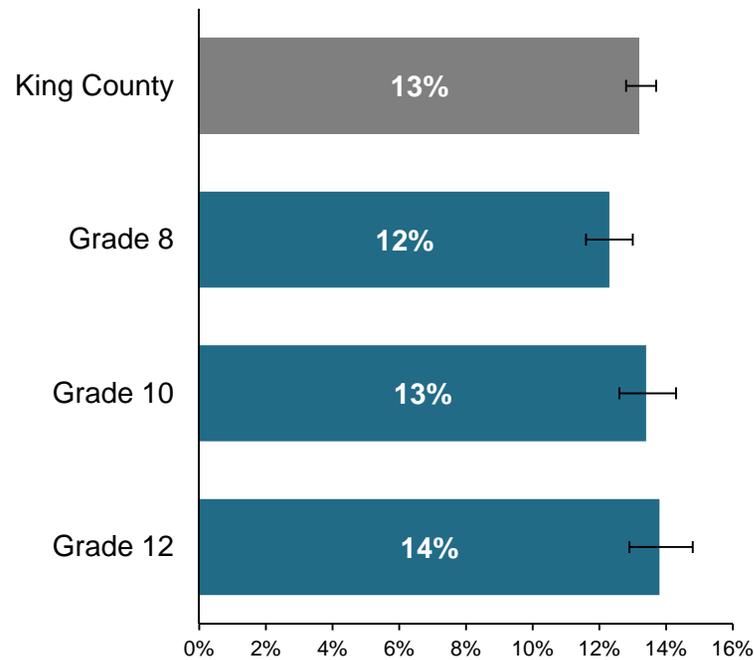
The percent of students with asthma differs by race/ethnicity



- The percent of students in King County with current asthma is higher than the national average of 8.6%³.
- Compared to Asian students, who were least likely to report currently having asthma...
 - Black students were **1.7 times more likely** to report having asthma.
 - AIAN students were **1.6 times more likely** to report having asthma.
 - NHPI students were **1.3 times more likely** to report having asthma.
- Boys and girls had a similar percent of current asthma.

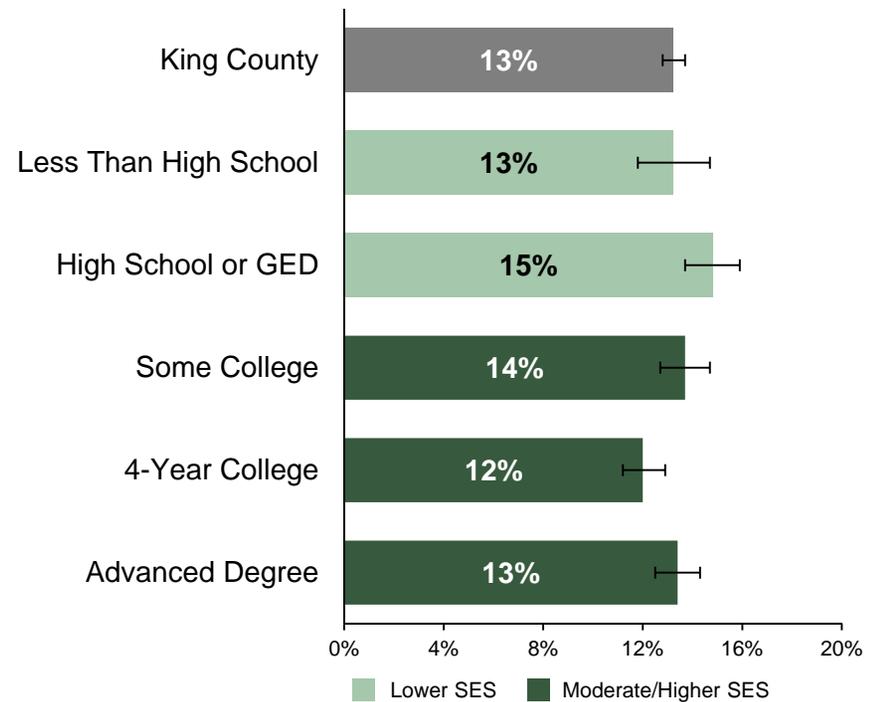
The percent with current asthma does not differ by SES or age.

**Current Asthma by Grade,
King County 2012-2014 Average**



- The percent of students with current asthma was similar across grades.

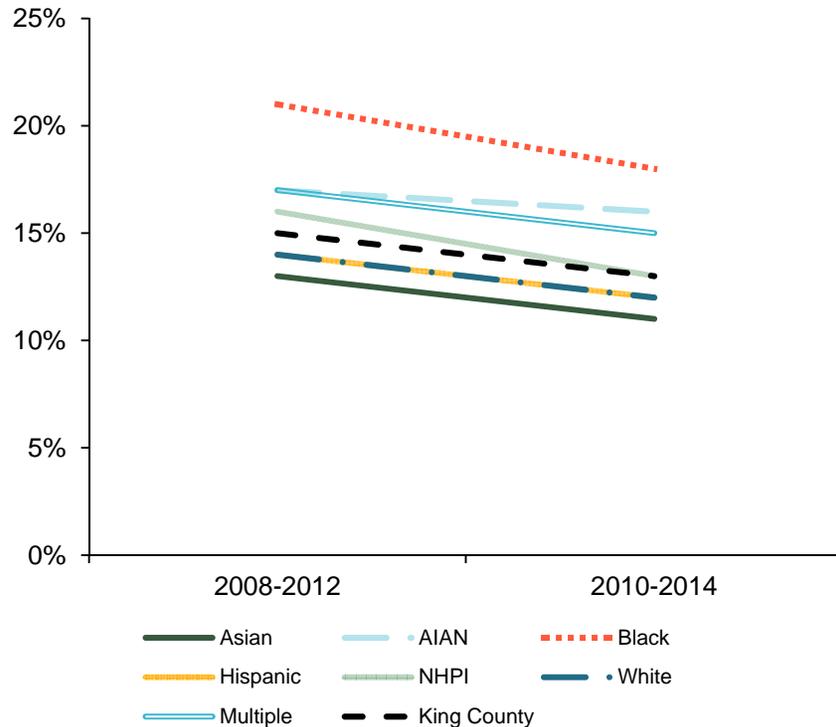
**Current Asthma by SES,
King County 2012-2014 Average**



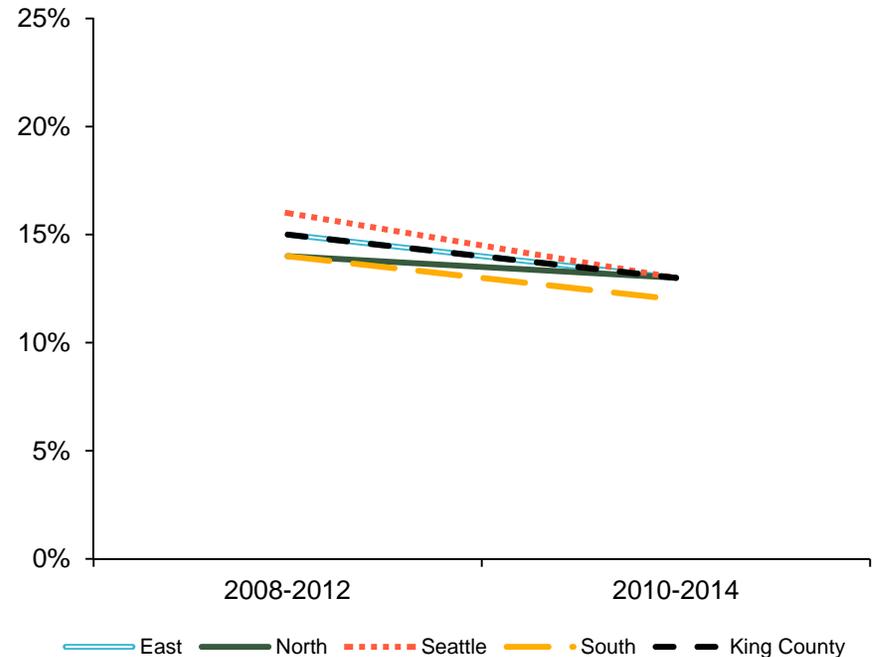
- The percent of students with current asthma was similar between lower and moderate or higher SES populations.

The percent with current asthma has decreased over time

Current Asthma by Race/Ethnicity, 3-Year Rolling Averages, King County 2008-2014



Current Asthma by Region, 3-Year Rolling Averages, King County 2008-2014



- The percent of students with current asthma decreased significantly among all race/ethnicity groups except AIAN students and in all four King County regions.

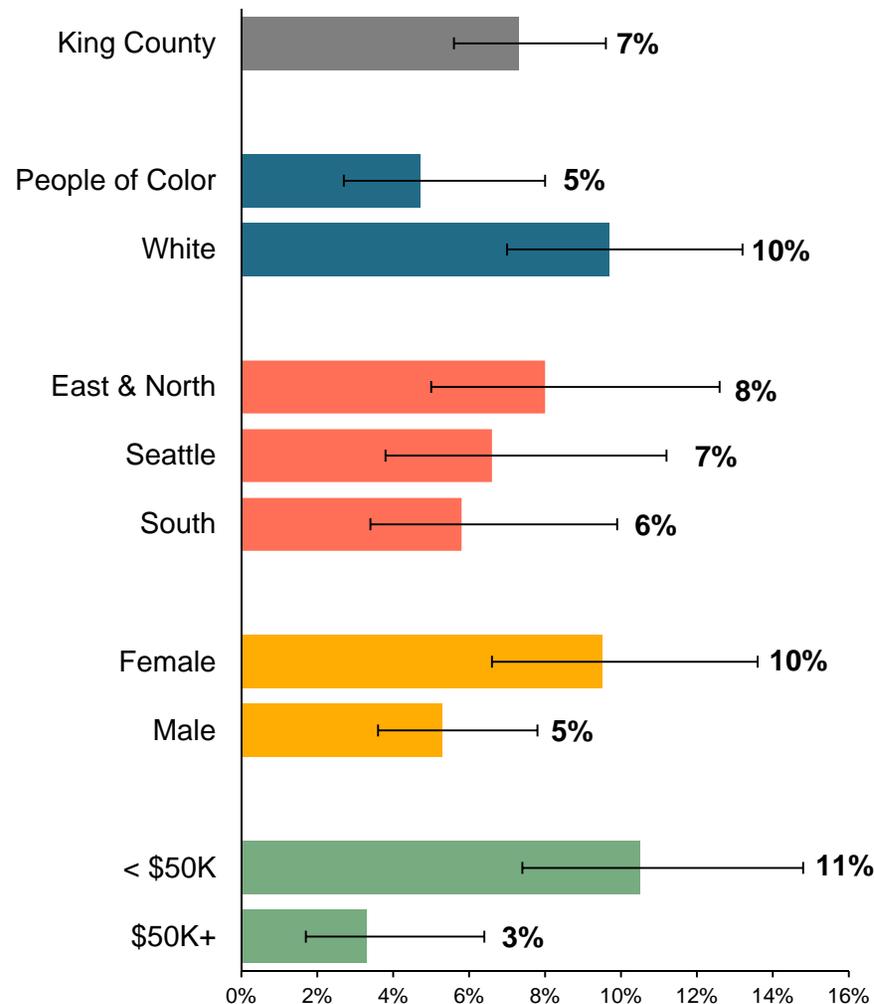
- Differences between race/ethnicity groups remained constant over time.
- The South region had the lowest percent across most years.

Note: Averages completely overlap for Hispanic and white students as well as the East region and King County.

Source: Washington State Healthy Youth Survey, 2008-2014

Fewer young adults have asthma than school-age youth

Current Asthma,
King County 2010-2014 Average

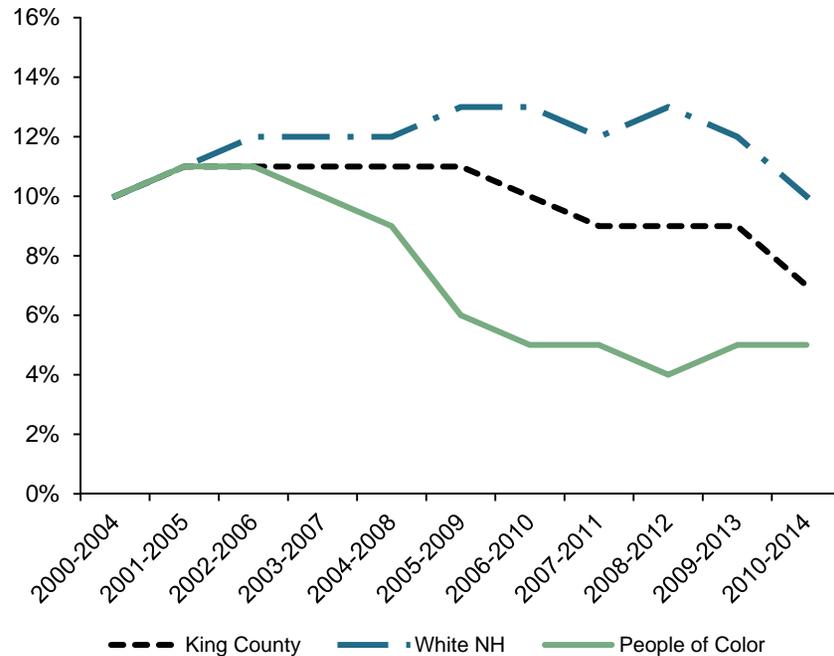


- The percent of young adults in King County with current asthma was slightly lower than the national average of 8.9% to 9.1%³.
- Young adults making less than \$50,000 per year were **3.7 times more likely** to have asthma than those who made more than \$50,000 per year.
- However, sample sizes in the different were small, so the data should be interpreted with caution.

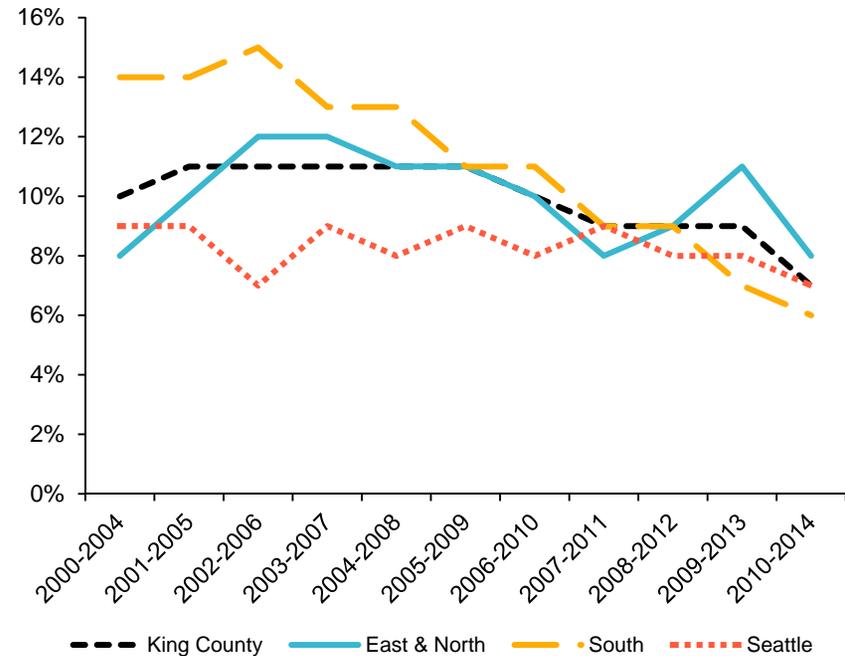
The percent with current asthma has decreased over time

- The percent with current asthma was consistently higher among white young adults than among people of color. However, the aggregated data likely hide important differences among race/ethnicity groups.
- Among young adults in the South region of King County, asthma prevalence decreased significantly between 2000 and 2014.

Current Asthma by Race/Ethnicity, 5-Year Rolling Averages, King County 2000-2014



Current Asthma by Region, 5-Year Rolling Averages, King County 2000-2014



Source: Behavioral Risk Factor Surveillance Survey, 2000-2014

What can we learn?

- Further investigation should consider why the percent of King County students with current asthma is higher than the national average.
- Fewer young adults have asthma than students in 8th through 12th grade, possibly because asthma is age-dependent. Many people's asthma goes away as they get older.
- We do not have enough specific data for the percent of young adults with current asthma to accurately characterize the differences between subgroups.

BEHAVIORAL & MENTAL HEALTH

Illicit substance use

What is an illicit substance?

Illicit substances include alcohol, marijuana, painkillers, and other illegal drugs.

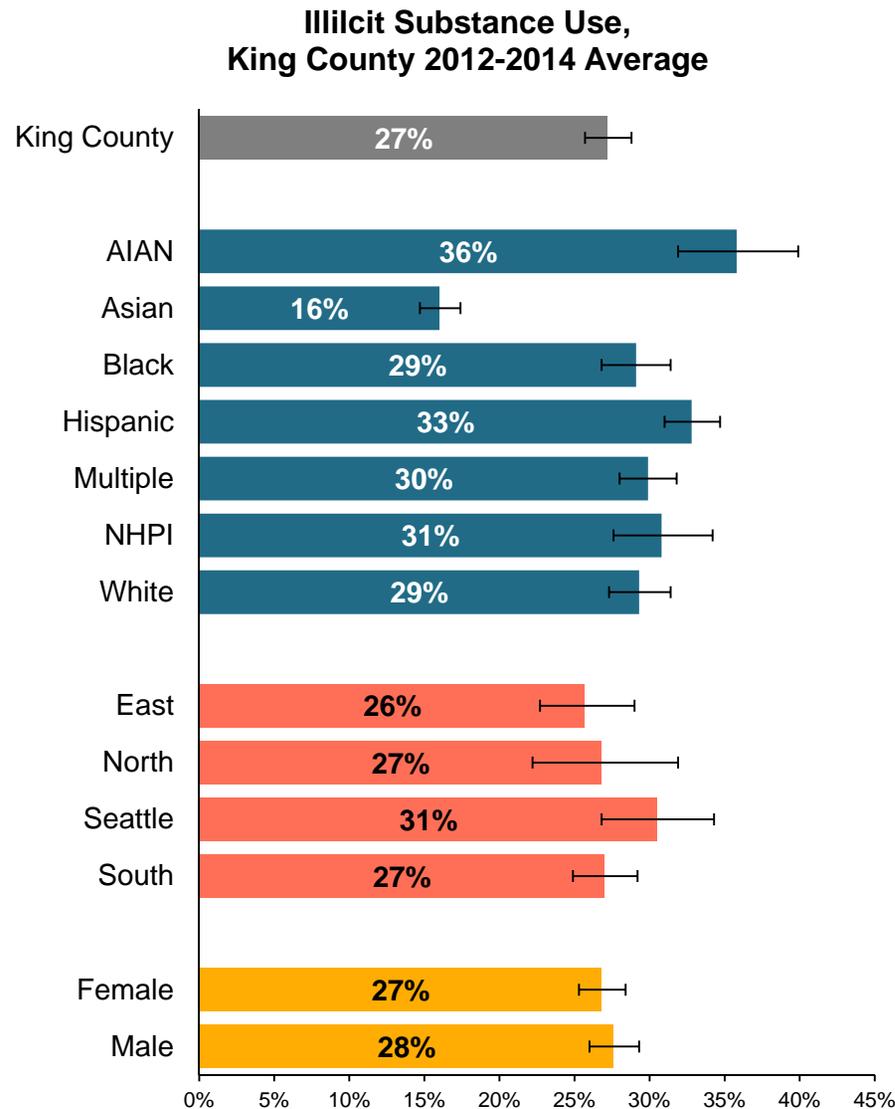
Here, use was defined as having used one or more illicit substances in the past 30 days.



Why are they important?

These substances can have long-term effects on brain structure, function, and cognition. Therefore, it is important to understand patterns of use among children and youth.

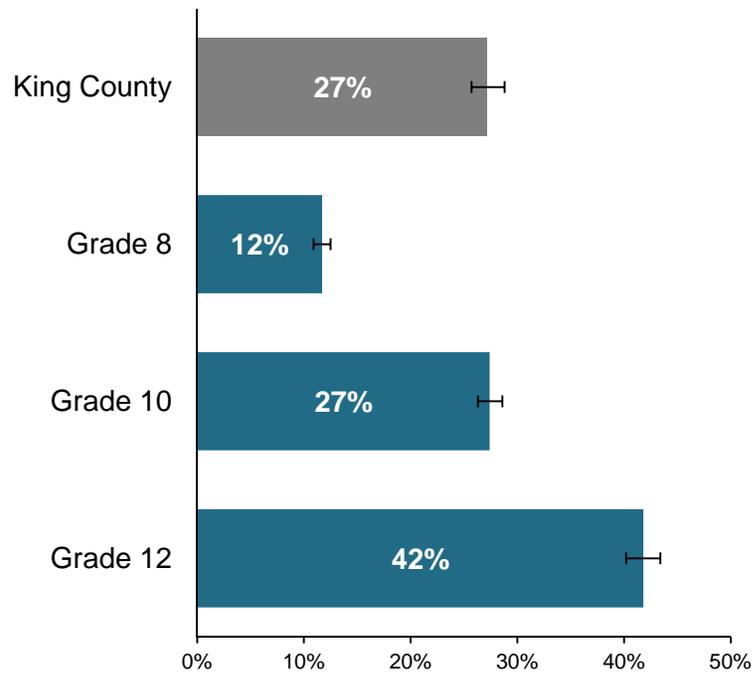
Illicit substance use varies by race/ethnicity



- Asian students were **56% less likely** to report substance use than AIAN students, the group with the highest percent.
- The Seattle region had a slightly higher percent than all other regions.
- Percentages were similar between girls and boys.

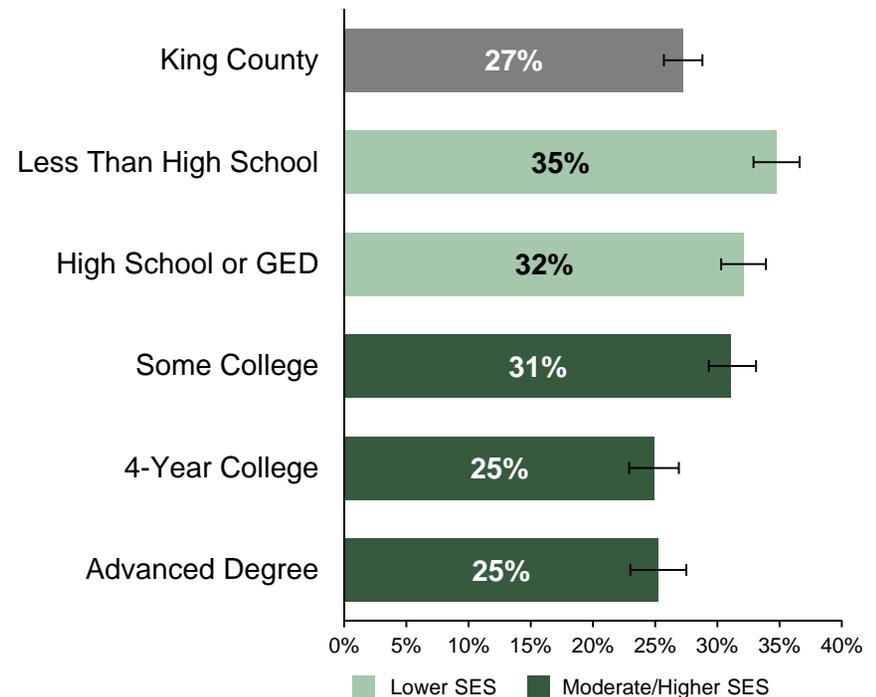
Illicit substance use varies by both age & SES

Illicit Substance Use by Grade,
King County 2012-2014 Average



- 12th grade students were **3.5 times more likely** to have used an illicit substance than 8th grade students.

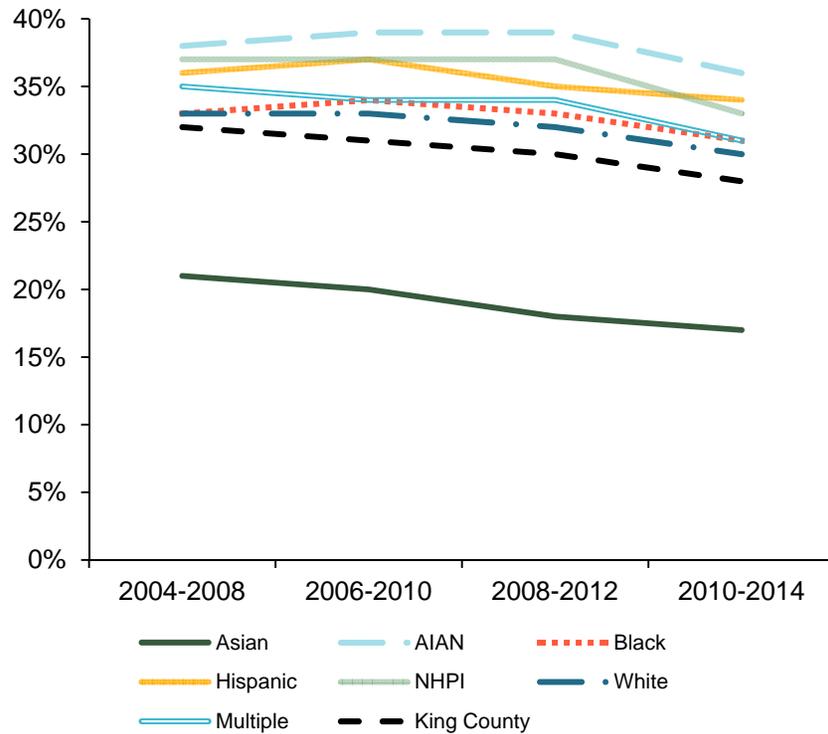
Illicit Substance Use by SES,
King County 2012-2014 Average



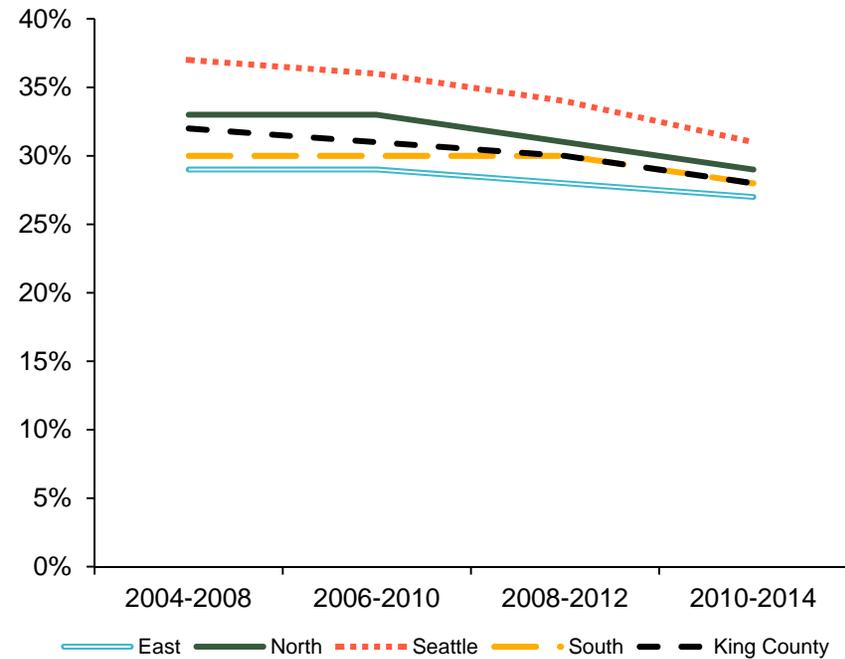
- Students of a lower SES were up to **1.4 times more likely** to have used an illicit substance than students of a moderate to higher SES.

Illicit substance use has been decreasing among students

Illicit Substance Use by Race/Ethnicity, 3-Year Rolling Averages, King County 2004-2014



Illicit Substance Use by Region, 3-Year Rolling Averages, King County 2004-2014



- The percent of students reporting illicit substance use decreased significantly among all race/ethnicity groups except AIAN students and in all King County regions except the North region.

- The Seattle region experienced the largest decrease in percent over time.
- Asian students had a substantially lower percent than any other group across all years between 2004 and 2014.

What can we learn?

- Although illicit substance use is declining, it remains a relevant issue—particularly among older youth.
- Intervention efforts must consider the reasons for subgroup differences and strive to reduce disparities.

Impaired driving

In the United States, impaired driving, or driving under the influence of alcohol and drugs, results in thousands of traffic accidents and fatalities every year.

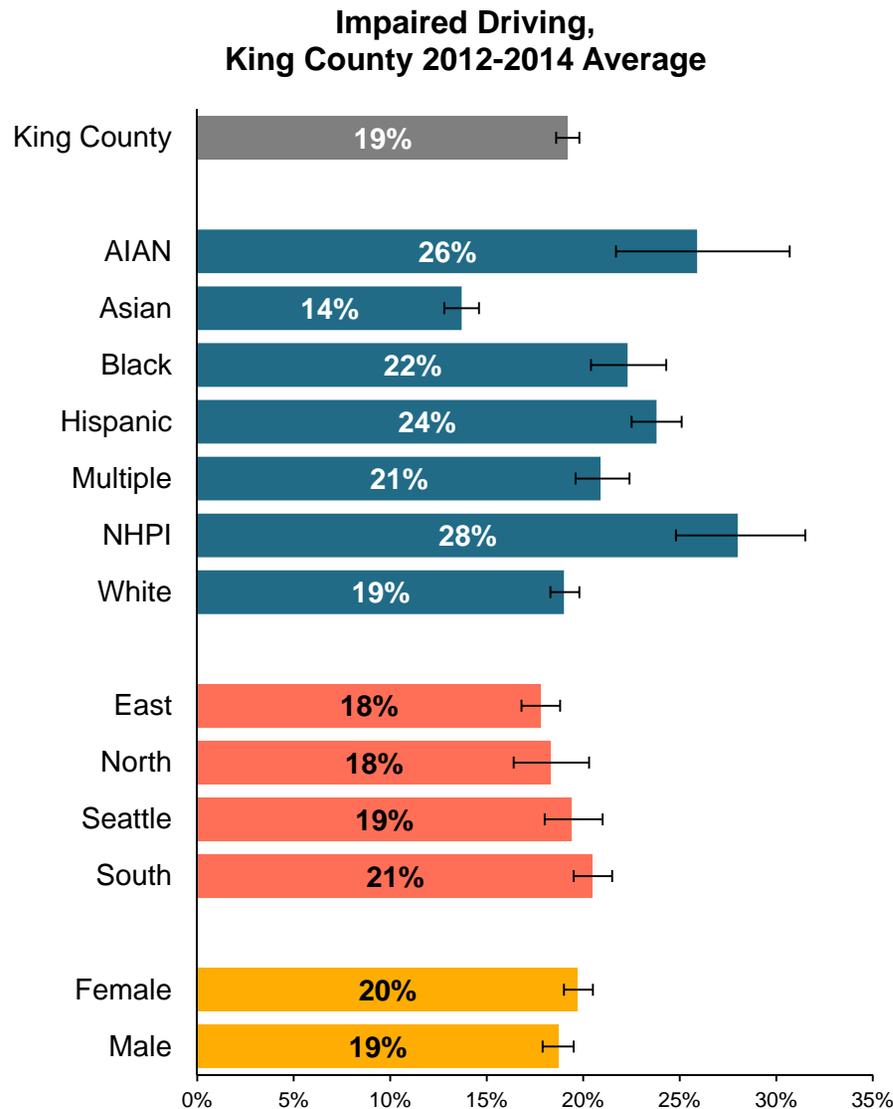


Young people are at greater risk of these accidents and fatalities than older people, especially those related to alcohol.

Here, impaired driving was defined as driving after having been drinking alcohol and/or riding in a car with someone who had been drinking alcohol.



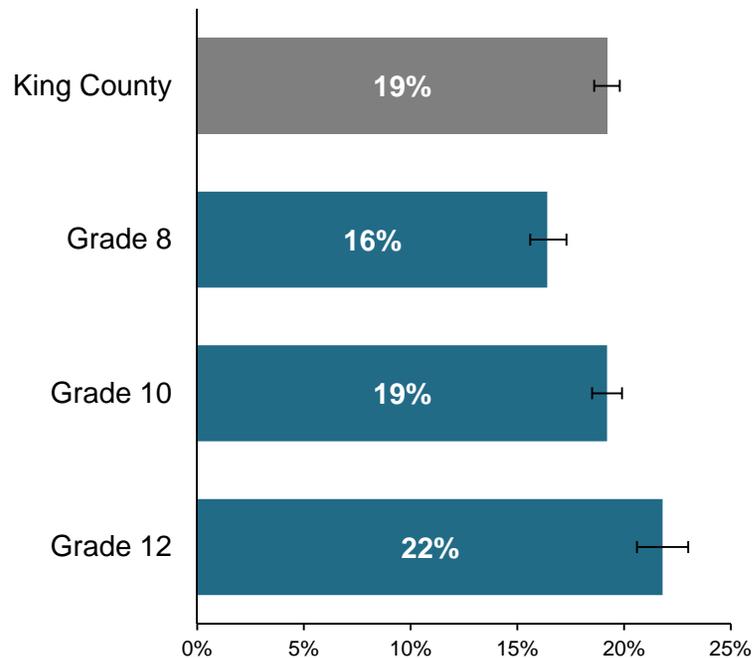
Experiences with impaired driving differ by race/ethnicity



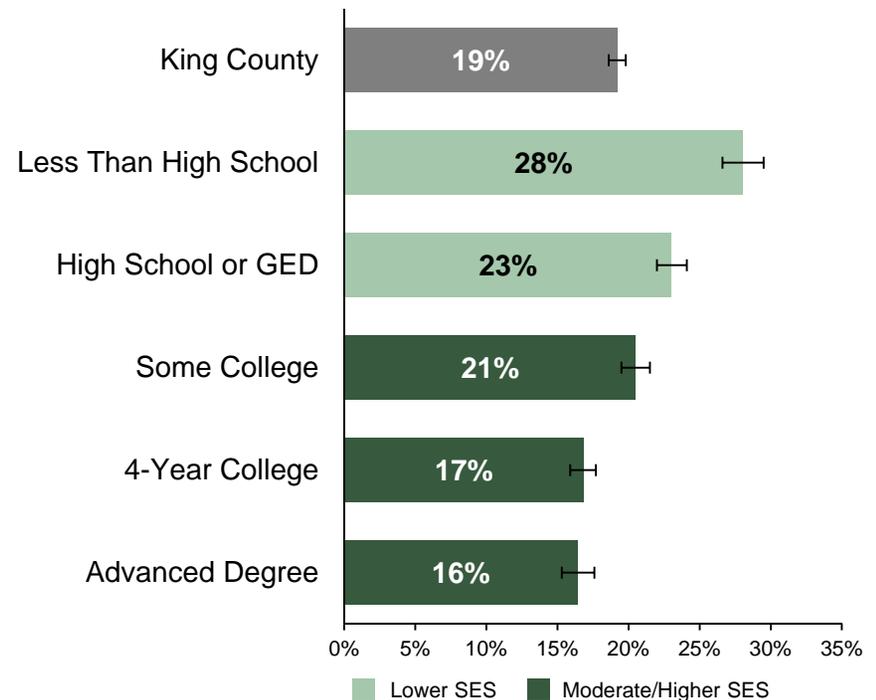
- NHPI and AIAN students were **1.9 to 2.0 times more likely** to have experienced impaired driving than Asian students, the group with the lowest percent.
- Impaired driving experiences among students were similar by King County region or by gender.
- More students reported riding in a vehicle with an impaired driver than driving a vehicle while they were impaired. For example:
 - **10%** of 12th graders reported driving a vehicle while impaired.
 - **19%** of 12th graders reported riding in a vehicle driven by someone who was impaired.

Experiences with impaired driving vary by both age & SES

Impaired Driving by Grade,
King County 2012-2014 Average



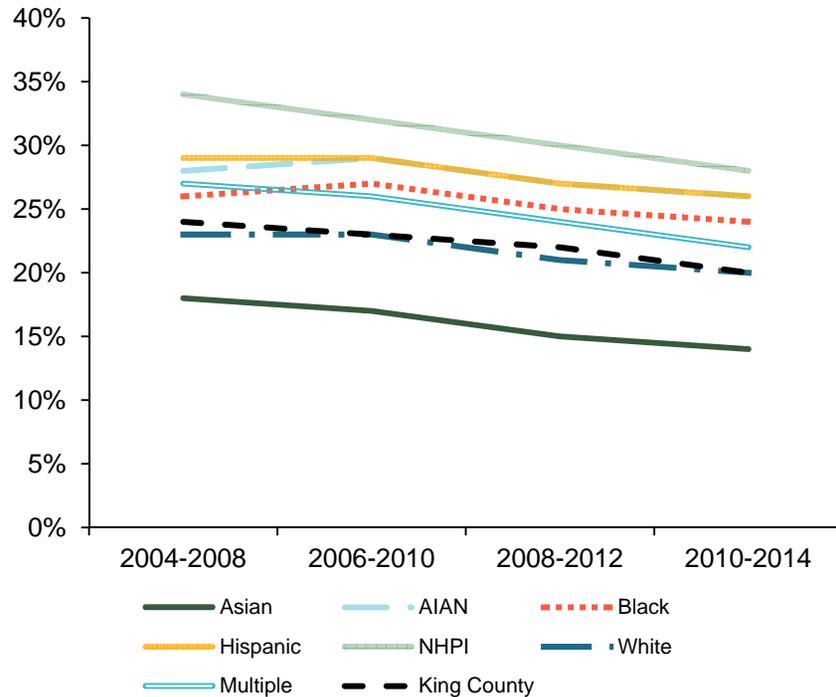
Impaired Driving by SES,
King County 2012-2014 Average



- As students get older, they are more likely to experience impaired driving—students in 12th grade were **1.4 times more likely** than students in 8th grade to report an experience.
- Students of a lower SES were up to **1.8 times more likely** to have an experience with impaired driving than students of a moderate or higher SES.

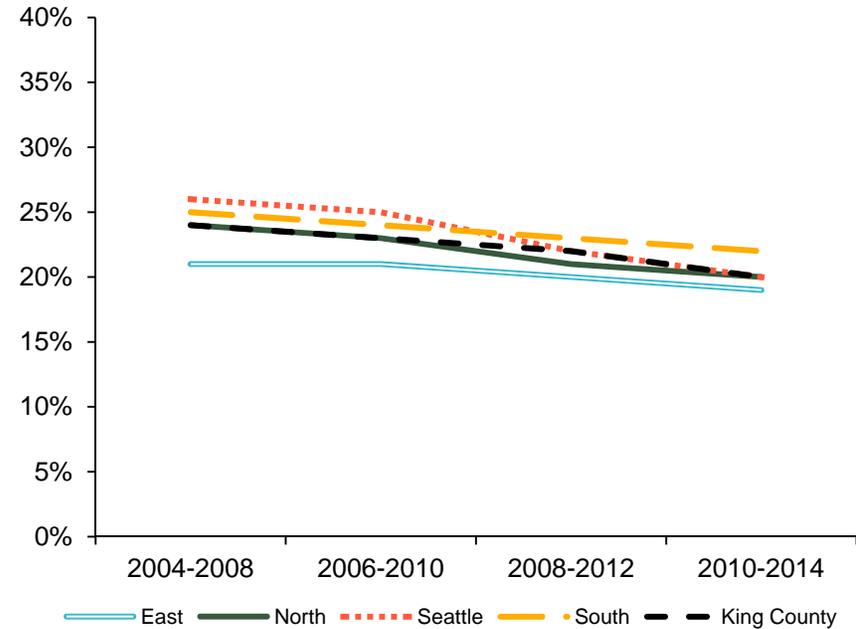
Experiences with impaired driving are declining

Impaired Driving by Race/Ethnicity, 3-Year Rolling Averages, King County 2004-2014



- The percent of students reporting an experience with impaired driving decreased significantly for all race/ethnicity groups except black and AIAN students.

Impaired Driving by Region, 3-Year Rolling Averages, King County 2004-2014



- The percent also decreased significantly across all King County regions, with the largest decrease in the Seattle region.

What can we learn?

- The patterns of impaired driving are similar to those of illicit substance use.
 - More prevalent at older ages, among lower SES populations, and significant racial/ethnic disparities.
- Students are having fewer experiences with impaired driving than they did in the past.

Depressive feelings

What are depressive feelings?

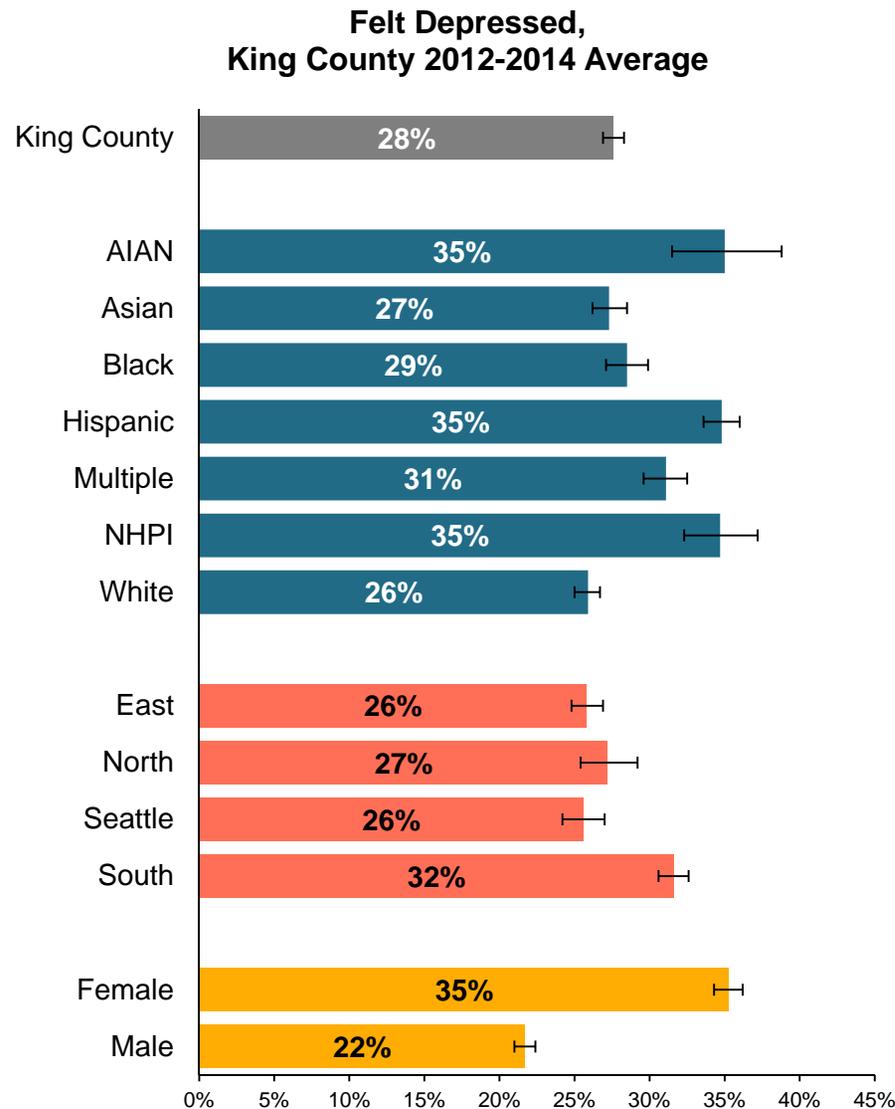
If someone has depressive feelings, s/he feels so sad or hopeless almost every day for at least two weeks that s/he cannot do some usual activities.



Why are they important?

Depression is one of the most common mental disorders. In 2014, it affected 11.4% of adolescents (age 12-17) and 9.3% of young adults (age 18-25) in the United States. More girls experience depression than boys.

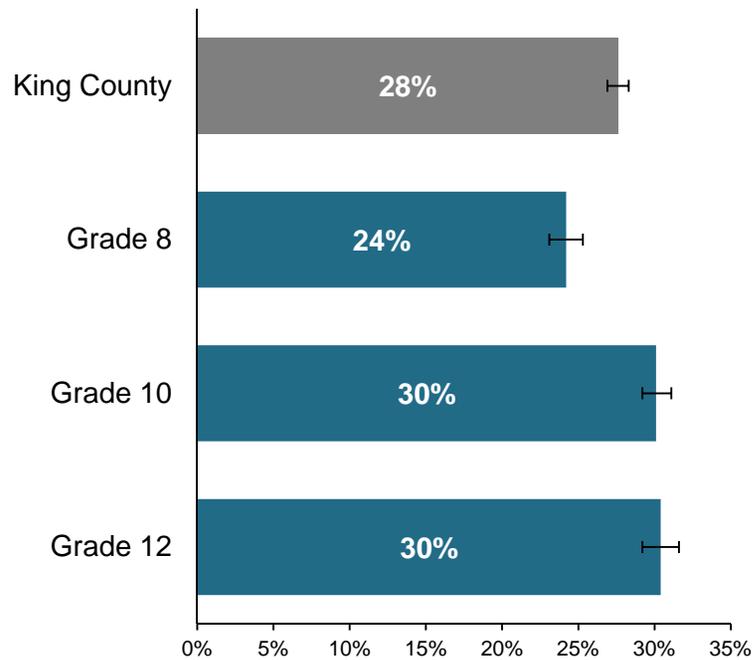
A large percent of students report depressive feelings



- Over one-quarter of King County students reported having depressive feelings in the past year.
- NHPI, black and Hispanic students were **1.3 times more likely** than white students, the group with the lowest percent, to have had depressive feelings.
- Students in the South region of King County were **20% more likely** to have had depressive feelings than students in any other region.
- Girls were **1.6 times more likely** to have had depressive feelings than boys, which is expected as depression disproportionately affects females⁴.

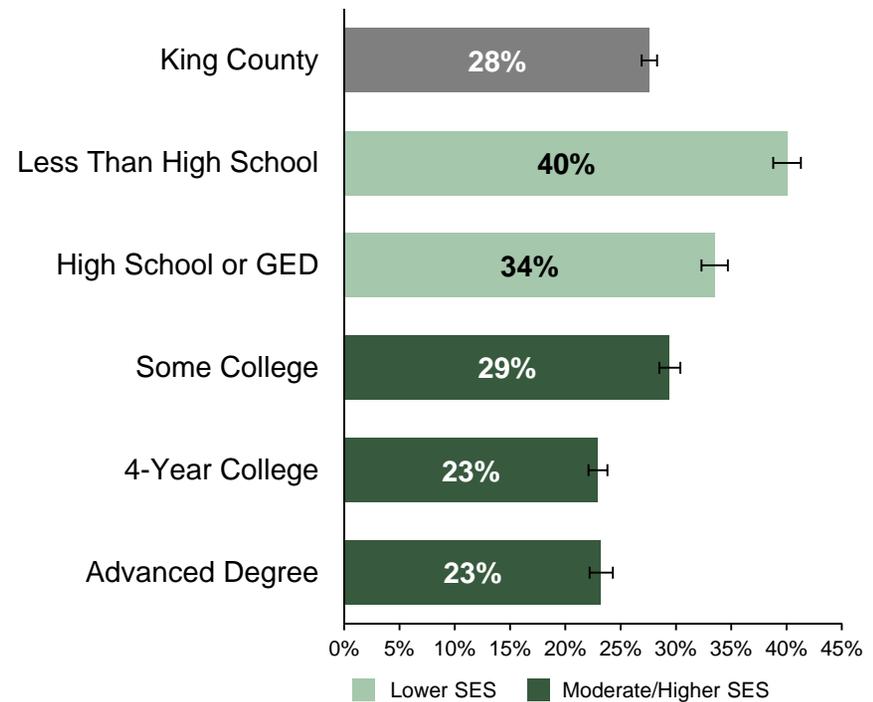
Experiencing depressive feelings differs by both age & SES

Felt Depressed by Grade,
King County 2012-2014 Average



- Students in 10th and 12th grades were **1.3 times more likely** to have had depressive feelings than students in 8th grade.

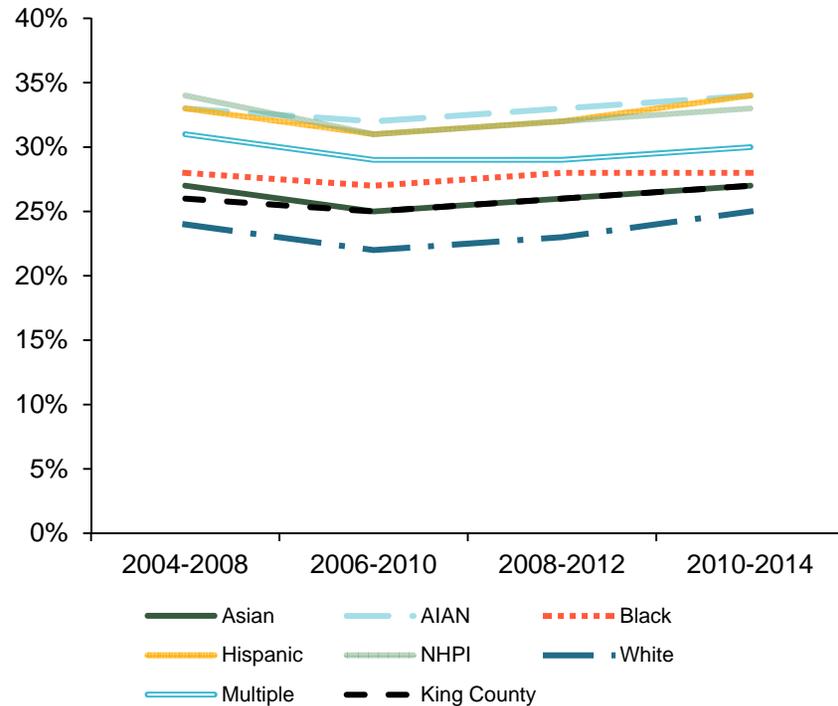
Felt Depressed by SES,
King County 2012-2014 Average



- Students of a lower SES were up to **1.7 times more likely** to have had depressive feelings than students of a moderate or higher SES.

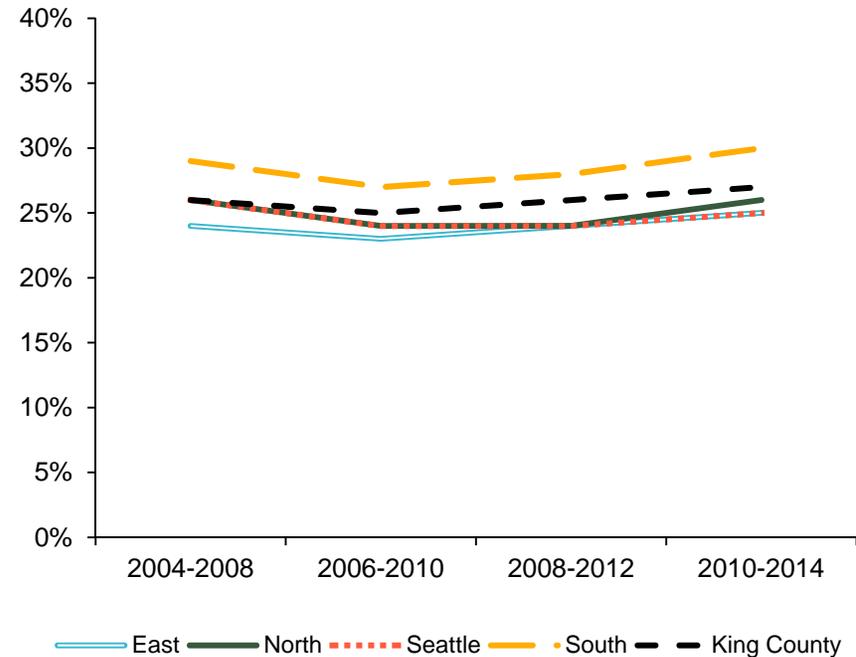
The percent of students feeling depressed has remained constant

Felt Depressed by Race/Ethnicity, 3-Year Rolling Averages, King County 2004-2014



- Overall, the percent of students reporting depressive feelings did not significantly change over time.

Felt Depressed by Region, 3-Year Rolling Averages, King County 2004-2014



- The percent of students of color and students in the South region was higher than the county average between 2004 and 2014.

What can we learn?

- Intervention activities should consider that depressive feelings are higher among people of color, lower SES populations, and girls.
- Further investigation is necessary to determine if prevalence of mental health issues is increasing, and if so, why that increase is occurring.

Suicide

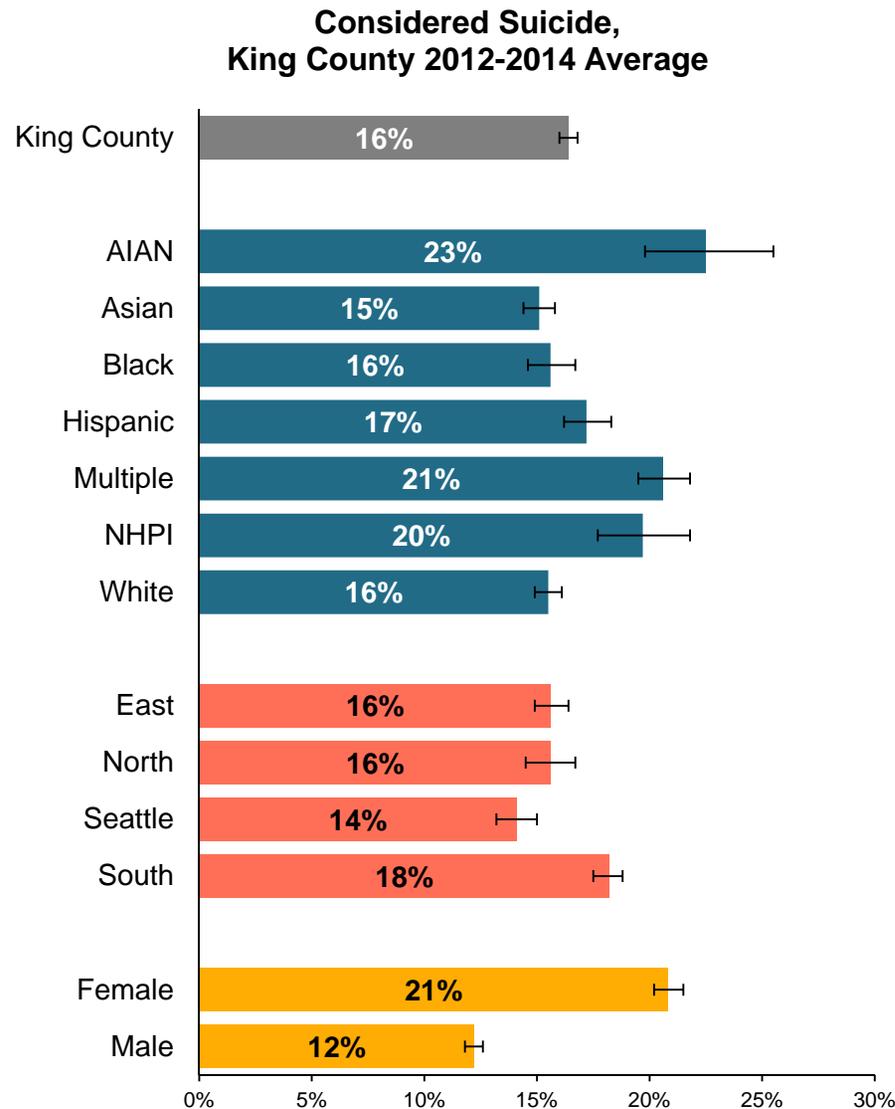
Suicide is one of the leading causes of death among children and youth, and about 17% of students in 9th through 12th grade report having considered suicide in the past year.

Suicide is a higher leading cause of death for males than females, but females are more likely to have considered suicide. Additionally, there are significant differences between race/ethnicity groups.

Because this significant health issue does not affect everyone the same way, it is important to understand who is most affected so that prevention efforts can be more effective.



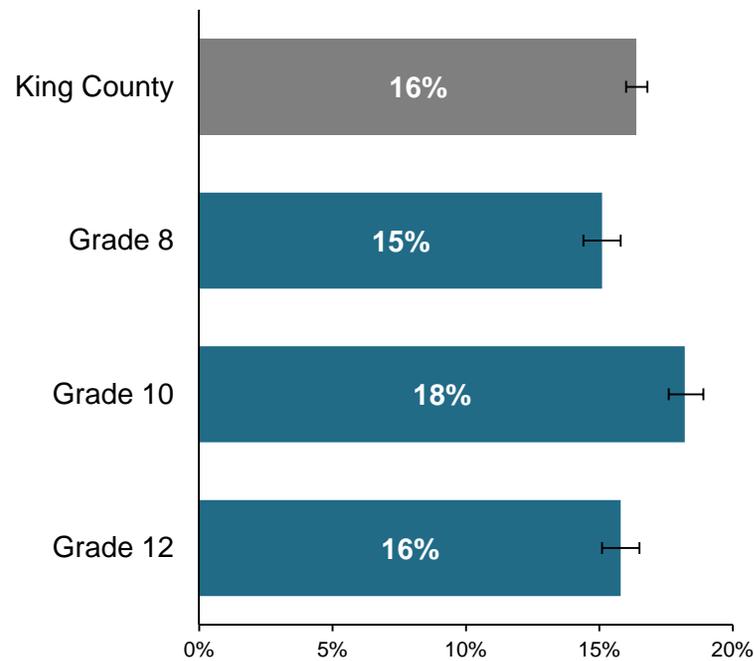
The percent that consider suicide varies by race/ethnicity



- AIAN students were **1.5 times more likely** to have considered suicide in the past year than Asian students, the group with the lowest percent.
- Students in the South region of King County were **1.3 times more likely** to have considered suicide than Seattle students, the group least likely to have suicidal thoughts.
- Girls were **1.8 times more likely** to have considered suicide than boys.

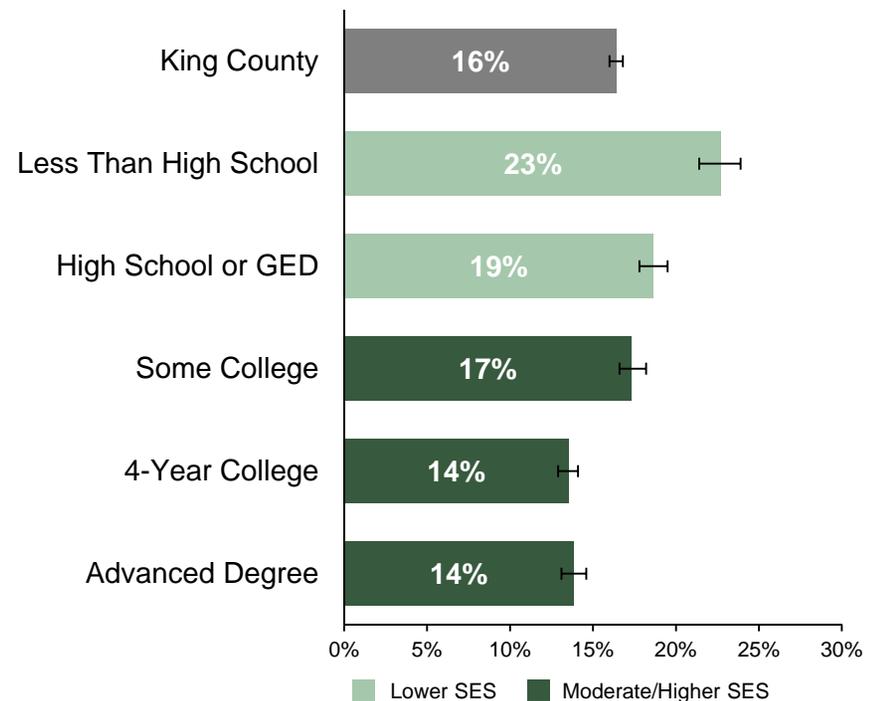
Students' SES affects consideration of suicide, but age does not

Considered Suicide by Grade,
King County 2012-2014 Average



- The percent of students who considered suicide was similar across all ages, although it was slightly higher among 10th graders.

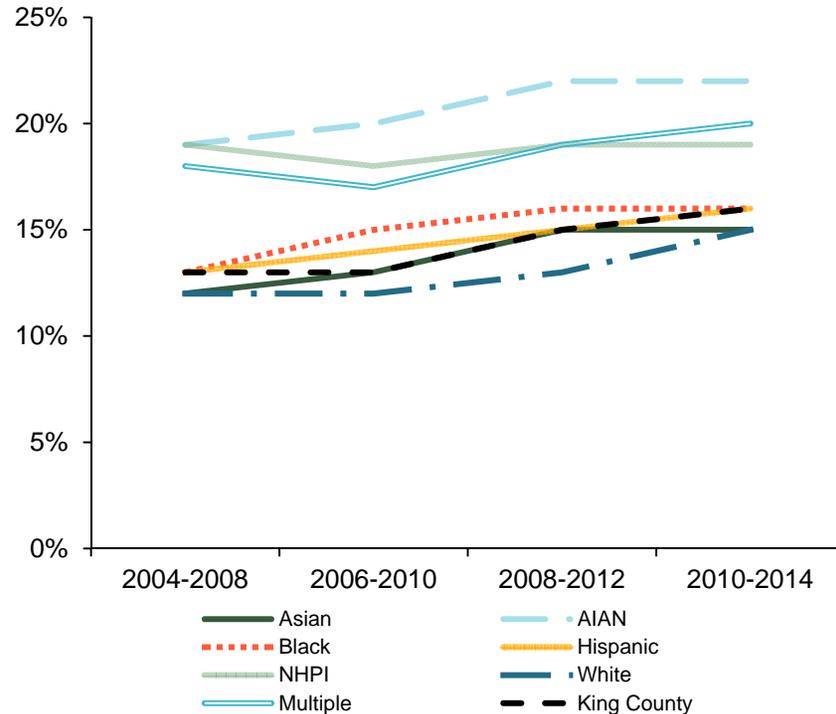
Considered Suicide by SES,
King County 2012-2014 Average



- Students of a lower SES were up to **1.6 times more likely** to have considered suicide than students of a moderate or higher SES.

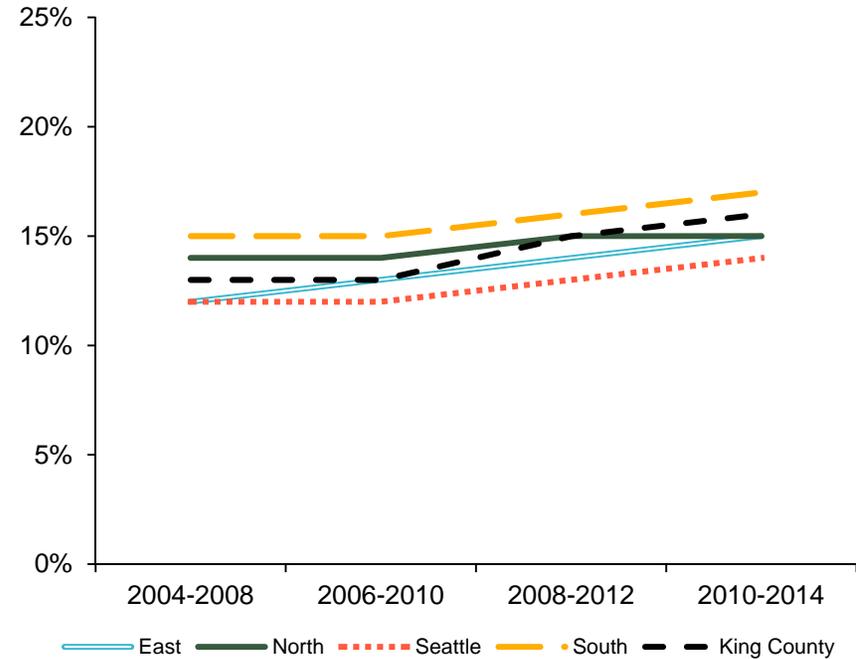
The percent of students considering suicide has increased

Considered Suicide by Race/Ethnicity, 3-Year Rolling Averages, King County 2004-2014



- The percent of students who considered suicide in the past year increased between 2004 and 2014 for all race/ethnicity groups except NHPI students.

Considered Suicide by Region, 3-Year Rolling Averages, King County 2004-2014



- The percent also increased for all King County regions.
- AIAN students had a substantially higher percent than other race/ethnicity groups across all years.

What can we learn?

- It is critical to investigate why the percent of students contemplating suicide has increased over time.
- Interventional activities should consider subgroup differences in order to target interventions equitably, keeping in mind that each group may have unique reasons for high percentages or changes over time.
- Further investigation is necessary to see how intersectionality (e.g., belonging to more than one high-risk group) affects the prevalence of an outcome.

Future goals

Encouraging adolescents to make goals and evaluate their experiences is an important part of fostering their social-emotional development.



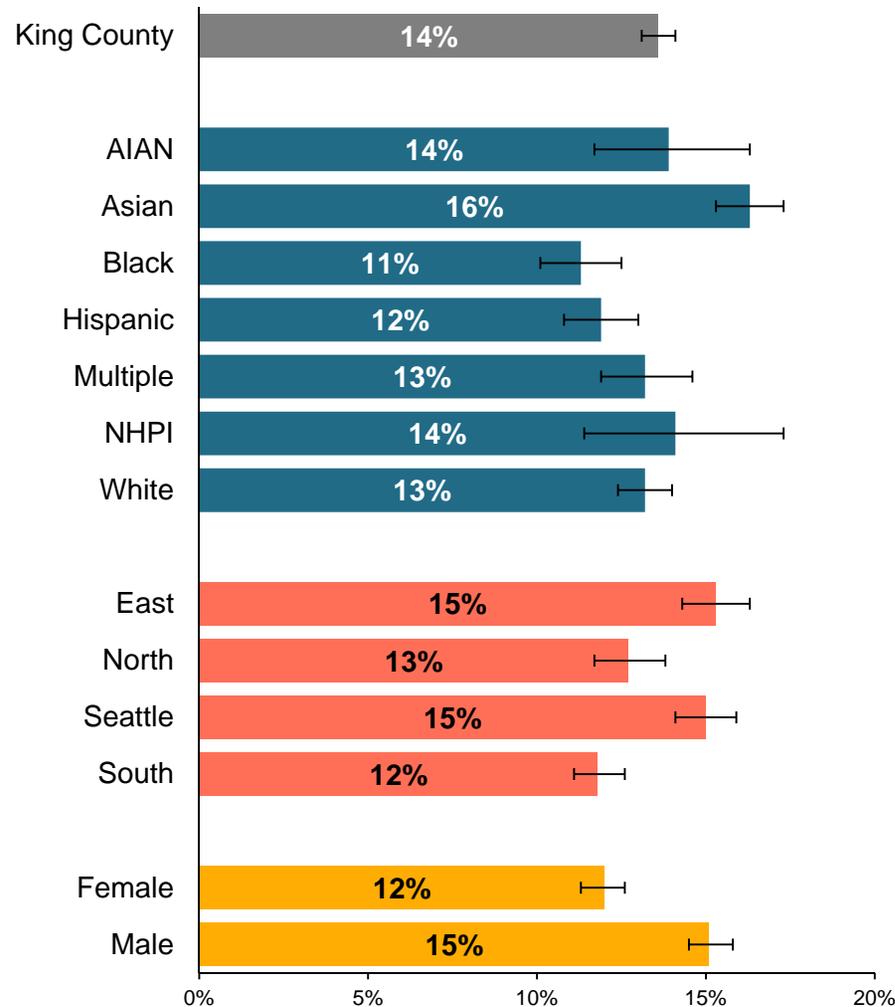
Goal-setting and self-evaluation increase students' motivation and are associated with better academic performance.

By measuring the percent of students with future goals, we can determine how well we are helping youth grow up to be confident and successful.



Only a small percent of 6th graders have goals & plans for the future

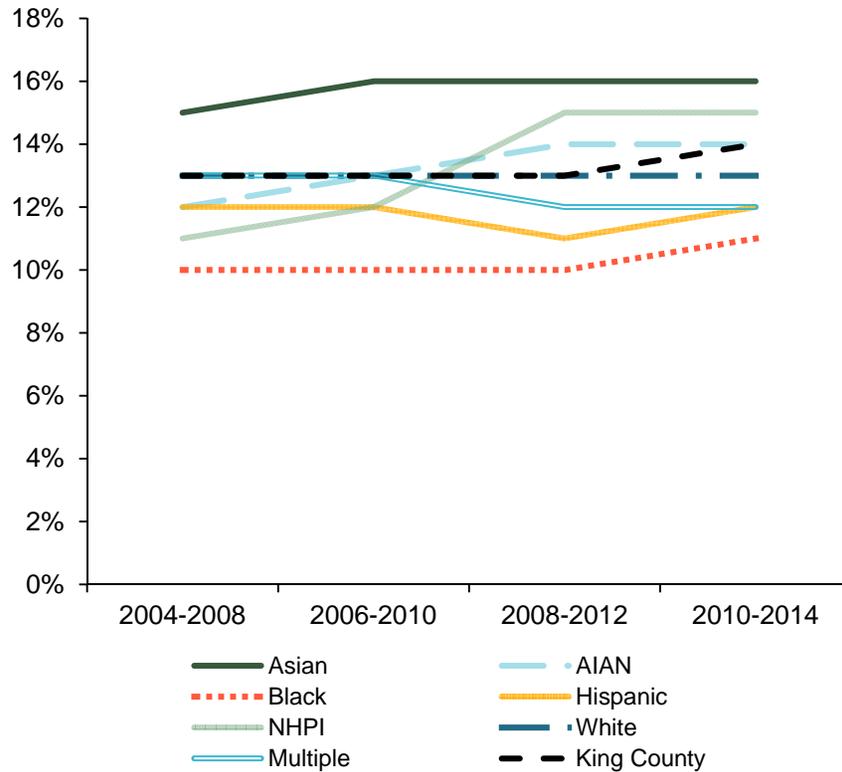
Have Goals & Plans for the Future,
King County 2012-2014



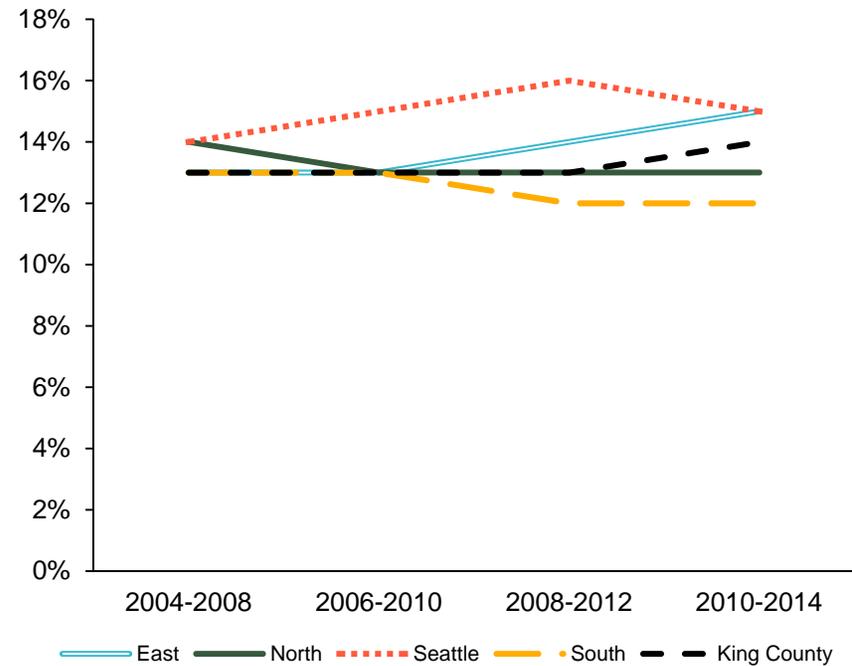
- Asian students were **1.5 times more likely** to have goals and plans than the group with the lowest percent.
- Students in the Seattle and East regions were **25% more likely** to have goals and plans than students in the South region.
- Boys were **25% more likely** to report having goals and plans than girls.

The percent of students with goals & plans has not changed

Future Goals by Race/Ethnicity,
3-Year Rolling Averages, King County 2004-2014



Have Goals & Plans for the Future, 3-Year Rolling
Averages, King County 2004-2014



- Overall, there was no significant difference in percent of students with goals and plans between 2004 and 2014.

- The percent of NHPI students and students in the Seattle region with goals and plans increased significantly over time.

What can we learn?

- There is clear opportunity to build students' confidence about their future and help them develop goals.
- We need more information about students' emotional development and mental health for all ages.

COMMUNITY & SAFETY

Family connection & parental involvement

Being connected to family and having parental involvement are important influences on the health of children and youth. One way to increase these influences is having dinner together as a family.

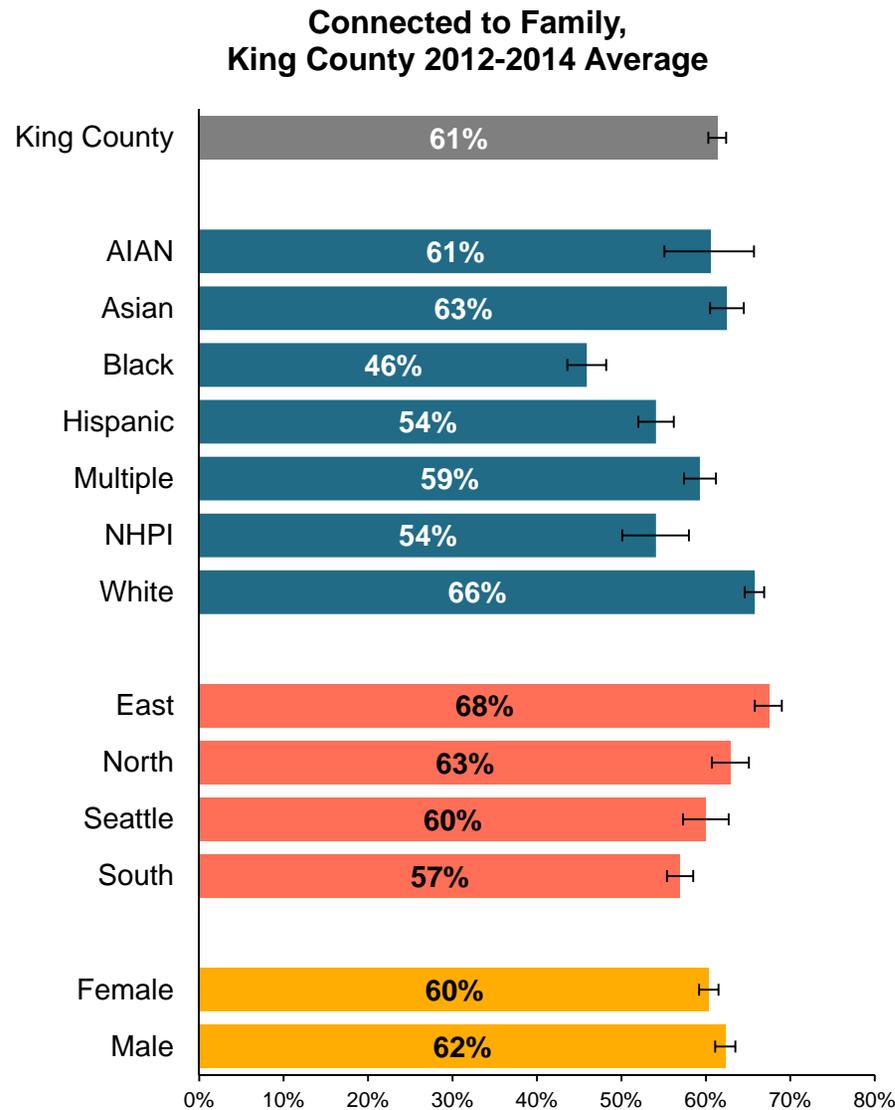


Children and youth who regularly eat dinner with their families are less likely to have mental health issues, use harmful substances, and be obese. They are more likely to have better nutrition, academic performance, and confidence.



Here, children and youth who reported eating dinner with family either "always" or "most of the time" were considered to be connected to family.

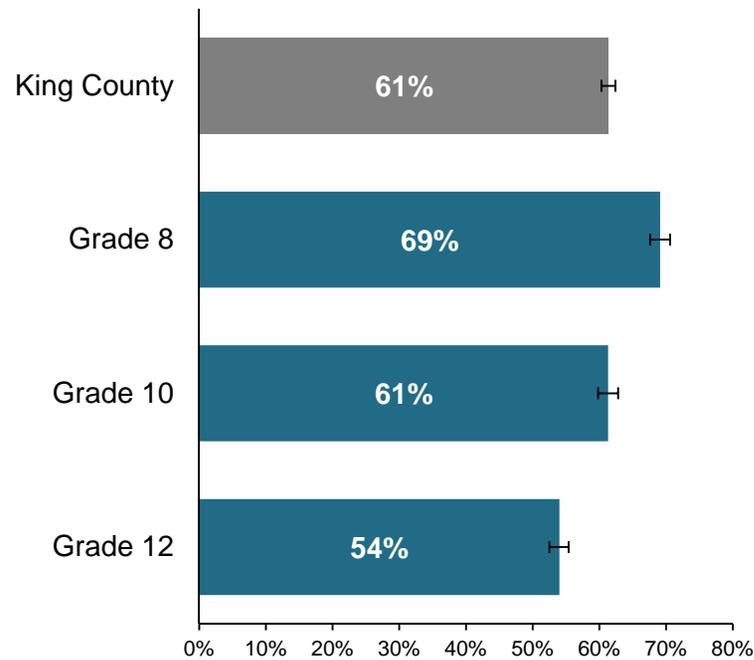
Connection to family differs by race/ethnicity



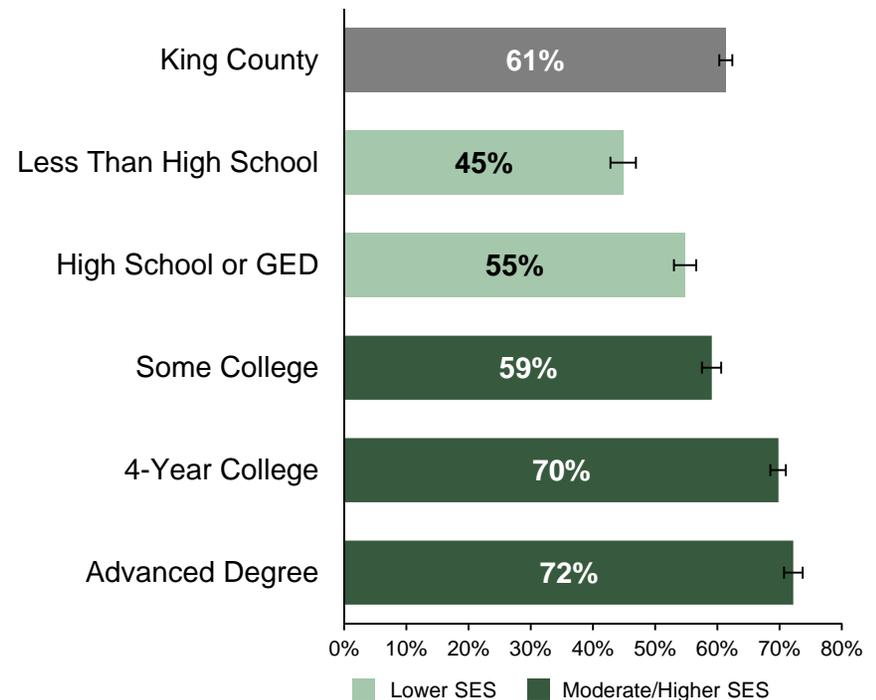
- Black students were **24% less likely** to report frequent family connection than white students, the group with the highest percent.
- Students in the East region of King County were **1.2 times more likely** to report frequent family connection than students in the South region.
- Girls and boys had similar connections to family.

Students' connectedness to family varies by both age & SES

Connected to Family by Grade,
King County 2012-2014 Average



Connected to Family by SES,
King County 2012-2014 Average

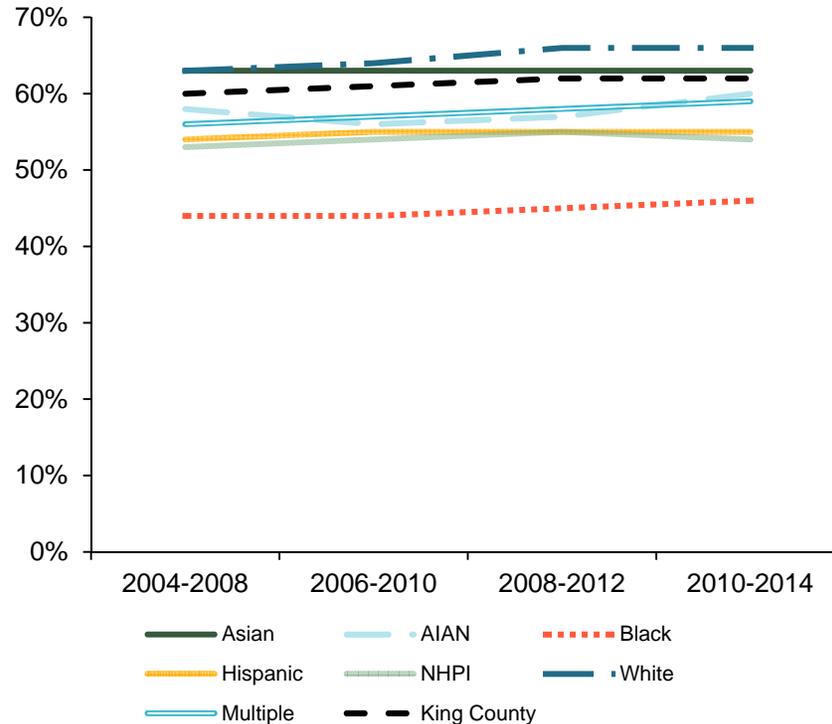


- Students in 6th grade were **1.4 times more likely** than students in 12th grade to report being connected to their family.

- Students of a moderate or higher SES were up to **1.6 times more likely** to report being connected to family than students of a lower SES.

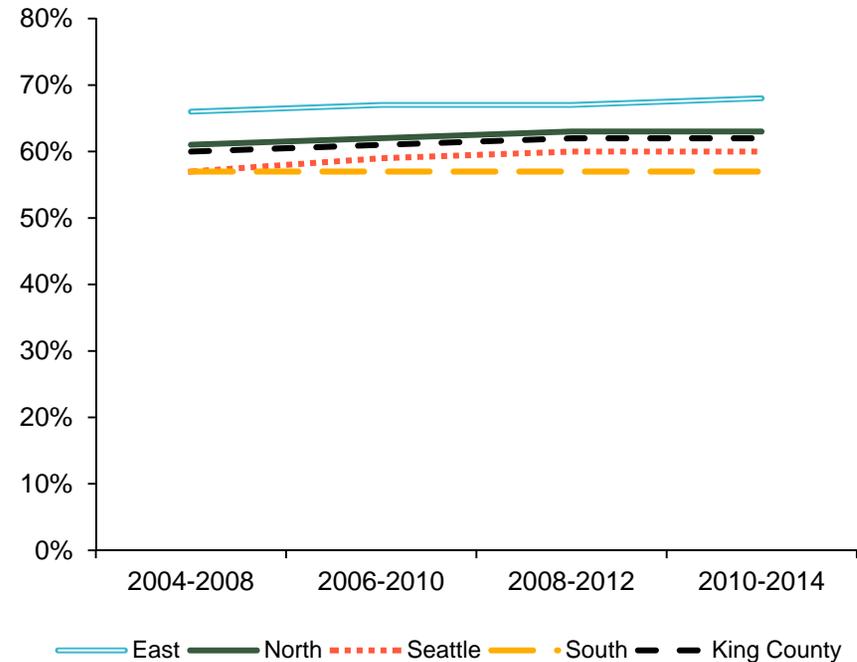
Connection to family has remained constant over time

Connected to Family by Race/Ethnicity, 3-Year Rolling Averages, King County 2004-2014



- Overall, the percent of students reporting frequent family connection has remained constant over time.
- White students and students of multiple race/ethnicity groups did experience a moderate increase in percent over time.

Connected to Family by Region, 3-Year Rolling Averages, King County 2004-2014



- Black students and students in the South region consistently had the lowest percentages between 2004 and 2014.

What can we learn?

- When planning intervention activities, it is necessary to consider what social and economic factors lead to the significant disparities between race/ethnicity groups, regions, and SES populations.
- By improving the relationships between youth and their families, there is opportunity to improve other indicators like nutrition, mental health, or illicit substance use at the same time.

Adult Support

What is considered adult support?

Adult support takes many forms, from academic advice to a shoulder to cry on. Parents, relatives, family friends, coaches, teachers, religious leaders, and others can all provide advice and assistance to children and youth.

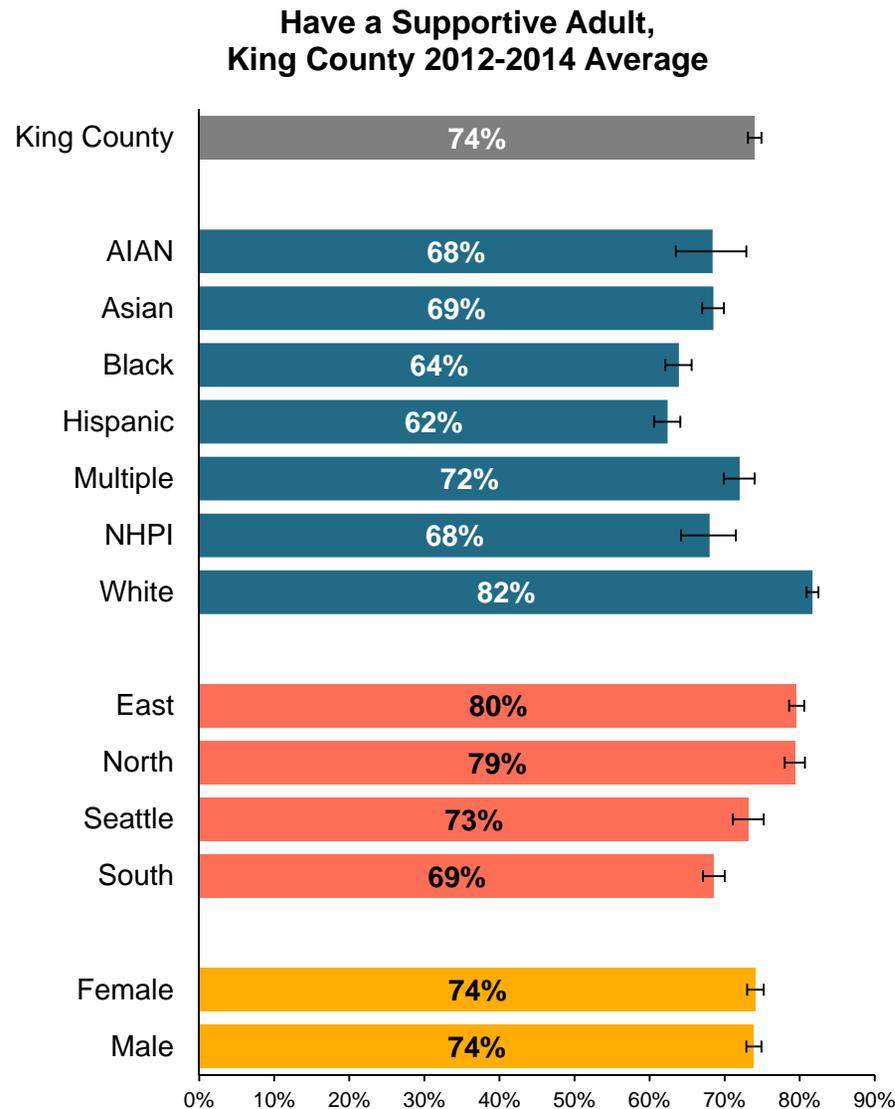
Here, students who said they had an adult in their neighborhood to talk to about something important were considered to have adult support.



Why is it important?

There is evidence that having a supportive adult in the community promotes positive behaviors and improves mental health. Understanding where these connections are lacking lets us help support those who need it most.

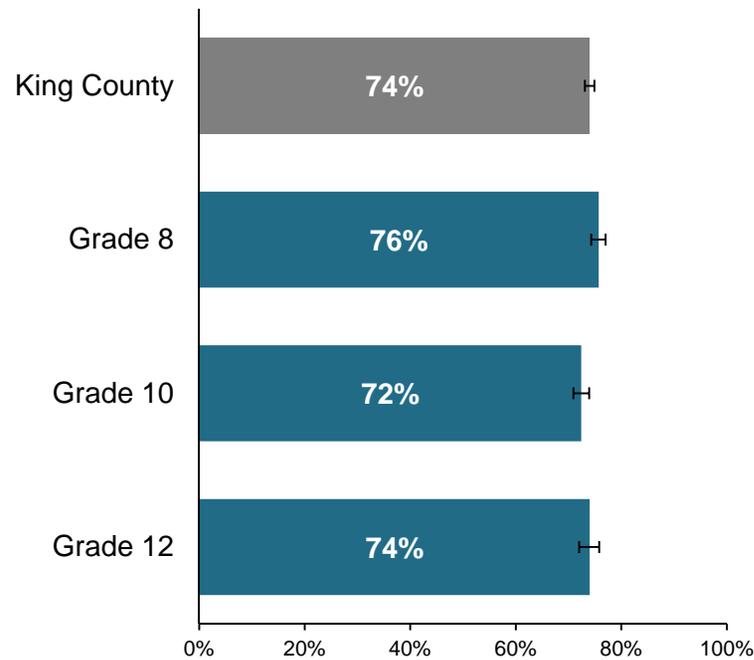
The majority of students have a supportive adult in their community



- Compared to white students, the group with the highest percent...
 - Hispanic students were **24% less likely** to report having a supportive adult in the community.
 - Black students were **22% less likely** to report having a supportive adult in the community.
- Students in the East region of King County were **1.2 times more likely** to report having support than students in the South region.
- Girls and boys reported having the same access to adult support.

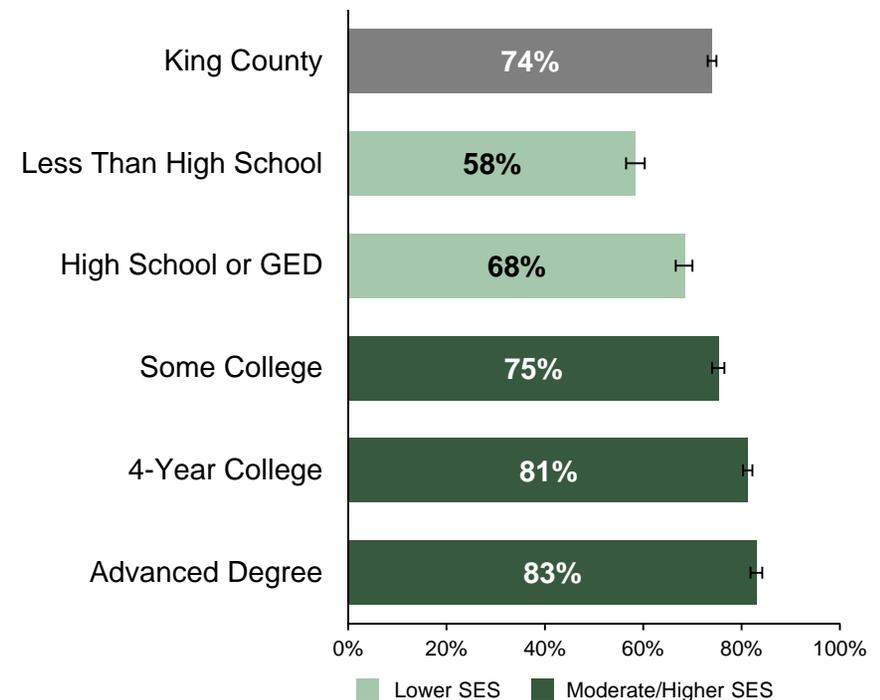
Students' SES affects having a supportive adult, but age does not

Have a Supportive Adult by Grade,
King County 2012-2014 Average



- There was no substantial difference in percent reporting having a supportive adult by age.

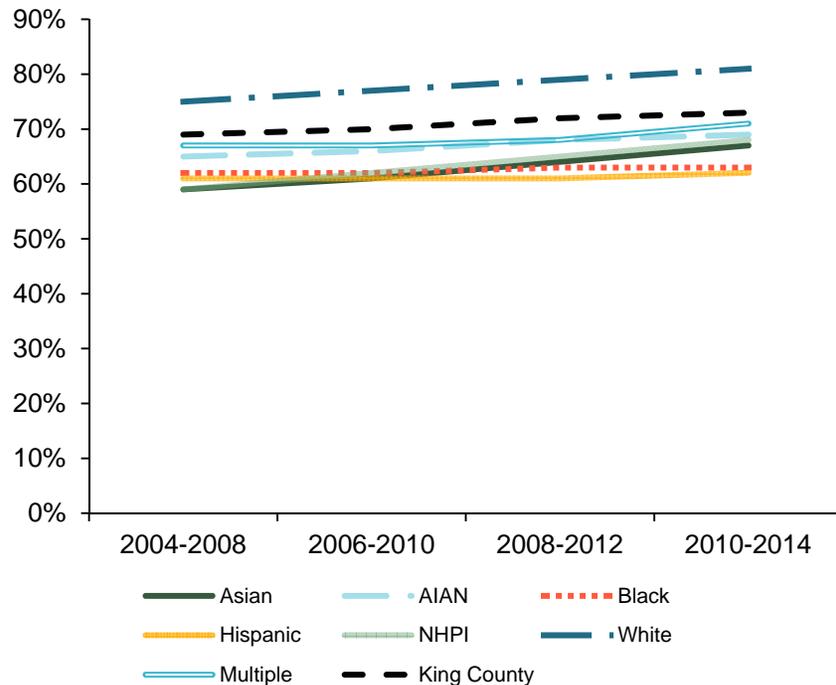
Have a Supportive Adult by SES,
King County 2012-2014 Average



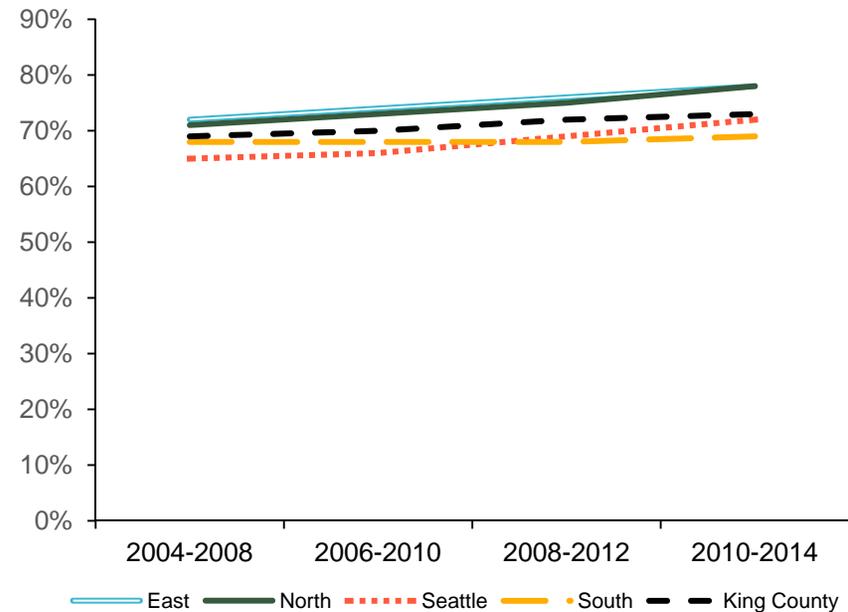
- Students of a moderate or higher SES were up to **1.4 times more likely** to have a supportive adult than students of a lower SES.

More students have a supportive adult than in the past

Have a Supportive Adult by Race/Ethnicity,
3-Year Rolling Averages, King County 2004-2014



Have a Supportive Adult by Region, 3-Year
Rolling Averages, King County 2004-2014



- Although the percent of students with a supportive adult increased in King County as a whole, this increase was not significant for Hispanic, black, or NHPI students or for students in the South region.

- The percent of students of color and students in the Seattle and South regions consistently fell below the King County average.

What can we learn?

- Differences between race/ethnicity groups, regions, and SES populations suggest a need for equity-focused intervention.
- Future work should investigate why black, Hispanic, and NHPI students did not experience the same increase in percent as the rest of the student subgroups, as well as focus on eliminating these disparities.

Feeling safe at school

Feeling safe at school is an important part of the learning process.

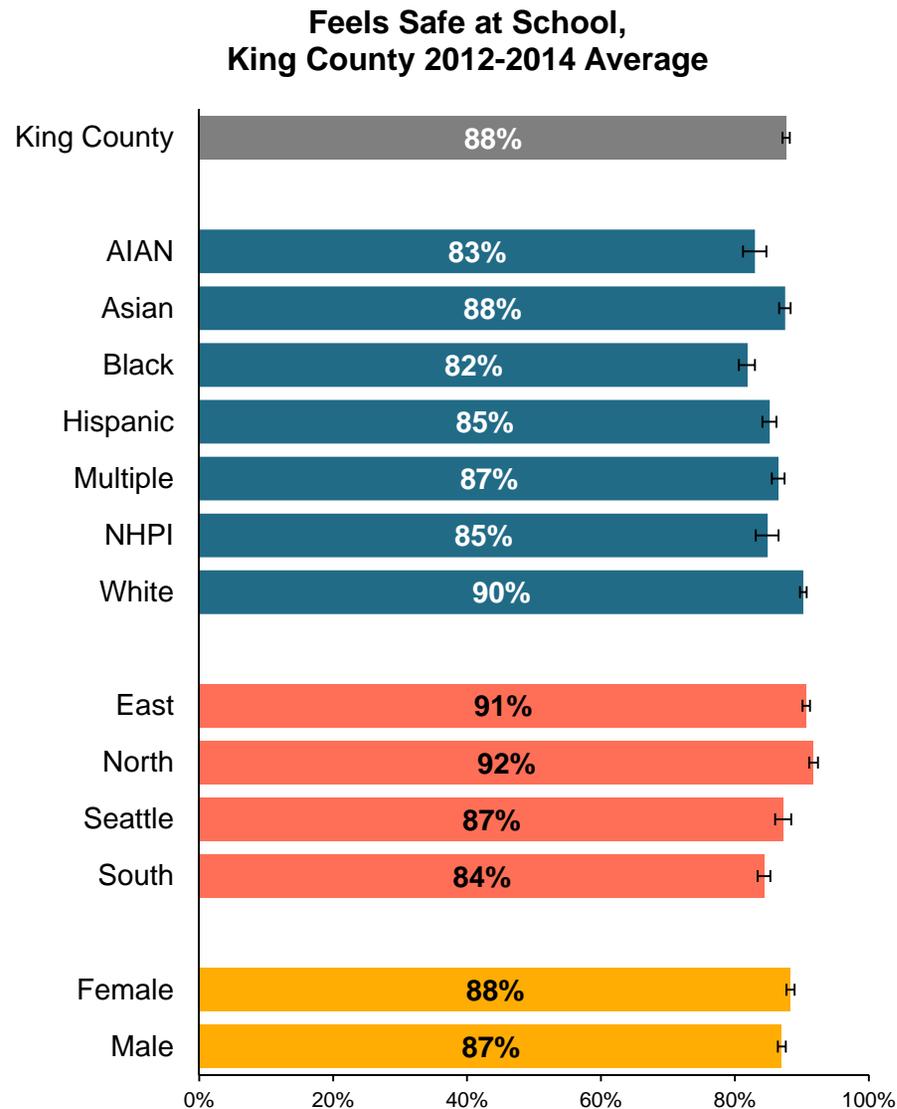


When students don't feel safe, they have a hard time learning, growing, and developing.

Ensuring that every student feels safe at school helps improve both education and health outcomes.



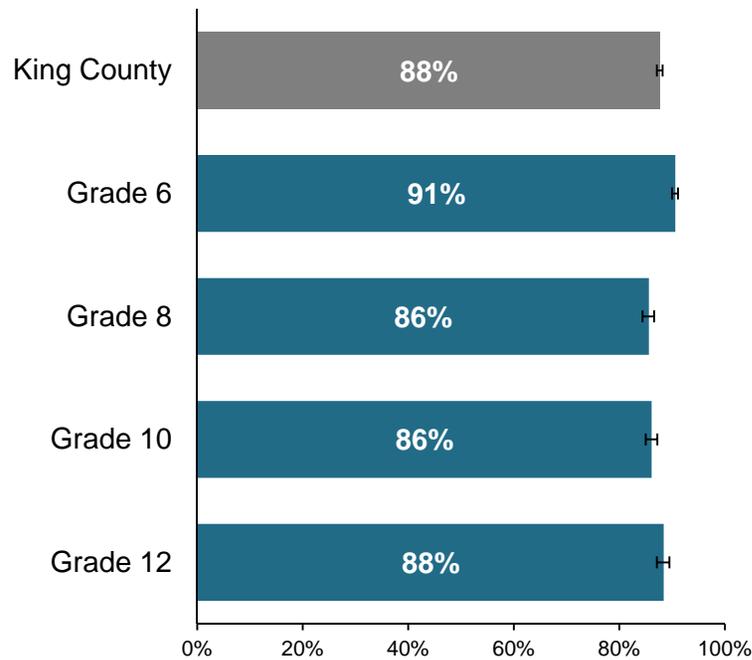
Most King County students feel safe at school



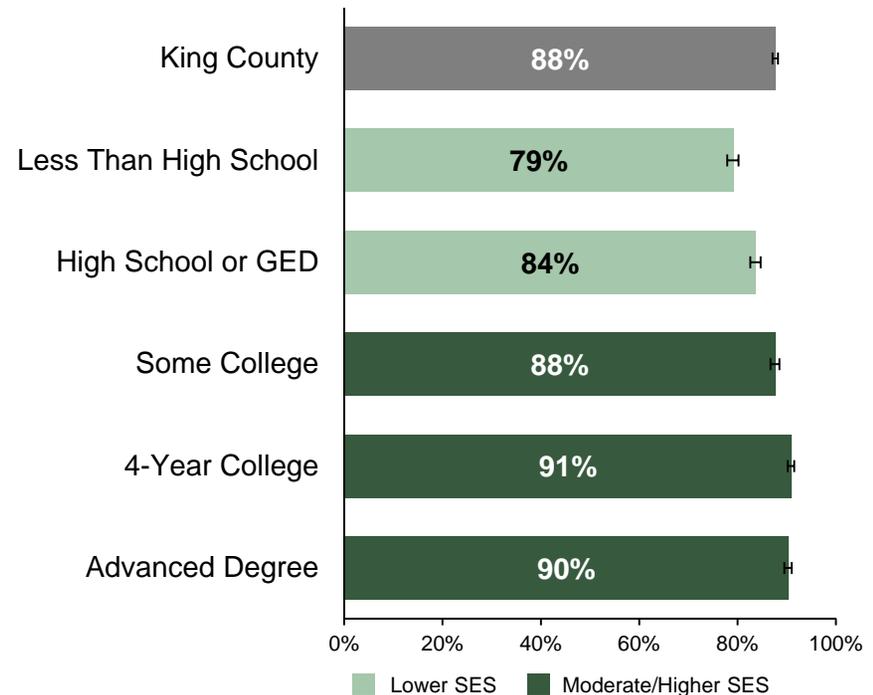
- The percent of students that feel safe at school does not substantially differ across subgroups, but important differences still appear.
- Percentages are slightly lower for students of color.
- Percentages were slightly higher in the East and North regions of King County than in the South and Seattle regions.
- Girls and boys had very similar percentages that felt safe at school.

Both age & SES affect how safe students feel at school

Feels Safe at School by Grade,
King County 2012-2014 Average



Feels Safe at School by SES,
King County 2012-2014 Average

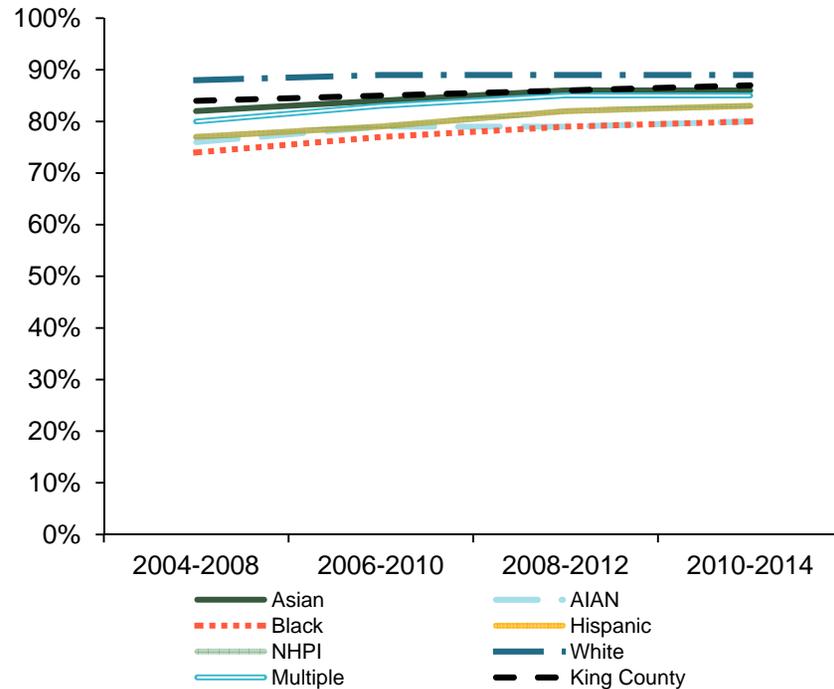


- Although there was no substantial difference by age, 6th graders were slightly more likely to feel safe than 12th graders.

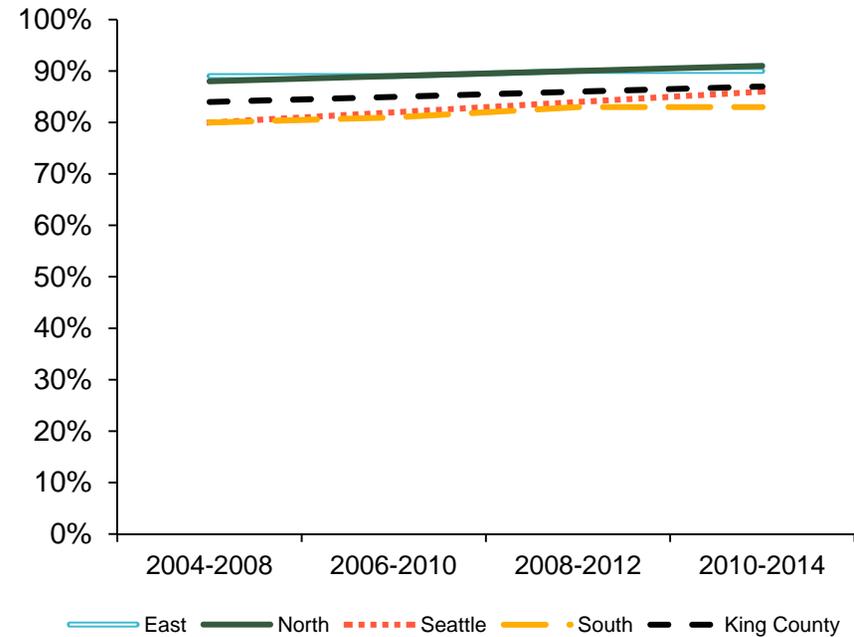
- Students at a lower SES were less likely to feel safe at school than students at a moderate or higher SES.

Students have slowly started to feel more safe at school

Feels Safe at School by Race/Ethnicity, 3-Year Rolling Averages, King County 2004-2014



Feels Safe at School by Region, 3-Year Rolling Averages, King County 2004-2014



- Between 2004 and 2014, there was a slight increase in the percent of students that felt safe at school for all race/ethnicity and region subgroups.

- Students of color and students in the Seattle and South regions consistently below the county average percent over time.

What can we learn?

- Students typically feel safe in their schools.
- Schools and school districts should continue making efforts to promote safe school environments with a focus on equity.

Summary of key findings from the data profile

- Significant disparities exist between subgroups
 - People of color, students in the Seattle and South regions, and lower SES populations frequently experience more adverse health outcomes than other groups.
- Many health indicators show no change over time
 - No change can be good or bad – consistency is bad if there are high levels of an unhealthy indicator or disparities between subgroups remain constant.
- There are limitations to available data
 - The Best Starts for Kids Health Survey will help increase data for children younger than 6th grade.
 - BRFSS sample sizes are too small to effectively characterize the young adult population.

Strengths & limitations

- **Strengths**

- This report examines many different indicators to give a more holistic view of the health of children and youth. It can be used as a reference for the current state of health of children and youth in King County.
- The data show large differences between subgroups that are necessary to consider when planning future interventions and policy changes.

- **Limitations**

- Although there are a lot of data available for 6th through 12th graders, little data are currently available for children younger than 6th grade and for young adults age 18 to 24.
- Small sample sizes in the BRFSS data limited the ability to understand subgroup differences among young adults. Additionally, only four BRFSS variables overlapped with the HYS variables, limiting the ability to compare young adults and children.

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Survey methodology

- Behavioral Risk Factor Surveillance System (BRFSS)
 - Administered annually by phone (including cell phones)
 - 400,000+ respondents per year
 - All 50 states, District of Columbia, 3 territories
 - Ages 18+ with questions about household children
 - Core component with some rotating and test questions
 - Optional national modules, state-added questions

Survey methodology

- Washington State Healthy Youth Survey (HYS)
 - Administered every two years in schools to 6th through 12th graders across Washington State
 - Voluntary participation, but large sample sizes
 - In 2014, over 100,000 King County respondents
 - Three different forms
 - Two longer forms for 8th through 12th grade students
 - One short form for 6th grade students
 - Same core questions, but different additional questions
- Allows tracking of cohorts over time

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