Too many NH kids are not alright. Within the past six months, the American Psychological Association, the American Academy of Pediatrics, and the US Surgeon General have all declared that our youth are facing a mental health emergency. We see this here in New Hampshire in increased numbers of youth boarding in emergency departments awaiting an inpatient bed while experiencing a mental health crisis. We see this in the increased numbers of youth seeking assistance from community-based mental health providers and finding themselves facing months’ long waits for initial appointments. We see this with the numbers of youth reporting increased anxiety, depression, and thoughts of self-harm. Suicide is the second leading cause of death for Granite State youth and young adults ages 10 – 34.

Despite the mental health crisis our youth are experiencing, on March 16th, the NH House approved HB 1639, relative to the Youth Risk Behavior Survey (YRBS), heedless to the concerns of educators, students, parents, mental health providers, prevention specialists, and child advocates. The bill, now before the Senate Education Committee, would have a dramatic impact by changing the YRBS to an opt-in versus an opt-out survey. If passed, the onus will then be upon parents to ensure their children participate in this critical survey – at a time when parental stressors and demands are skyrocketing. Making the YRBS an opt-in survey may very well reduce the number of responses to the point where the data will become statistically insignificant. This would likely impact New Hampshire’s ability to leverage much-needed federal dollars and obscure the needs of our children.

A majority of New Hampshire’s public high schools have been offering the YRBS on a biennial basis since 2003. The information yielded by the YRBS provides critical insight into the inner lives and thoughts of our young people and offers especially significant data around issues like violence in the home, sexual abuse and assault, drug and alcohol use, experiences of depression, anxiety, and other mental health challenges, and, perhaps most importantly, incidence of suicidal thoughts and suicide attempts by young people.

YRBS data played a crucial role in leveraging NH’s current 5-year, $3.6 M, federal Garett Lee Smith State/Tribal Youth Suicide Prevention and Early Intervention grant from the Substance Abuse and Mental Health Services Administration (SAMHSA). As the state’s designated applicant for these funds, NAMI New Hampshire used YRBS data to demonstrate both the need for these funds in our State, and to inform the project activities and scope to address the needs of youth who are most at risk. The bulk of these funds support grant activities through community mental health centers, school districts, community colleges, regional public health networks, and other providers to ensure a robust approach to our youth at risk of suicide.
HB 1639, if passed into law, would obscure the issues our young people are facing just when they most need us to be there and offer evidence-based supports and treatments to help them navigate this crisis. The passage of this bill would have a significant impact for a generation of young people already struggling with the effects of the pandemic and will leave us unable to appropriately address the needs of our most vulnerable youth.

NAMI New Hampshire urges all Granite Staters to contact their State Senators and ask them to vote HB 1639 “Inexpedient to Legislate.” Our youth cannot afford for us to look away and ignore the challenges and pain they are facing. As adults, we have a responsibility to use every tool at our disposal, especially a proven and valid survey like the YRBS, to create responses and interventions that will mitigate risk and save young lives. For the sake of our children, we must prevent this bill from becoming law, and focus on using the data our young folks provide to us through the YRBS to create positive outcomes so that all our kids can be alright.

*Susan L. Stearns is a parent who has sat vigil in an ICU after her child attempted suicide; she is also the Executive Director of NAMI New Hampshire.*