

*My heart cares and shows respect.

PUBLIC SCHOOLS of
BROOKLINE

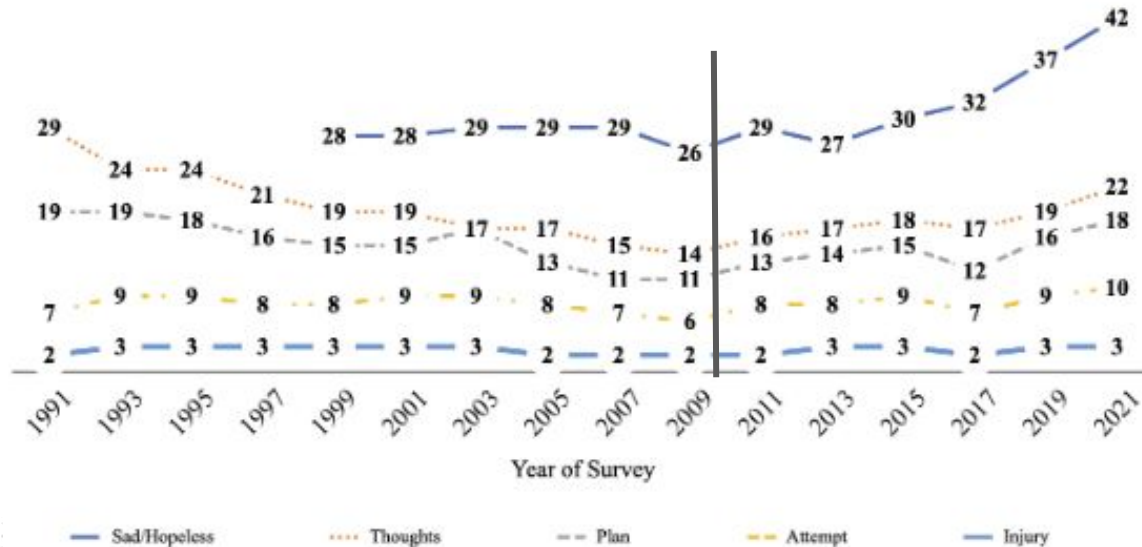


Brookline Youth Health Survey: Summary, Trends, and Next Steps

Fall 2025

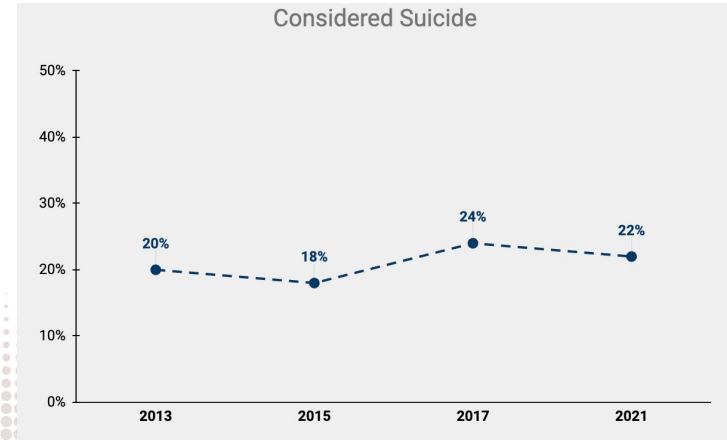
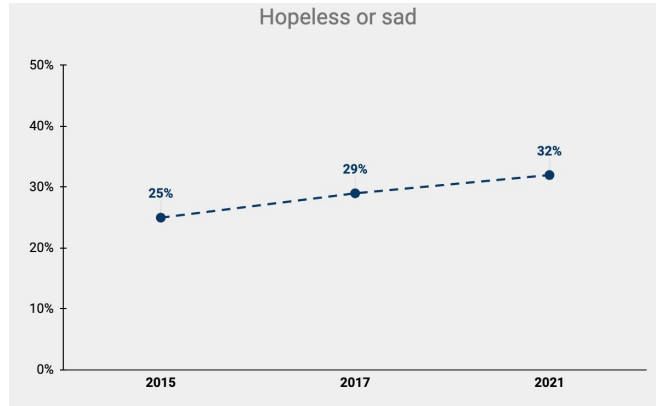
National Context: The Youth Mental Health

- Significant declines in youth and adolescent mental health started in 2011.
- 1 in 5 children and adolescents met criteria for a mental health diagnosis.
- Pediatric emergency visits for mental health reasons doubled from 2011 to 2020.
 - Suicide-related visits increased fivefold [Mayo Clinic News Network](#)
 - Suicide is a leading cause of death among people aged 10 to 19.



Local Context: The Youth Mental Health Crisis

- Fall 2020
 - 43% of students endorsed strong school belonging
 - 53% endorsed strong emotional regulation skills
 - 54% of students reported having a safe adult at school
 - 25% almost always or frequently worried



Attendance Trends

- Chronic Absenteeism = Missing 10% or more of school days enrolled
 - 2016-2017 = 7.4%
 - 2017-2018 = 7.8%
 - 2018-2019 = 8.1%
 - 2019-2020 = 9.3%
 - 2020-2021 = 5.9%* (Hybrid)
 - 2021-2022 = 15.1% (3.2% were 20% or more)

Student Attendance (2021-22) - End of Year						
Student Group	Attendance Rate	Average # of Absences	Absent 10 or more days	Chronically Absent (10% or more)	Chronically Absent (20% or more)	Unexcused > 9 days
All Students	94.0	10.5	40.3	15.1	3.2	16.1
American Indian or Alaska Native						
Asian	95.2	8.0	28.9	11.7	2.3	13.4
Black or African American	91.7	14.4	51.6	26.5	7.8	23.4
Hispanic or Latino	92.2	13.5	51.8	25.0	6.2	25.1
Multi-Race, Not Hispanic or Latino	94.0	10.5	39.0	13.7	3.8	15.5
Native Hawaiian or Other Pacific Islander						
White	94.2	10.2	41.2	13.1	2.3	14.4
High Needs	92.5	12.7	46.5	22.8	6.0	22.7
English Learners	92.9	10.9	44.5	22.1	4.2	24.0
Low Income	90.9	15.5	53.9	31.5	9.7	28.4
Students with Disabilities	91.6	15.0	52.4	26.0	7.8	25.5
Female	93.9	10.5	40.7	14.6	3.2	15.7
Male	94.0	10.3	40.0	15.5	3.2	16.5

Primary Drivers

1. Barriers to Accessing Mental Health Care

- a. Limited mental health professionals (particularly for children and under-served populations).
- b. Stigma
- c. Average latency between symptom presentation and care is 10 years

2. Pre-existing Decline Accelerated by COVID-19

- a. Reduced access to protective factors
- b. Increased/exacerbated stress
- c. Reduced access to experiences that teach and strengthen social-emotional skills

3. Social Media & Screen Overuse

- a. Heavy use (3+ hours/day) of social media doubles risk of anxiety/depression; disrupts sleep, relationships, self-esteem

PSB Response

Theory of Action: We will improve mental health outcomes for students if we

- **Increase access to protective factors (e.g., belonging, supportive relationships)**
 - Explicit focus on belonging and supportive relationships
- **Increase explicit instruction in social-emotional skills (prevention) and healthy coping**
 - Implement Second Step in PreK to 5 classrooms, review Health curricula and programming
- **Focus on suicide prevention in middle school and high school**
 - Implementation of SOS in 7th and 9th grade
- **Increase access to evidence-based, tiered, school-based mental health interventions**
 - Hiring 9 additional school social workers/adjustment counselors

PSB Response

Theory of Action: We will improve mental health outcomes for students if we

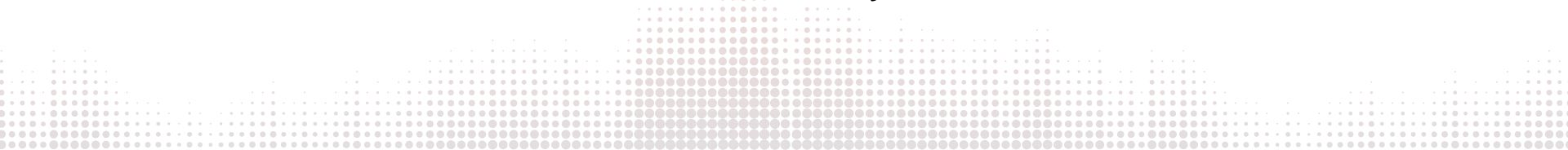
- **Increase access to community-based mental health care**
 - Establishing and re-establish relationships with community partners (e.g., Cartwheel, DPH, BPD, the Brookline center, InStride).
- **Enhance educator/adult wellness and capacity to support students with intensive mental health needs.**
 - Ongoing PD, monthly newsletters, PLCs focused on wellness.
- **Provide additional support and training to parents and guardians.**
 - Contract with Cartwheel, B-PEN partnership, Massachusetts Partnerships for Youth

Program Evaluation

As we implement programming, we **must** continuously evaluate (measure) the impact that it has on students.

- Repeated engagement in universal screening and surveying
- **Administration of the Brookline Youth Health Survey every other year**
- Continuous review of attendance data
- Review of special education referrals
- Impact of counseling on individual student outcomes

We must do more of what works, a none of what doesn't.

A decorative halftone pattern consisting of a grid of small dots, with the density of the dots increasing towards the bottom right corner of the slide.

Brookline Youth Health Survey (BYHS)

- The youth risk behavior survey (YRBS) was developed by the (CDC) to monitor behaviors that contribute to wellness and the leading causes of death, disease, injury, and social problems among youth.
 - DESE, in collaboration with the Centers for Disease Control and Prevention and the Massachusetts Department of Public Health (DPH), conducts the Massachusetts Youth Risk Behavior Survey (MYRBS) in randomly selected public middle and high schools in every odd-numbered year.
- The Brookline Youth Health Survey was developed by **PSB and DPH** and includes questions from the YRBS, as well as other questions that are tailored to the needs and goals of Brookline (e.g., additional questions regarding perceptions of substance use).

Brookline Youth Risk Survey (BYHS)

- In April 2025, a letter was sent to all PSB families who had a student in grades 6 to 12. This letter described the purpose of the BYHS, how it would be administered, access to the full list of questions, and opt-out information.
 - 65 total students (~ 2% of students eligible) were opted out of the survey by their guardians. **It is important to note that students also had the opportunity to opt out of the survey at the point of administration.**
- In April and May 2025, the BYHS was administered.
 - Students in grade 6 completed the survey during an advisory period or a core academic block, students in grades 7 and 8 completed the survey during a Health class, and students in grades 9 to 12 completed the survey during an Advisory period.

Demographics

- 2,418 PSB students in grades 6 to 12 participated in the MYRBS (2,271 in 2023)
 - In grades 6 to 8, at least 1,070 students completed the survey (71% participation rate)
 - In grades 9 to 12, at least 1,196 students completed the survey (57% participation rate).
 - Participation rate was similar to the 2023 administration.
 - **6th grade students at Lincoln and Pierce were randomly selected to participate in the Mass Youth Risk Behavior survey and did not participate in the BYHS.**
- Demographics of students who completed the survey were compared to all PSB students..
 - The race/ethnicity data provided by students who completed the survey was generally consistent with the race/ethnicity data of the full population of students who attend PSB.

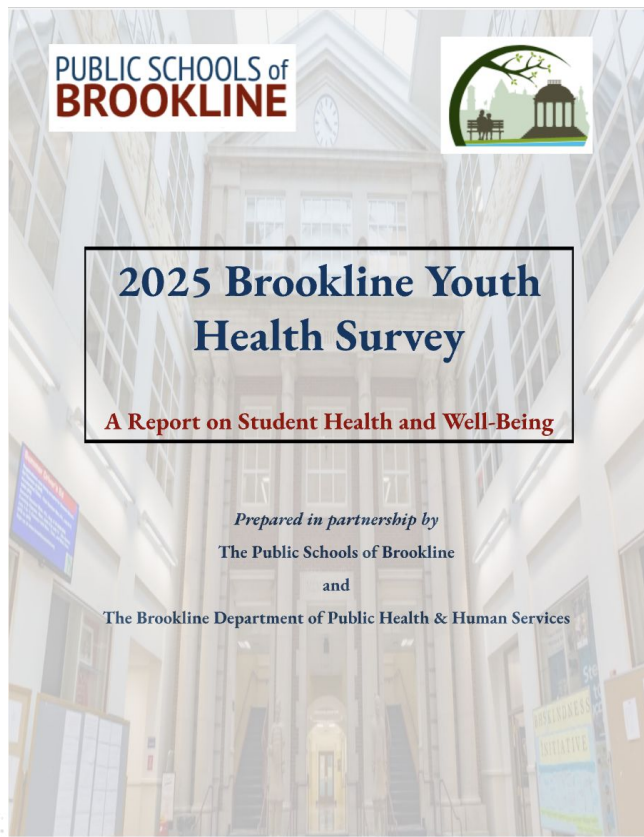
Race/Ethnicity	2023-2024 DESE ^a	2025 BYHS ^{b, c}
African American/Black	6.3%	8.7%
Asian	23.7%	26.7%
Hispanic/Latine	13.3%	12.9%
Multi-Race Non-Hispanic	11.1%	12.9%
Native Hawaiian/Pacific Islander	0.0%	0.0%
Native American	0.0%	2.3%
White	47.6%	61.5%
^a Data from DESE District profile reflects grades PK-12. ^b BYHS data was collected from students in grades 6-12. ^c Students could select more than one category		

BYHS Demographics

Demographics	All Students	High School	Middle School
Sex Assigned at Birth			
Female	50.0%	52.0%	49.0%
Male	50.0%	48.0%	51.0%
Intersex	0.1%	0.0%	0.1%
Gender Identity			
Female (Cisgender)	46.0%	46.0%	46.0%
Male (Cisgender)	46.0%	44.0%	48.0%
Transgender	2.0%	2.0%	1.0%
Non-binary, agender, gender fluid, or genderqueer	4.0%	5.0%	3.0%
I describe my gender identity in some other way	2.0%	2.0%	2.0%
Sexual Identity			
Heterosexual (straight)	72.0%	72.0%	71.0%
Gay or lesbian	4.0%	5.0%	3.0%
Bisexual	7.0%	9.0%	5.0%
Questioning	7.0%	4.0%	9.0%
I describe my sexual identity in some other way	6.0%	9.0%	5.0%
I do not know what this question is asking	4.0%	1.0%	7.0%
IEP^a	7.0%	7.0%	8.0%
504 Accommodations	5.0%	7.0%	3.0%
METCO	3.0%	2.0%	4.0%
Steps to Success	1.0%	2.0%	1.0%

All data are provided directly by students.

Data Summary and Trends Report

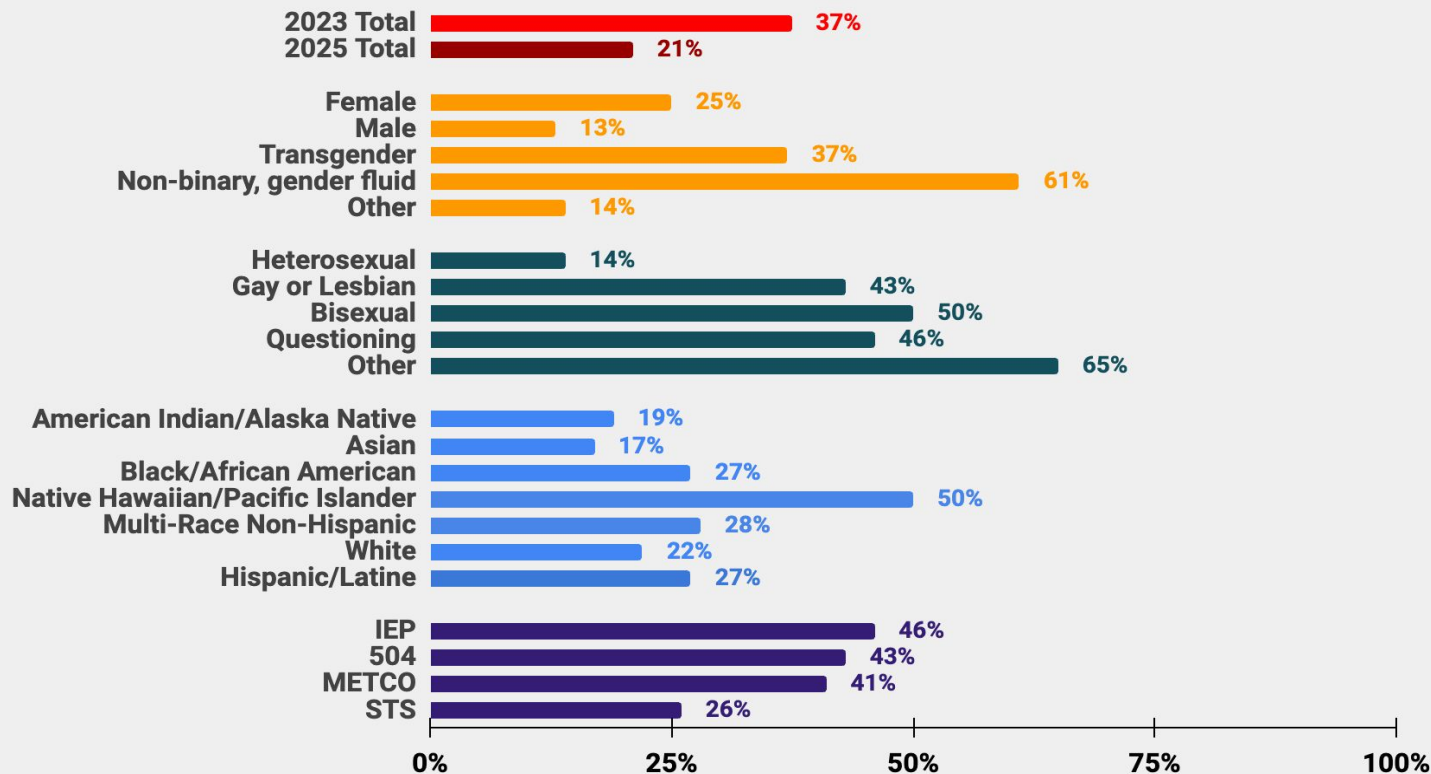


The full data and summary trends report will be publicly available on the PSB Website.

Guiding Questions

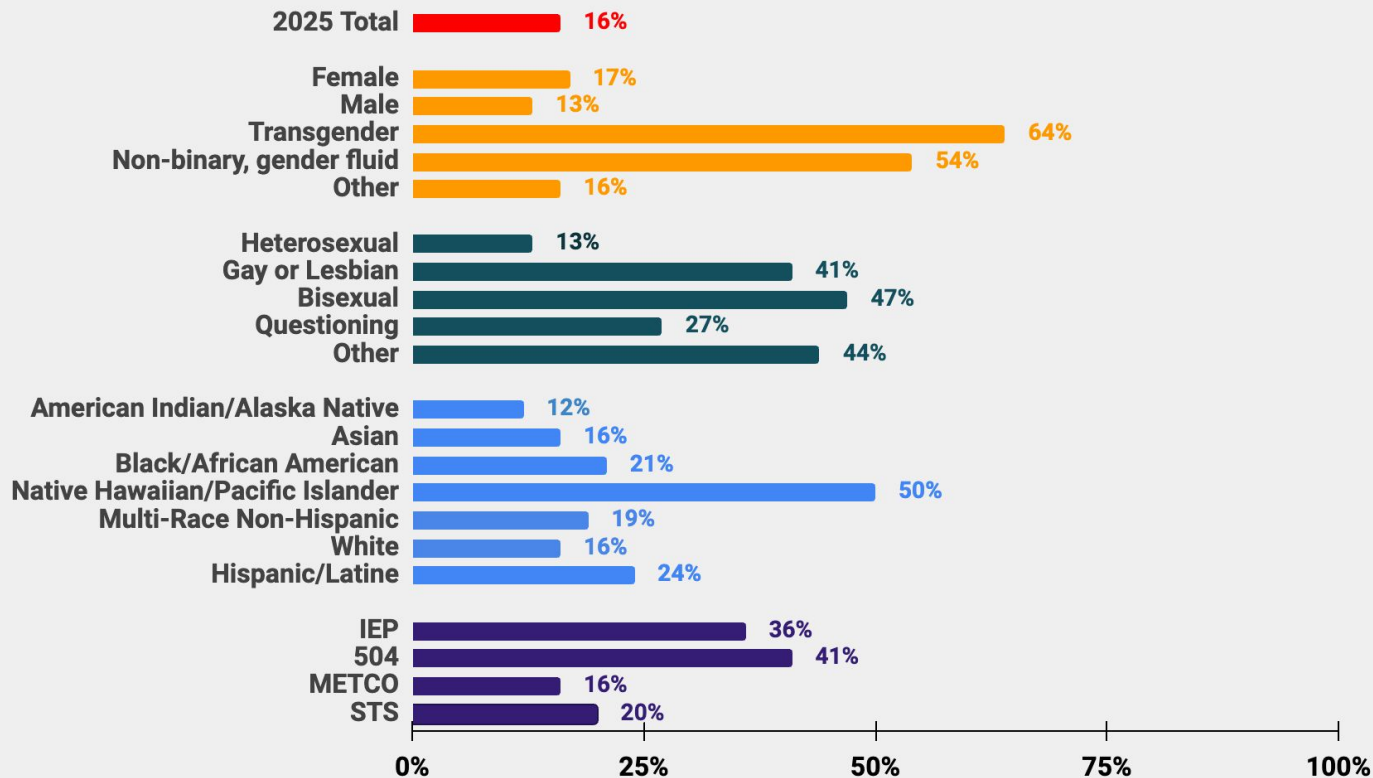
- **What percentage of students are experiencing mental health symptoms that may require intervention?**
- What percentage of students are experiencing more intensive mental health symptoms (e.g., self-injury, suicidality)?
- What percentage of students have consistent access to protective factors?
- **Are there groups of students who are more likely to experience mental health symptoms?**
- How do students describe their use of social media and technology?
- Is there a relationship between use of social media and mental health?
- How do students describe their use of substances.

BHS Difficulty Concentrating Due to Mental Health Symptoms



Students who identified as female, LGBTQ+, Black/African American, American, Hispanic/Latine, or Multi-Race Non-Hispanic, and students who report being in special education, having a 504 accommodation plan, being in METCO, or being in STS were more likely to report difficulty concentrating due to mental health symptoms.

Middle School Difficulty Concentrating Due to Mental Health Symptoms

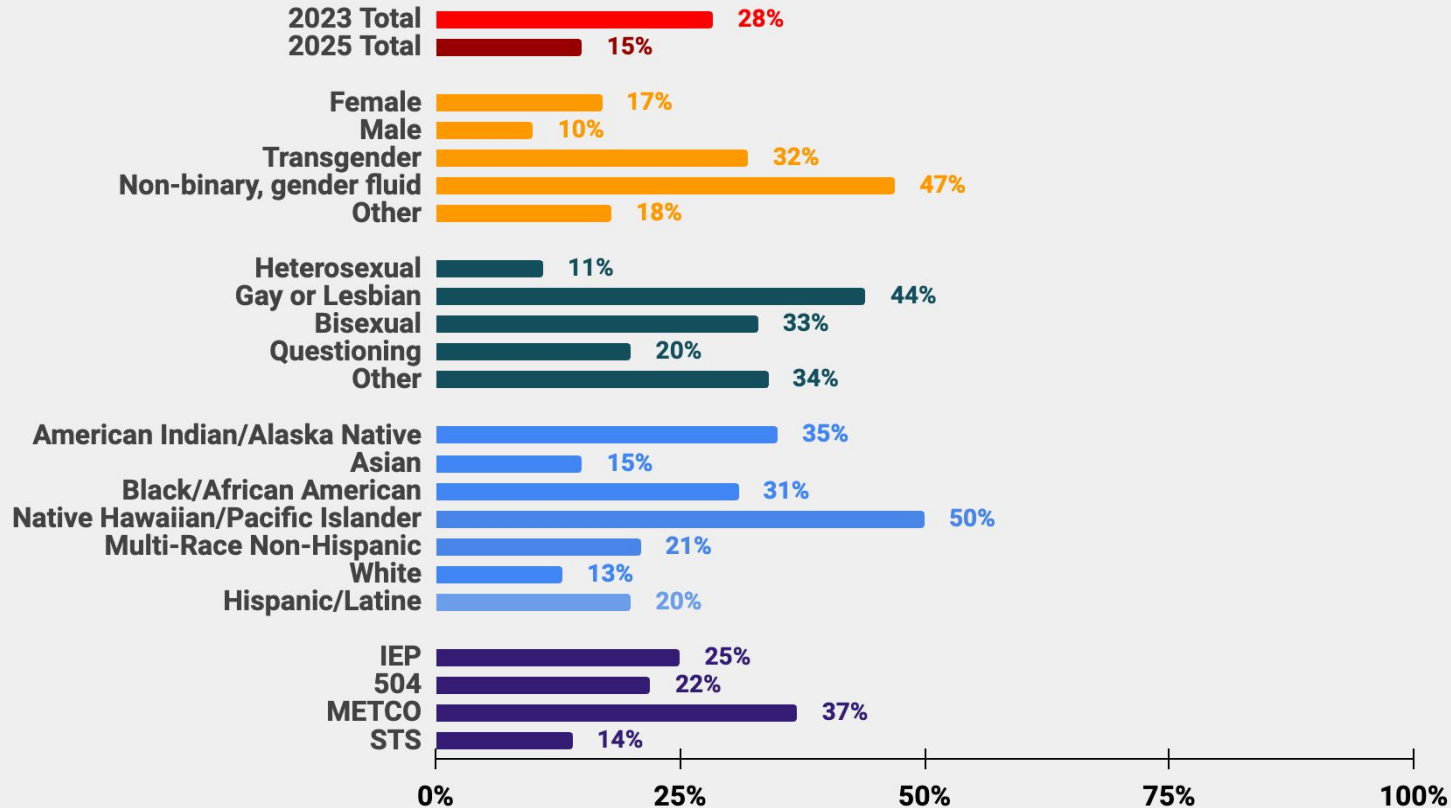


Students who identified as LGBTQ+, and students who report being in special education or having a 504 accommodation plan were more likely to report difficulty concentrating due to mental health symptoms.

PHQ - 4

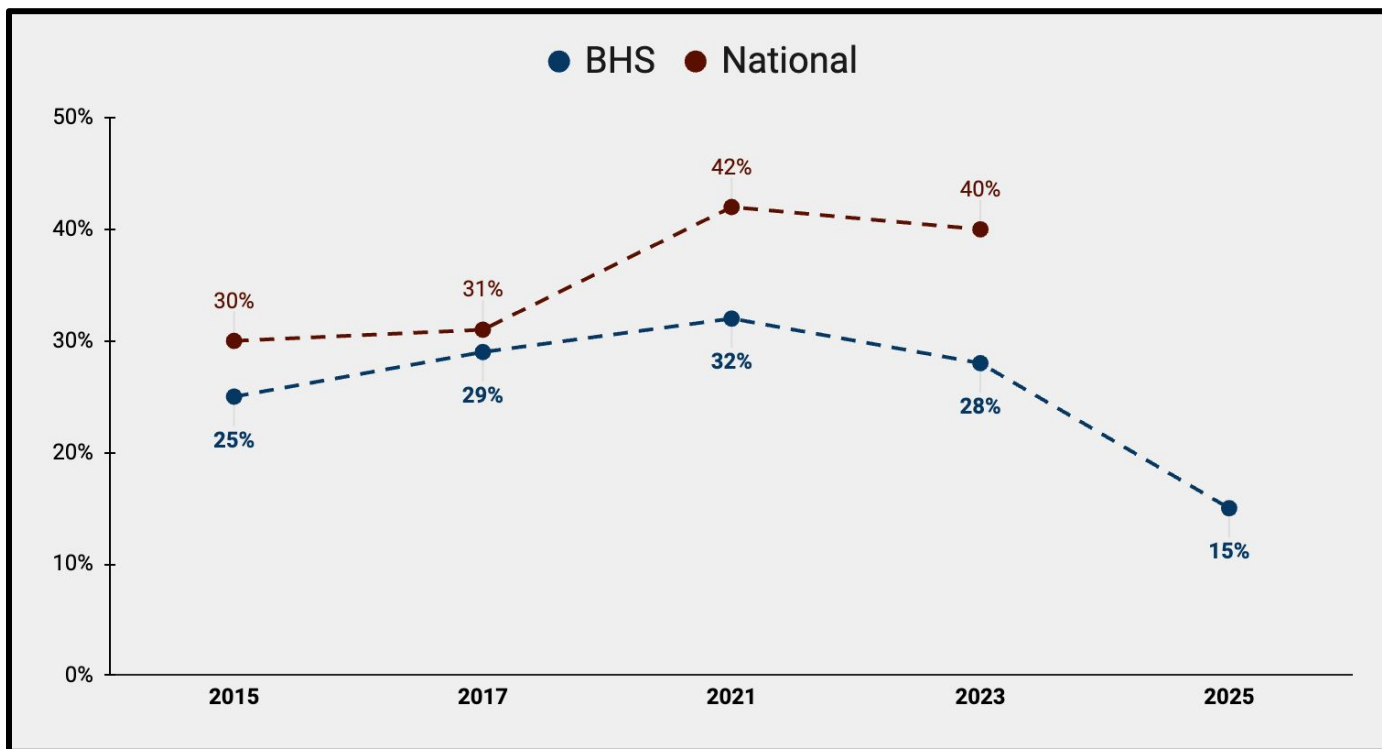
School Level	No concern	Potential concern	Moderate concern	Significant concern
BHS	64.22%	22.44%	9.09%	4.25%
Middle School	70.37%	19.72%	6.64%	3.27%
Total	67.14%	21.16%	7.92%	3.78%

BHS Persistent Feelings of Sadness or Hopelessness



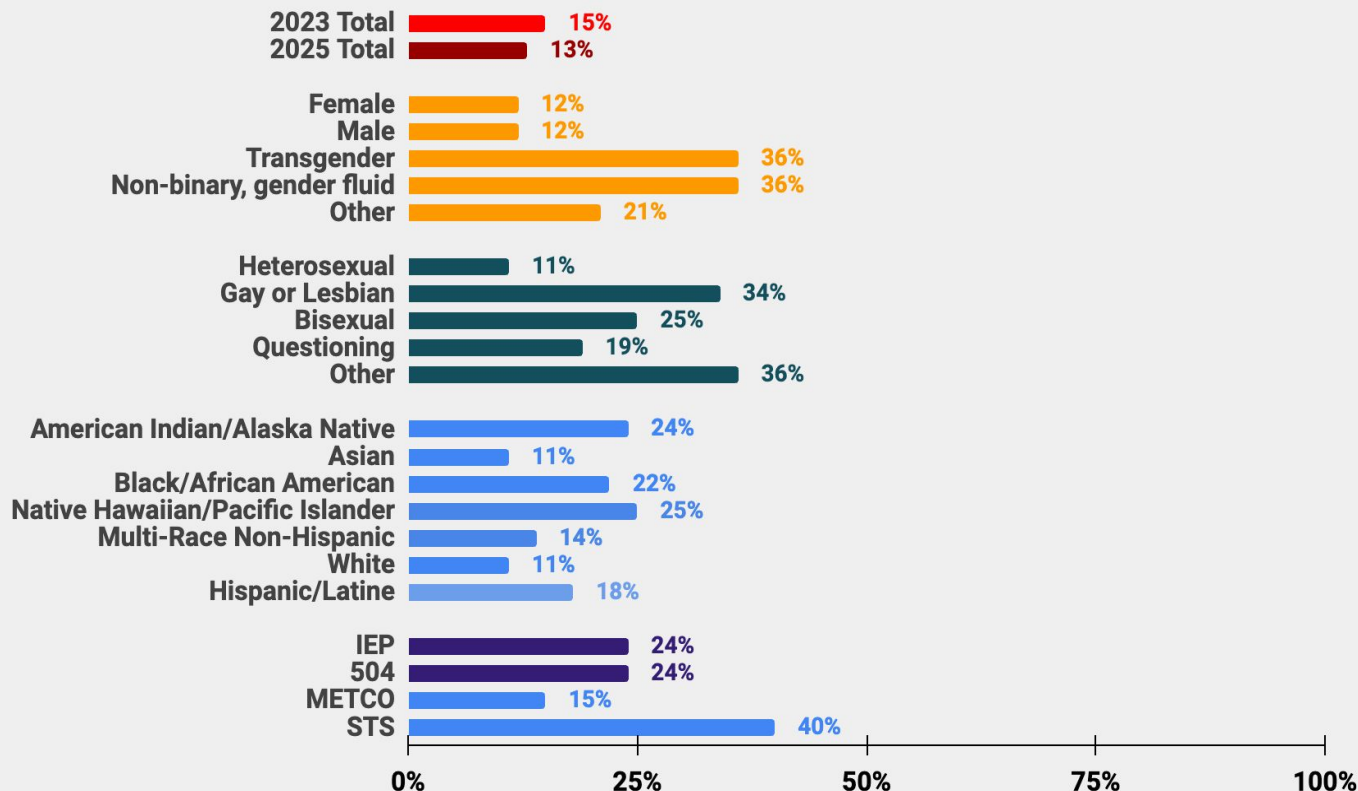
Students who identified as female, LGBTQ+, Black/African American, and students who report being in special education, having a 504 accommodation plan, or being in METCO were more likely to report persistent feelings of sadness or hopelessness in the past year.

BHS Persistent Feelings of Sadness or Hopelessness (Brookline Trend Data)



In 2023, 34% of students in MA reported persistent feelings of sadness or hopelessness on the YRBS.

Middle School Persistent Feelings of Sadness or Hopelessness

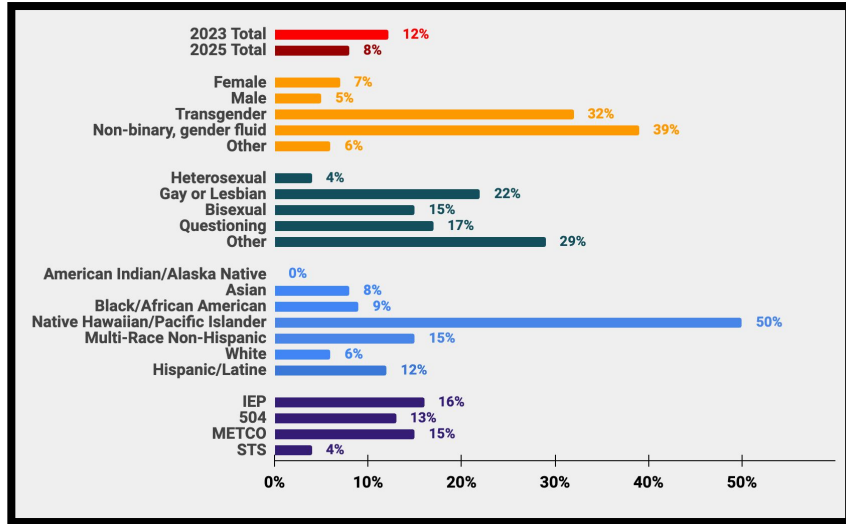


Students who identified as LGBTQ+, Black/African American, or Hispanic/Latine, and students who reported being in special education, having a 504 accommodation plan, or participating in STS were more likely to report persistent feelings of sadness or hopelessness.

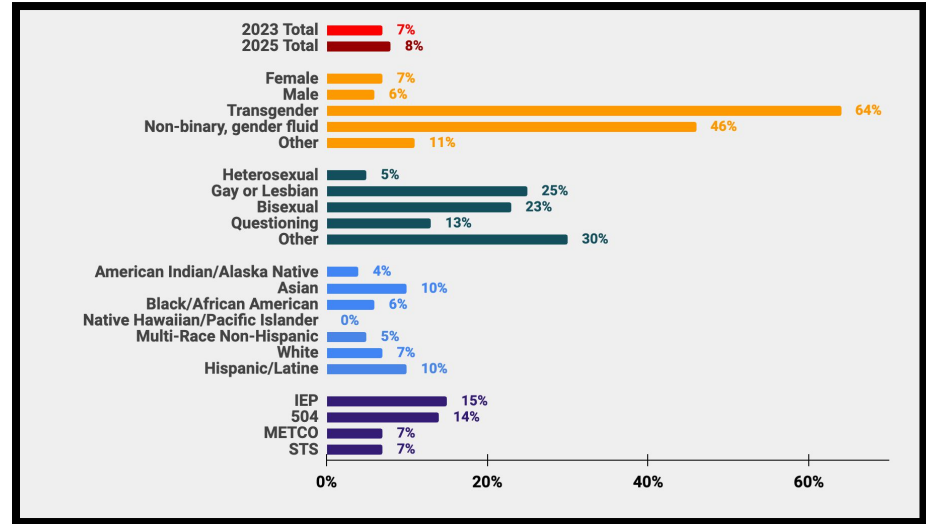
In 2023, 27% of middle schools students in MA reported persistent feelings of sadness and hopelessness.

Seriously Considering Suicide

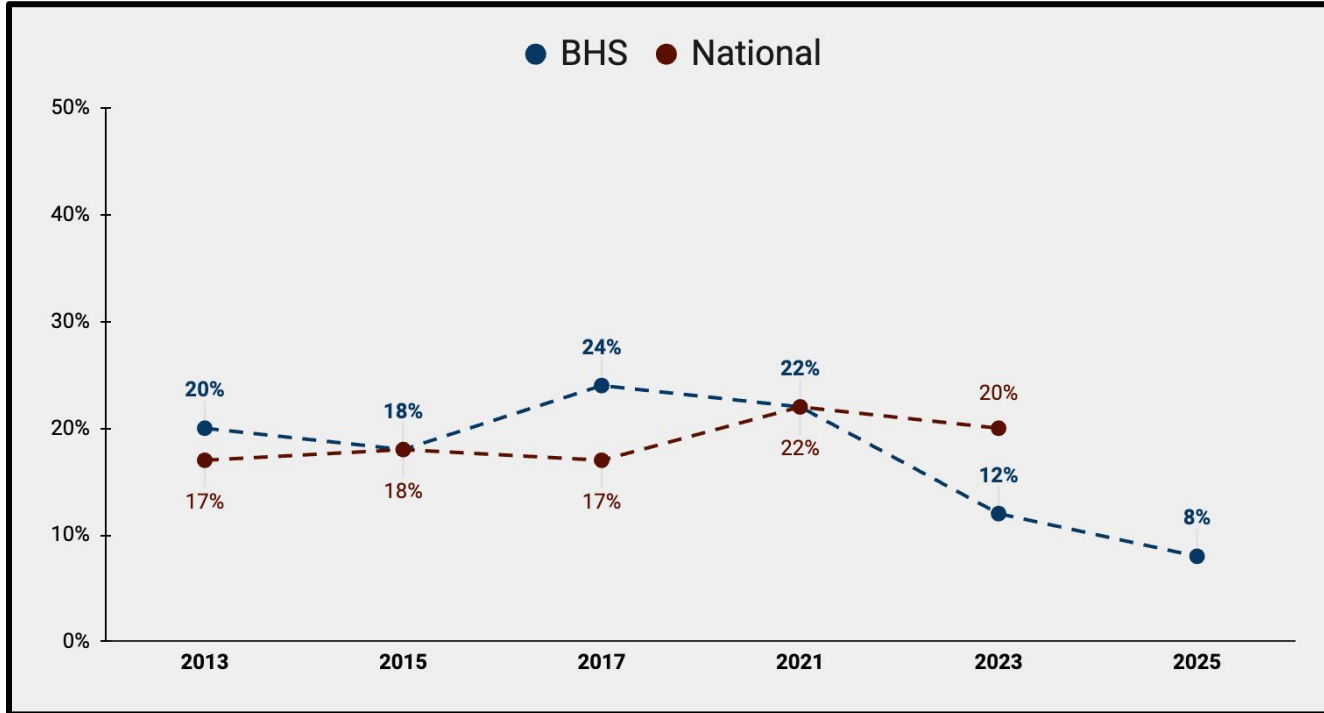
BHS



Middle School

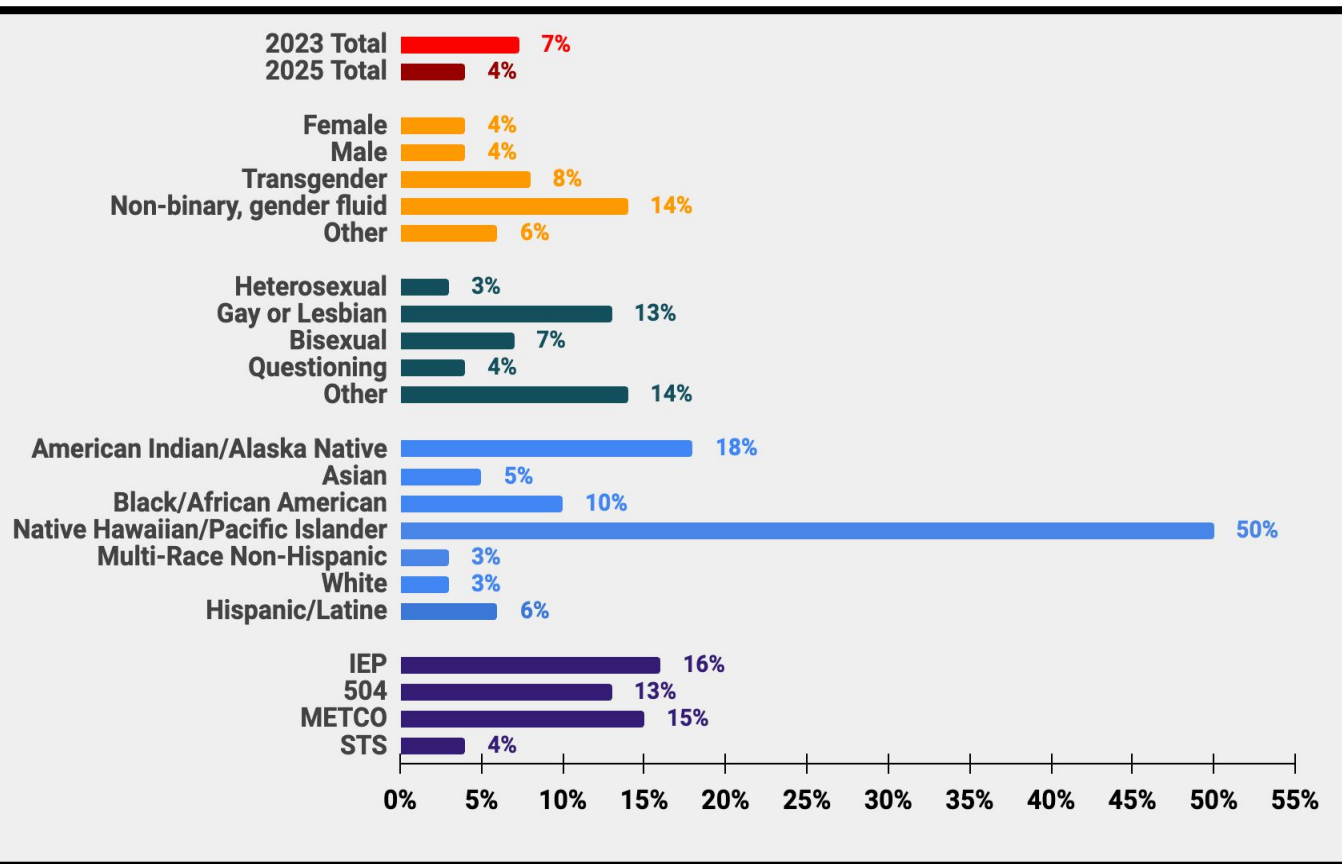


BHS Seriously Considered Suicide



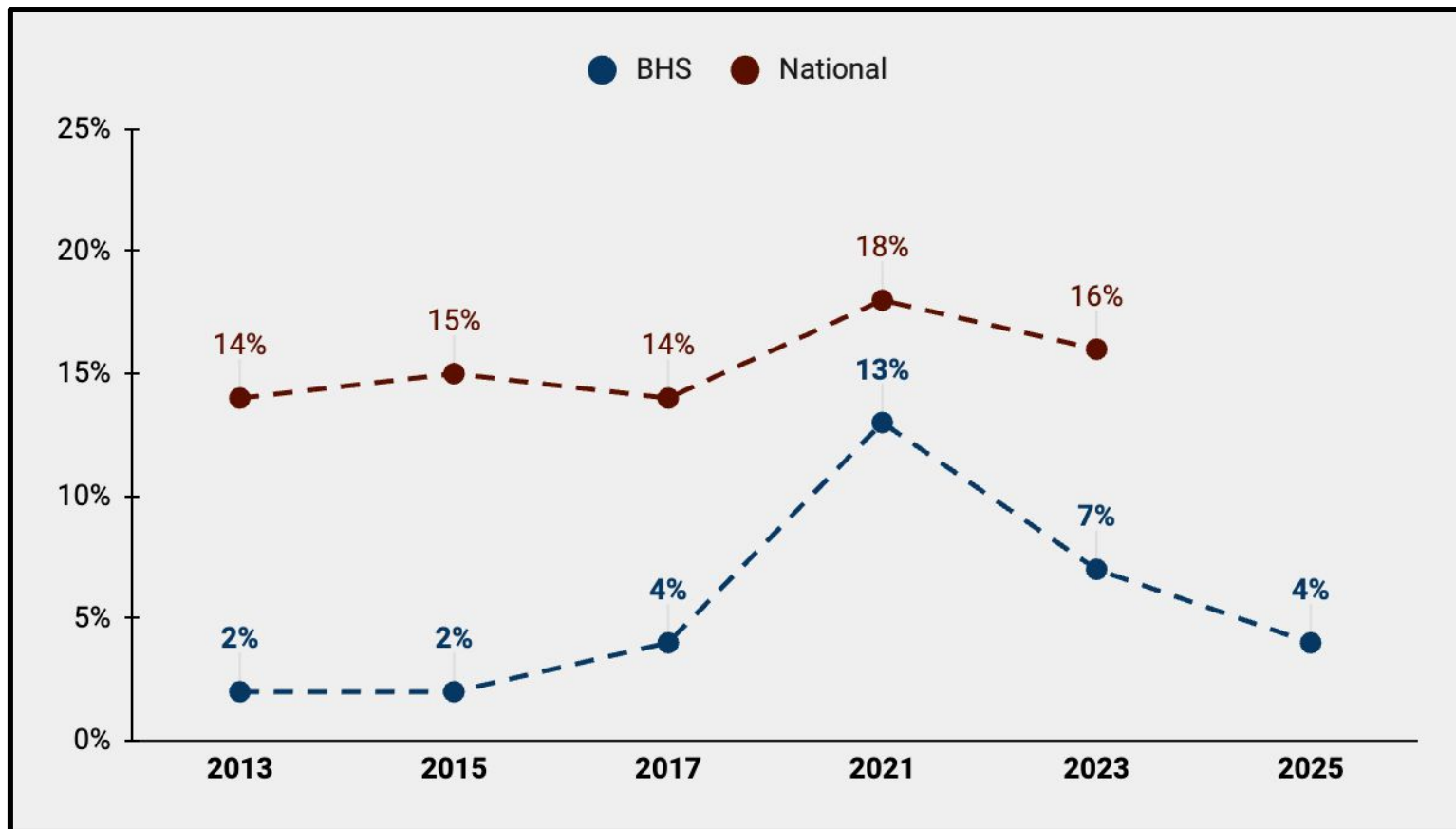
In 2023, 13% of high school students and 11% of middle school students in MA reported seriously considering suicide on YRBS.

BHS Made a Plan

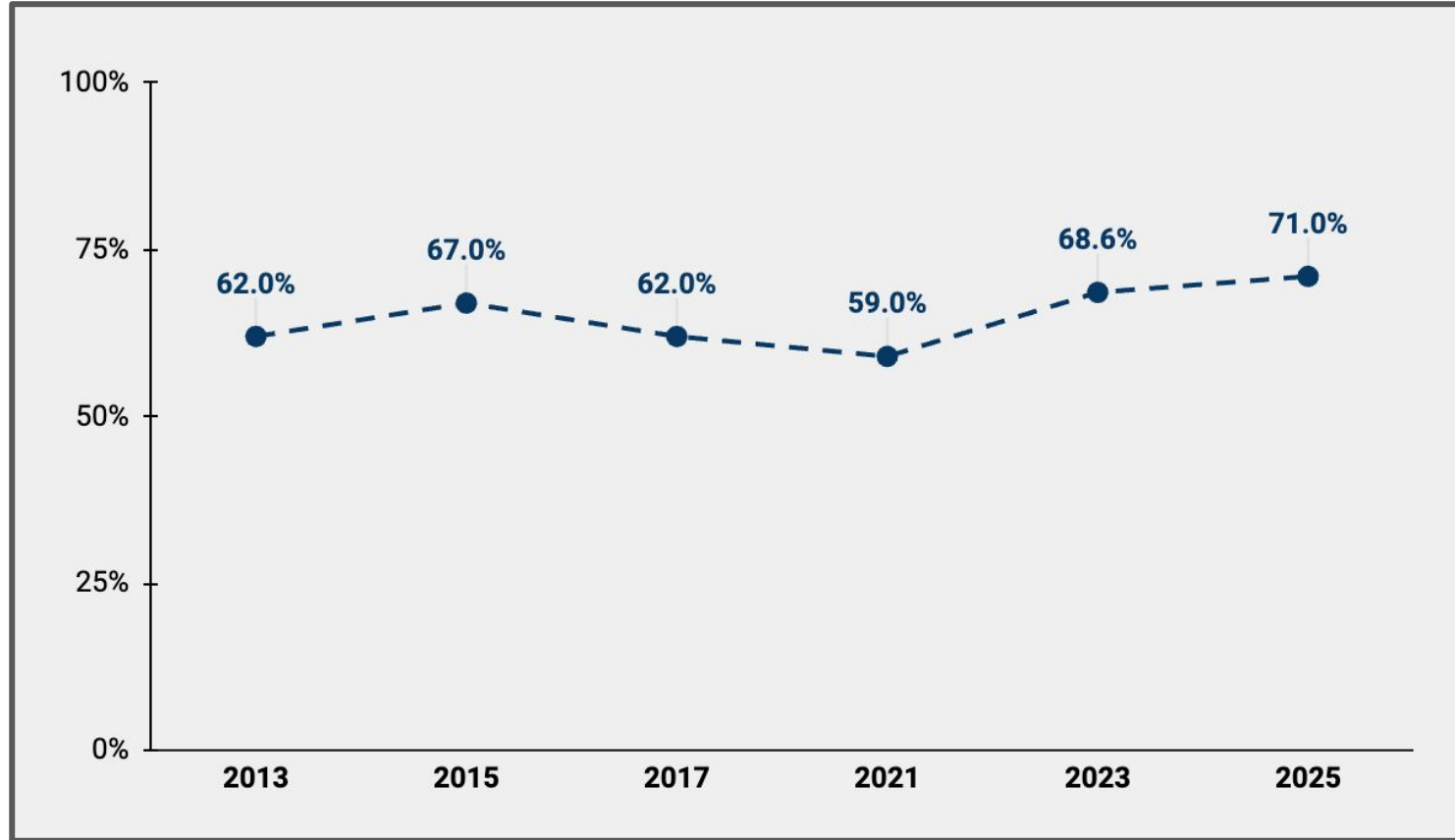


In 2023, 16% of high school students nationally reported make a suicide plan.

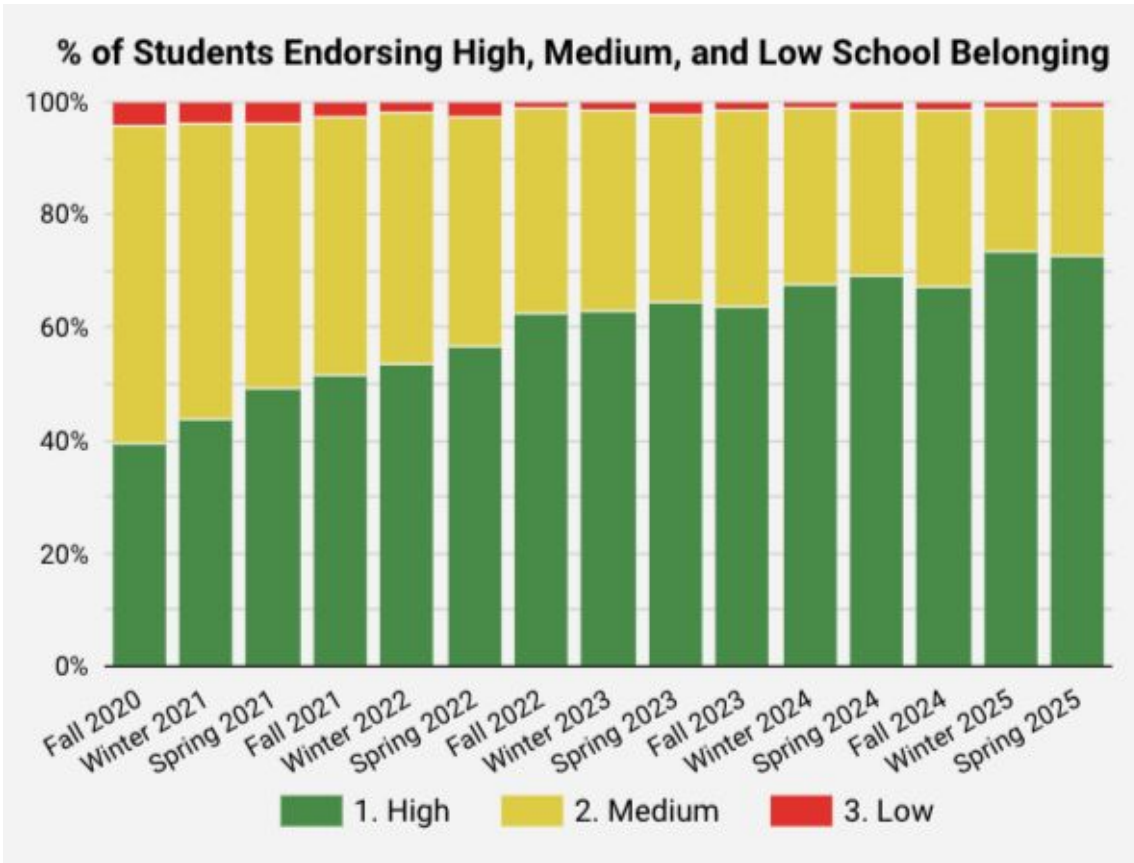
BHS Made a Plan



BHS Safe Adult at School (Trend Data)

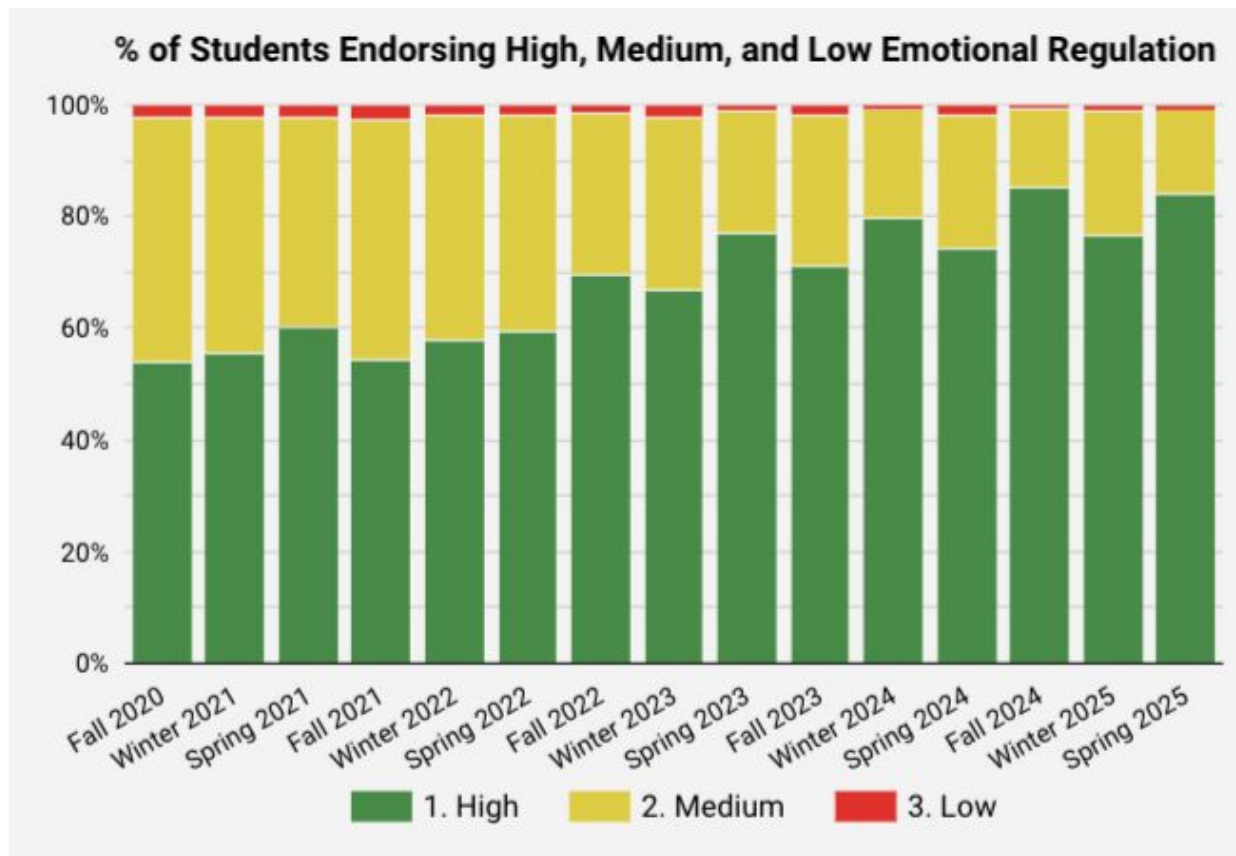


Grades 6 to 12 Belonging Data



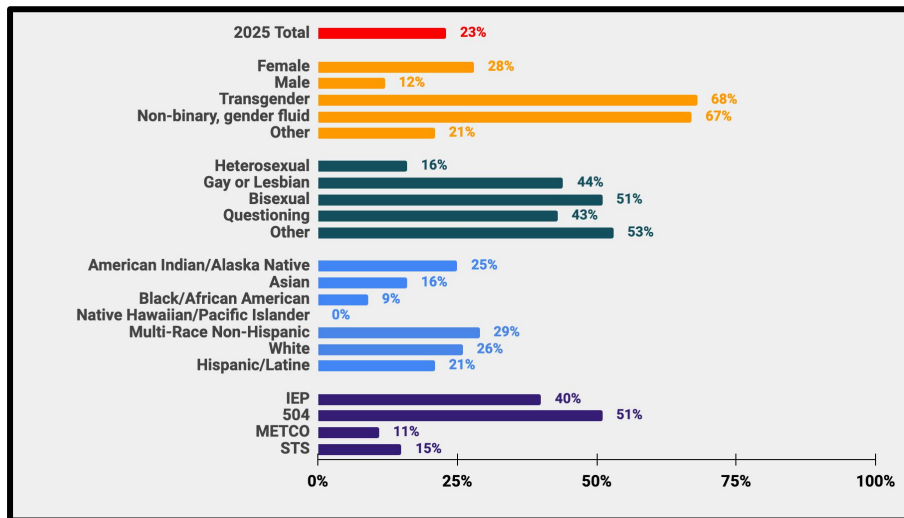
In 2023, 61% of high school students and 62% of middle school students in MA endorsed strong school belonging.

Grades 6 to 12 Emotional Regulation

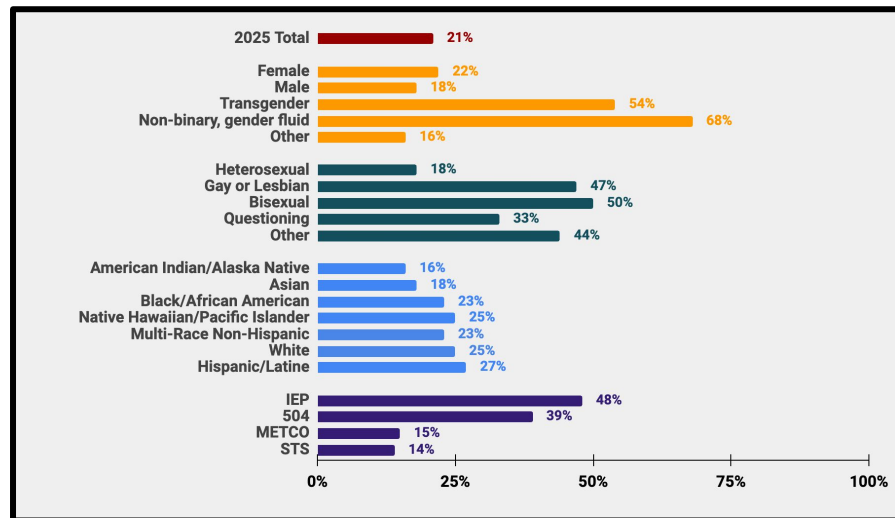


Accessing Mental Health Care Last 12 Months

BHS



Middle School



22% students reported to accessing mental health care in the past 12 months. 41% of these students reported primarily accessing mental health care at school.

Over the pasts 3 years, 10 to 15% of students of accessed mental health support at school.

Attendance

- Chronic Absenteeism = Missing 10% or more of school days enrolled
 - 2016-2017 = 7.4%
 - 2017-2018 = 7.8%
 - 2018-2019 = 8.1%
 - 2019-2020 = 9.3%
 - 2020-2021 = 5.9%* (Hybrid)
 - 2021-2022 = 15.1% (3.2% were 20% or more)
 - 2022-2023 = 14.5% (2.6% were 20% or more)
 - 2023-2024 = 11.5% (2.4% were 20% or more)
 - 2024-2025 = 10.8% (1.3% were 20% or more)

Strategic Goals

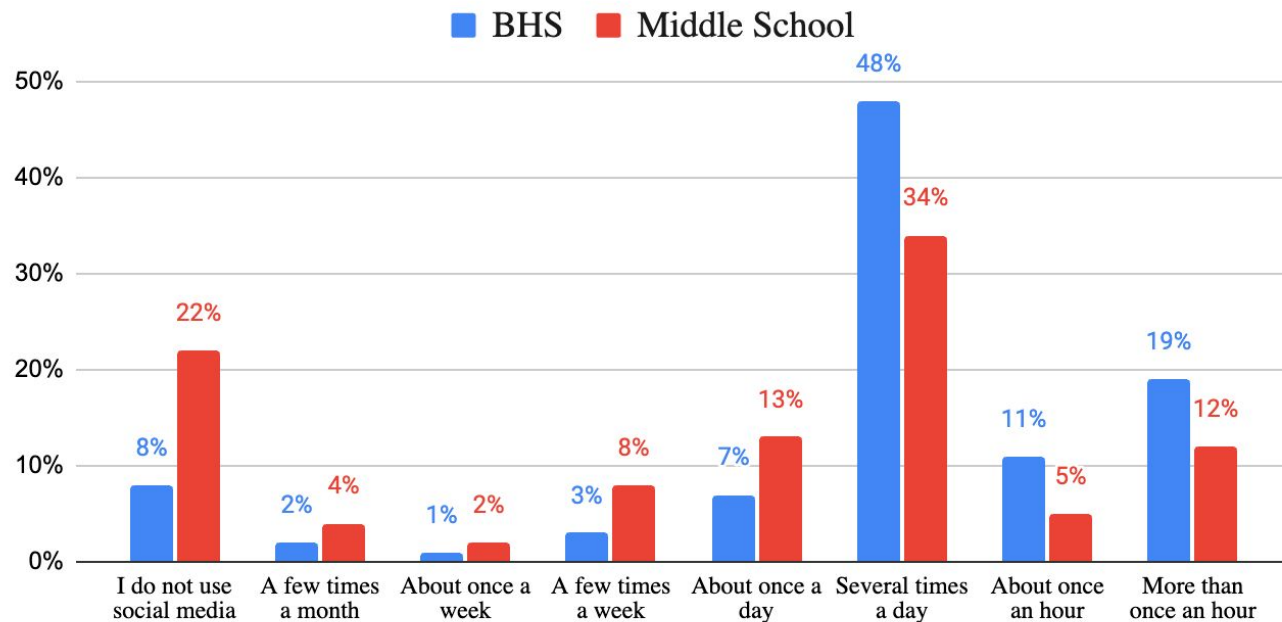
2023-2024 = 13.9%

2024-2025 = 12.7%

2025-2026 = 12.0%

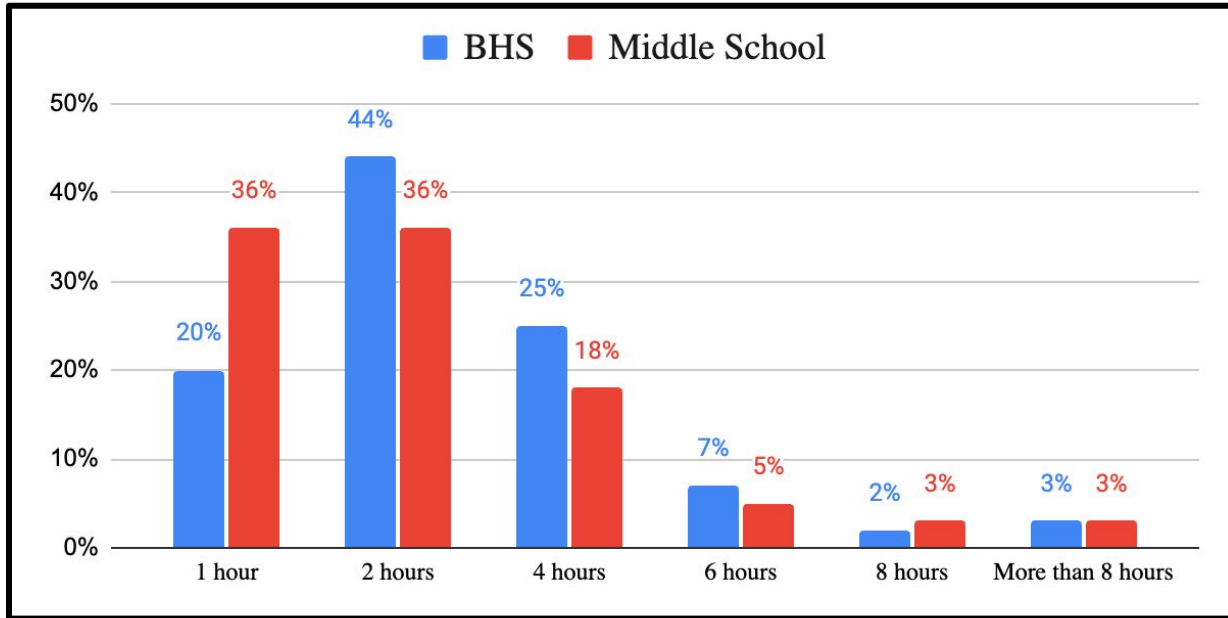
2026-2027 = 11.1%

Technology and Social Media Use - Frequency



50% of students who endorsed symptoms of depression reported using social at least once an hour.

Technology and Social Media Use - Hours of Use

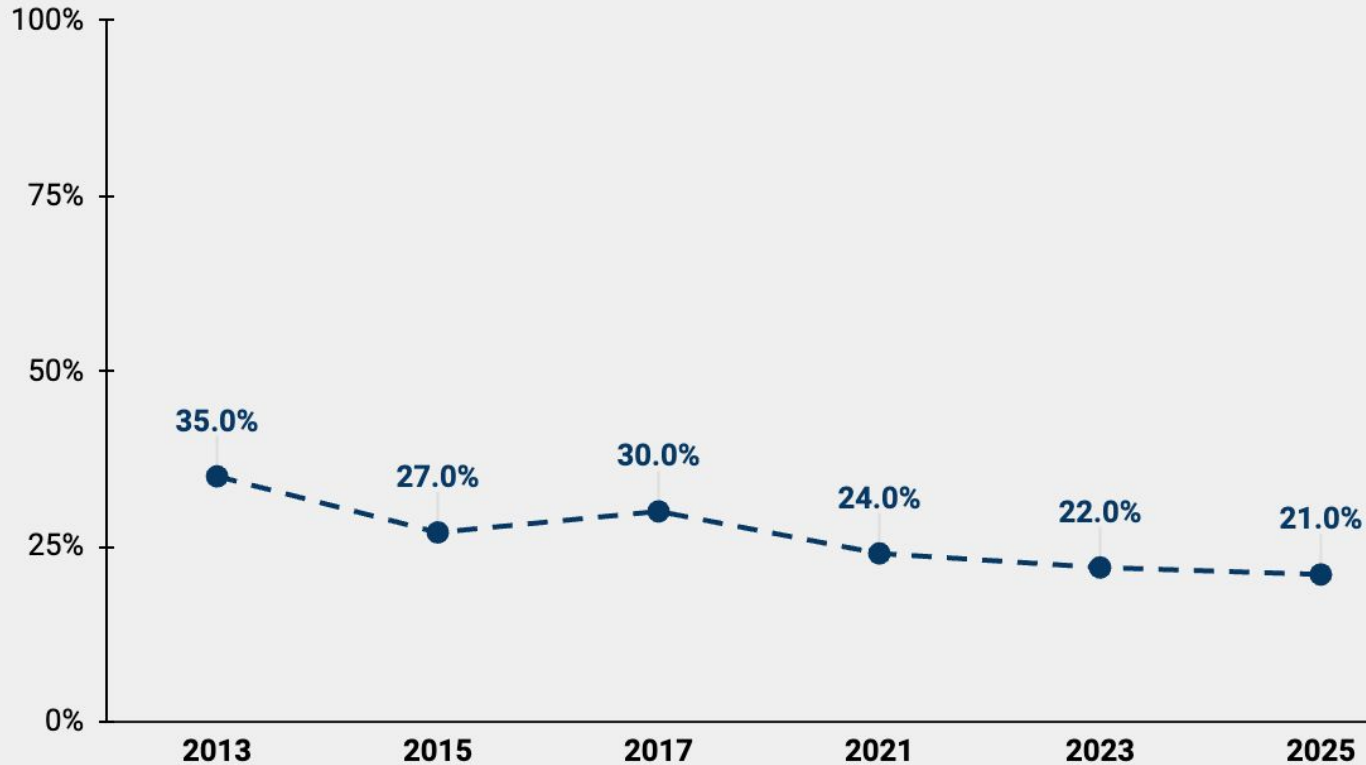


28% of students who endorsed symptoms of depression reported using social media for 6 or more hours a day

Technology and Social Media Use - Middle and High School

- 56% of students reported that social media use interfered with HW completion.
- 55% of students reported that social media use interfered with with sleep.
- 38% of students reported that social media use interfered with family time.
- 88% of students reported that social media helps with social connection
- 27% of students reported that they feel like their life is worse than others while using social media.

Alcohol Use - Last 30 days



Marijuana Use

- 11.7% of BHS students reported lifetime use
 - 4.8% 9th grade
 - 8.4% 10th grade
 - 23.2% 11th and 12th grade
- Peer perception
 - Less than 10% = 66%
 - 10 to 25% = 20%
 - 26 to 50% = 10%
 - 51 to 75% = 3%
 - More than 75% = 1%

Vaping

- 13% of students reported using a vape product in the past 30 days (~9% in 2023).
 - 2.6% of BHS students reported using a vape product on school grounds.
 - About half of these students reported that substance in the vape product was caffeine.
- Perception of risks associated with vaping:
 - Great Risk = 32.3%
 - Moderate Risk = 38.7%
 - Slight Risk = 24.3%
 - No Risk = 4.7%

Next (and on-going) Steps

Proactive Supports

- Continue to actively teach social-emotional skills
- Ongoing prioritization of belonging and supportive relationships (e.g., strategic plan).
 - QSU, GSA, belonging groups
- Ongoing skills instruction in health classes around healthy coping, relationships, safety, and engagement in health-promoting behaviors.
 - Signs of Suicide
 - Nan Project
 - Stanford Reach Lab
- Ongoing mental health screening (October and March)

Next (and on-going) Steps

Proactive Supports

- **Parent and Guardian Workshops**
 - What Are You Puffing? Vaping and Our Youth
 - Marijuana: Where We Were and Where We Are
 - iGen's Battle to be Mentally Healthy in a Digital Era:
 - The Digital Well-being Playbook
- **Partnership with DPH**
 - Brookline Wellness and Prevention Coalition (B-Well)
 - Anti-Vaping Campaign - Peer Leaders
 - Wellness Summit

Next (and on-going) Steps

Responsive Supports

- iDecide Curriculum
- Ongoing Tier 2 (small-group) and Tier 3 (1:1) therapeutic interventions in all schools.
 - Emotional regulation, social skills, health coping, healthy decision making, and navigating psychosocial stressors.
 - Strong wrap-around support for students who access community-based services.
- Well-defined crisis response procedures and protocols.
- Community-Partnerships
 - Cartwheel Care
 - Brookline Center
 - Quincy Family Resource Center
 - Instride
 - Private Practices

Questions and Answers

