



After the Fact | Are the Kids All Right?

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TRANSCRIPT

Sharon Hoover, professor of psychiatry, University of Maryland School of Medicine: Students experiencing mental health issues are much more likely to also be struggling with substance use issues.

PSA: What would I do if someone offered me these drugs?

I'd tell 'em to take a hike.

Jessica Roark, senior officer, behavioral health, The Pew Charitable Trusts: We do need to educate young people about what using drugs and alcohol does to their body, and not with scary images like frying eggs in a pan.

PSA: This is drugs. This is your brain on drugs.

Any questions?

Obari Cartman, community psychologist and author: Technology is making it very easy, convenient, and comfortable to escape. The things that build resilience are things that take time.

Dan LeDuc, host, The Pew Charitable Trusts: Welcome to "After the Fact." For The Pew Charitable Trusts, I'm Dan LeDuc. In this episode, we're exploring why more young people are struggling with their mental health.

The Pew Research Center reports that 55% of parents report being extremely or very concerned about the mental health of their teens today.

And even with increased conversations about mental health, stigma and outdated treatment approaches can stand in the way of getting people the support they need.

While experts now have a better understanding of what actually works in teaching youth about taking care of themselves and their mental health, it comes down to making sure these strategies are being used, primarily within the school systems.



We hear now from Sharon Hoover about the declining mental health of adolescents that began even before the pandemic. Sharon is a clinical psychologist and a professor at the University of Maryland School of Medicine. She's also the co-director of the National Center for School Mental Health, where she leads efforts across the country to implement mental health programming in schools.

Sharon Hoover: We saw, even pre-pandemic, rates of anxiety, depression, post-traumatic stress increasing in our students. And then probably not surprisingly, with all of the challenges that came with the pandemic, including economic burdens on families, loss of life, but also just that isolation and disruption in social activities. And we've seen some data that's come out more recently that has shown kids are experiencing higher rates of depression, anxiety, and even higher rates of suicidality and completed suicide.

Dan LeDuc: Do we have any idea what was starting to cause those numbers to go up before and what is sustaining them now that the pandemic is over?

Sharon Hoover: There's not necessarily one thing that we would say is causing the increases. But there are some key contributors that there's general consensus around.

We know that when there's economic burden on families, it impacts student mental health. There's also been a lot of speculation and some supporting data to suggest that the introduction of, not only cellphones, but also social media platforms, and the rapid rise in adoption of social media by young people is a large, if not the largest contributor to some of the concerns that we've seen. And then there's a lot of discussion around the demands that we're putting on our young people. And there is a lot of academic pressure and a lot of pressure around engagement in extracurricular activities with less time for play and unstructured activity.

Dan LeDuc: Well, how have you seen anxiety and depression manifest in the young people you're talking to?

Sharon Hoover: We often get asked, by teachers or by parents, how do I know if my kid is really depressed? Or is this just kind of typical moodiness in an adolescent? Or, you know, my kid has worries, but I don't know if they're out of proportion. And it's a really important question, right?

Because it is typical for all of us, including our children, to have some worries, and to maybe be scared or a little nervous in a new situation. For example, a first day of school, a new class, maybe they're moving. It's pretty normal and also typical to have some mood fluctuations.



But we know that when it really starts to impair a student's ability to engage in typical developmental activities, play, school, family interactions, that's when we have to kind of raise the red flag a little bit. And, you know, in terms of how it presents, in the classroom, students might start showing more disruptive behavior. They might conversely start looking more withdrawn. So, it's a little bit nuanced in terms of understanding what is this sign of.

Jessica Roark: Are you stressed and so you try to self-medicate? Or does using drugs or alcohol sort of exacerbate some of these mental health challenges?

Dan LeDuc: Jessica Roark works in Pew's behavioral health programs.

Jessica Roark: What the data really show us is it's very chicken and egg.

Dan LeDuc: She's been looking into what effective prevention programming looks like for mental health and substance use.

One of the things we're seeing is the substance use is occurring at a much younger age than maybe a lot of us adults may realize. What are we learning there?

Jessica Roark: Well, we do know that the average age of use is around 14. We are hearing from teachers and parents that it's actually much younger, those sort of early middle school years.

About 20% of middle and high schoolers do report ever having used alcohol or an illicit drug.

We do find that alcohol and cannabis are the more commonly used. And youth are vaping; I don't think anyone's surprised to hear that. Unfortunately, yes, we are seeing a rise in youth overdoses. And really regardless of what substance is being used, there are serious health implications for when young people use drugs or alcohol.

Dan LeDuc: We're seeing this connection between substance use and mental health. So what do we know about the responses to that and the receptiveness to address that?

Jessica Roark: Unfortunately, what we see, not just when it comes to knowledge, but also how our government systems are set up to operate, substance use and mental health are treated very differently.

So there is a lot of education that needs to happen so that people understand the linkages between substance use and mental health and also the need to be



addressing them together. It is still really important to have substance-use-specific content. We do need to educate young people about what using drugs and alcohol does to their body, and not with scary images like frying eggs in a pan, but with facts.

Dan LeDuc: So, scare tactics aren't very effective. What do we know about the risk factors that get young people using substances in the first place?

Jessica Roark: Everyone comes with what are called risk and protective factors, and these can be elements that make you more or less likely to start to use drugs or alcohol. They can be things like, do we normally have a positive outlook on life? Are we able to be resilient and bounce back from different kinds of situations? Some of them are external. What are the relationships we have in our lives? What kind of neighborhoods do we live in?

Dan LeDuc: So, what is Pew's role in this world?

Jessica Roark: Pew has started to look into what schools are doing in the mental health and substance use arena. There's clearly a problem that we're trying to address, but unfortunately, we're just not seeing enough evidence-based practices happening in schools.

What we are asking is what's getting in the way of that. Surveys have found that only about a third of schools are using something that is evidence-based. So it really becomes an issue of we have good programs that we can use. It's just a matter of getting them into the school.

Schools already often have an infrastructure that they can tap into when it comes to providing these services. They already think about what are the things that we need to make sure all students get. What are those maybe special, additional programs and services that we need to have in place for a smaller group who might need a little extra help?

But, ultimately, kids want to feel connected to the people around them. They want to know that they're accepted by their peers, they can trust adults around them. They feel like they matter and have purpose. It isn't rocket science. We all need these things.

And the good news is, is that when you start to address some of those, you can address a multitude of issues. Whether it's mental health challenges, substance use, other kinds of risky behaviors.

Dan LeDuc: Sharon told us more about what these kinds of effective programs look like, what they include, and how they can be incorporated into the school day.



Sharon Hoover: We would say that mental health needs to be embedded into the educational curriculum, into English class and math class. It means teaching mental health literacy. So how do I maintain and identify what positive mental health is, and how do I seek help and know who to seek help from when I need it?

It would also include kind of higher tiers of support for students who might need it. So, brief interventions for students who might have mild to moderate concerns, but also on-site mental health treatment and crisis services when students are experiencing more struggles.

Dan LeDuc: And are schools interested in doing this?

Sharon Hoover: Most school administrators say that mental health is one of the priorities for them in terms of ensuring that their kids are ready and able to learn, and they do want this, but they don't want to have to do it alone. And that makes sense, right? Because they are already taxed with a lot of responsibility to ensure that our kids are learning. And, unfortunately, schools are often under-resourced to do this work. So, administrators are having to make really difficult decisions. Over half of administrators say that they don't have sufficient financing or staffing to actually provide adequate mental health supports.

Dan LeDuc: Well, some people might wonder why schools ought to be a setting for this.

Sharon Hoover: And it is a natural question, why should we be focusing on mental health in schools? Schools are where most young people are much of their lives, right? Kindergarten through 12th grade, young people spend about 15,000 hours of their time in schools.

It has to be part of the academic mission because students can't really learn if they're not physically well and also if they're not mentally well. And there's actually good data that shows when we bring mental health supports into school buildings, that young people are much more likely to access them and to follow through with intervention.

Dan LeDuc: In schools where you've worked, have the educators there been able to share with you what success looks like?

Sharon Hoover: Yes. One of the things that I think is most evident in a successful school mental health program is when there are those partnerships with community behavioral health partners, they're there as a complement to the hopefully robust mental health supports that are already there in the school building.



In terms of how educators know it's working, we look at things like, what is the school climate? And that's things like, do I feel safe in the school? Do I want to come to school? Do I feel connected to the school?

And then of course, we look at both academic and psychosocial measures of our students. So, when students start coming to school, when they start attending and their grades improve, that's a good sign that mental health programming is working. We know attendance is inextricably linked to health and mental health.

Dan LeDuc: How do you know you're getting through to them when you strip the data away and just what do you want to hear from kids about why something's working?

Sharon Hoover: First of all, they enjoy when mental health and well-being is actually attended to during the school day. They want to feel well. They don't want to have to wait until it becomes a crisis to go see somebody. We've had students say, "We wish that there was just kind of a more regular check-in." And some schools are adopting that type of practice.

Attuning to the individual student who's sitting in front of us takes cultural responsiveness and cultural humility on the part of the school mental health professional or the educator.

And we have to be looking at the systems in which young people are living so that we're actually changing the systems that can cause harm.

Dan LeDuc: Obari Cartman has a lot of experience reaching young people where they are. He's a psychologist who works with Chicago youth in schools, juvenile detention centers, and a variety of community settings.

Obari Cartman: There's a lot of need in Chicago in communities that are disinvested. And the manifestations of a lot of the grief, the anxiety, the depression, the addictions that they're experiencing shows up as violence in this city.

And so, I spent a lot of time kind of trying to get at the root of that and creating innovative programming for young men most affected by those circumstances.

Dan LeDuc: The young people that you are working with, where do you interact with them?

Obari Cartman: I've tried to meet people where they are, find community organizations, mentoring organizations. I do a lot of work in incarcerated spaces,



juvenile detention centers, certainly a lot of high schools, where in Chicago, a lot of the high schools are very understaffed.

I love working with coaches. Those kind of partnerships I think have been much more useful than like waiting for people to get it and show up in the office.

Part of our work as therapists is getting people connected to services, so going where people are.

I use a lot of hip-hop. I use African drums. I use movement, martial arts, capoeira, sports video games sometimes, and use that as an entry point to have conversations with young people about how they're really doing for real.

Dan LeDuc: When you show up at schools, you come with a curriculum that you've developed.

Obari Cartman: Yeah.

Dan LeDuc: And so describe that for us.

Obari Cartman: So, the curriculum is called Manifest. At its core, the idea is to really analyze the context that we find ourselves, and we can create holistic long-term successful lives that are rooted in cultural identity and values.

And so, I use music to have that conversation. I don't come in as Dr. Cartman, I come in as, you know, Obari, brother Obari, right?

Let's just come out of class once a week or twice a week, you know, share some music with you. And we're going to print out the lyrics. And then we're going to, line by line, dissect some of the ideas that are coming through. I ask them who they're listening to and what they like about that music, and what are some of the themes and concepts that are coming and try to connect through just an organic conversation about the things they're exposed to.

They're inundated with information. It's often devoid of wisdom or an ability to process that information. And so, the curriculum is designed to interrupt the isolation that a lot of young people find themselves in and just have intergenerational conversations about a range of topics.

When we use music and art, it breaks down some of these very layered conversations and makes it very plain and simple for young people.



Dan LeDuc: So you work with a range of young people in Chicago. But are there commonalities among them?

Obari Cartman: Because of technology, a lot of the young people are exposed to a lot of the similar content. And so, it creates a new dynamic of what they're having to deal with and process. The level of misinformation, having to create discernment, the need to disconnect, is hard for young people to do; it's hard for me to do.

What the technology does, the culture it creates is making it very easy, convenient, and comfortable to escape.

The processing and the wrestling with pain and difficulty, the things that build resilience, are things that take time.

Dan LeDuc: Yeah. And when you're pointing out some of these issues to them, I mean, you're reminding them of maybe difficult circumstances in their neighborhood. How do you get them to the point where they can start putting context around it?

Obari Cartman: For me, what's been important is starting with dislodging them from the rigamarole of their circumstance, which in lots of ways, without critical thought, without information, the resulting internalized feeling is a sense that, you know, this just must be what life is. This is what I'm capable of because all I see is chaos and violence and disorder. And that also limits possibilities.

So, the beginning of it is really to remove the level of fault and shame and blame so that they can begin to ask questions about what my purpose is. What is fulfilling to me? What are the talents and passions?

And then we co-create a conversation that helps to put them on a path where they can cultivate the skills they need, find the community supports they need to really redirect their trajectory.

Part of the goal is to help young people remove all the dust and the dirt and the debris, help them see that that spark, that light inside of them, I didn't put it there. I didn't create it. I can help, you know, light the flame and blow it and support it and encourage it, but the prescription is just the relationship.

It's the openness. It's the removing the barriers that they have often placed on themselves, inherited by the systems and the context that they find themselves in. So the end goal is really embracing discovery.



There's a natural wisdom in young people when it's removed of the burden of society that they get to now imagine. They get to dig into the discovery process and get to be curious again.

Dan LeDuc: Programs like Obari's are being implemented in other places. But there's still more that localities, communities, and states can do to better support kids. Jess told us how Pew is researching which state policies are effective.

Jessica Roark: We are looking at what states are doing things well, what policies do they have in place, and really trying to understand how they've made it work and just see if there are lessons that can be drawn.

Because the challenges that schools face are so enormous, and they can't solve all of these questions on their own, some of the challenges we've found are that while a lot of states do have policies in place around mental health, there's much less there on substance use.

So there's an opportunity to sort of strengthen what the states are doing so that it can trickle down to the school level.

Dan LeDuc: So, how can we be sure these effective approaches are being implemented? Let's hear more from Sharon Hoover.

Sharon Hoover: We often think of education as very locally driven, and it is. But states can put forward and have put forward legislation that can actually make this go better.

Dan LeDuc: But it's not just the school administrators and districts that need more financial assistance to do this work. Sharon tells us how educators need support too.

Sharon Hoover: We often hear from teachers, I can't add one more thing to my plate. And the data would support that. The vast majority of teachers say they're either always stressed or often stressed at their job. Schools need to be looking at their own policies and practices at an organizational level. What are the things that they can do more systemically to support educator well-being? We actually have an organizational well-being inventory for schools that any school can access online at no cost to take a look at how they're doing in that area.

It's not all about fixing kids, right? It's more often about fixing systems.

Dan LeDuc: Thanks for listening. If you or someone you know needs help with substance use, visit www.findtreatment.gov.



And we'd like to hear your thoughts about this show. Please leave us a brief review wherever you listen to your podcasts.

For The Pew Charitable Trusts, I'm Dan LeDuc, and this is "After the Fact."