

# Youth Mental Health First Aid Survey Key Findings

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*Prepared for*  
Rose Community  
Foundation

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## INTRODUCTION

Youth Mental Health First Aid (YMHFA) is a skills-based training program of the National Council on Behavioral Health designed to teach youth group leaders, educators, school staff, and others who regularly interact with young people how to help an adolescent (age 12–18) who is experiencing a mental health or addiction challenge or is in crisis. As part of the Jewish Teen Funder Collaborative, the Denver Boulder Jewish Teen Initiative was able to offer the training to youth educators in the region. Trainers from the Collaborative provide the unique opportunity for training participants to view the information and guidance of the training through a Jewish lens. The training was offered to Denver and Boulder Jewish professionals at various times during 2020.

Working with Rose Community Foundation and Margie Bogdanow, Informing Change developed a survey to capture how YMHFA training participants are applying what they have learned in their work with Jewish youth, along with assessing the community needs around youth mental health supports and resources.

This memo summarizes themes from the YMHFA survey results and offers thoughts on how the Denver and Boulder Jewish communities can work to further support the mental health and well-being of teens.

## Methodology

Between January 11 and February 9, 2021, Informing Change administered a 16-question survey that included questions about YMHFA learnings, the availability of mental health services in Denver-Boulder, and organizational support and resources available to youth professionals. The survey was sent to 92 Jewish youth professionals in the Denver-Boulder area.<sup>1</sup> After removing responses containing no data and duplicates, we had survey data from 49 individuals—42 complete responses and 7 partial responses. Of the 49, 40 had attended a YMHFA training and 9 responded to the survey without having had the YMHFA training experience. For the demographic makeup of the survey respondents, please see Appendix A.

For analysis, we first looked at the descriptive frequencies of each question. Then, we looked at crosstabs of certain key questions by different demographic groups (for example, level of experience, gender, role) to assess any differences. Finally, we coded and summarized all open-ended survey questions.

## KEY FINDINGS

### YMHFA Training Learnings

The Jewish youth professionals who attended the YMHFA training left it feeling more competent and confident about responding to mental health challenges in the youth they work with. Over 80% of survey respondents feel better **able to recognize signs and symptoms** of mental health challenges in the youth they work with, and feel **more confidence reaching out to, talking, and interacting with youth** going through a mental health challenge (Exhibit 1).

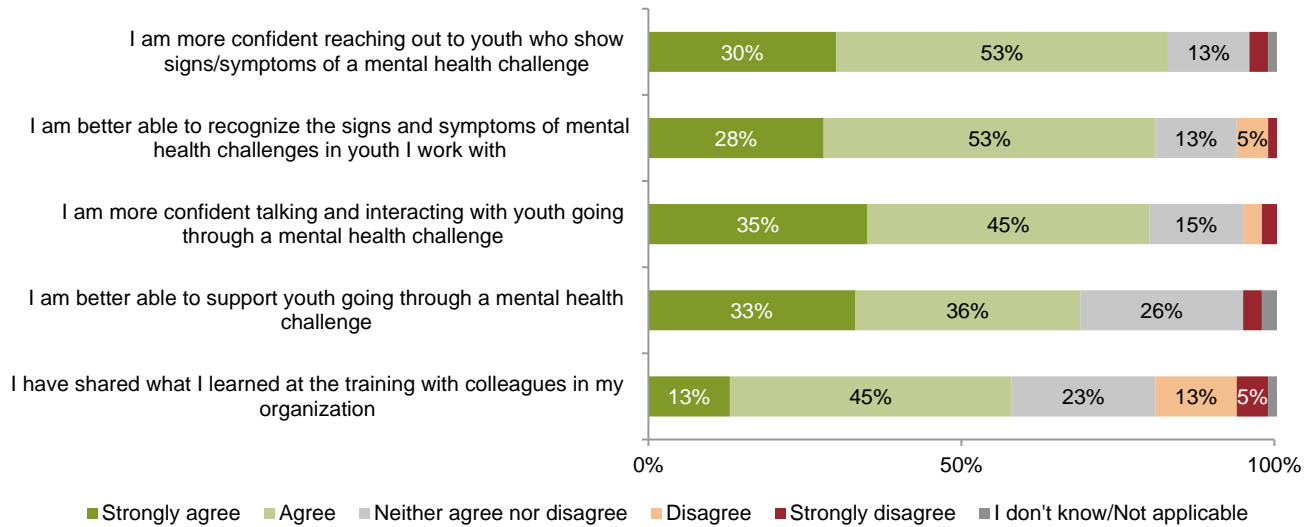
A smaller majority (about two-thirds) agree that they are **better able to support youth** going through a mental health challenge, but a greater portion of respondents were neutral compared to the items mentioned above. We observed a similar pattern in the survey responses about participants **sharing learnings from the training with colleagues** at their organizations. In an open-ended response, two participants note that the training prompted them to have wider conversations with their staff or change processes at their organization. Specifically, they describe developing systems to support youth as challenges arise, as well as shifting their program structure to better mitigate these challenges.

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<sup>1</sup> We received 4 bounced emails, reducing the total population size to 88.

## Changes in participants after YMHFA training

Exhibit 1 | n=39-40

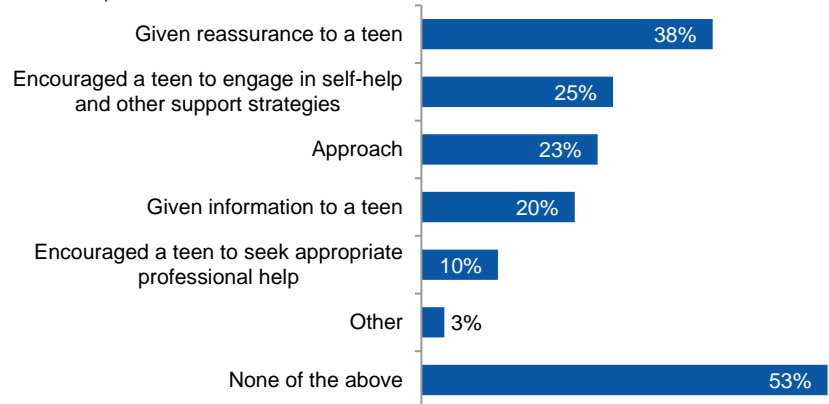


As part of our analysis, we compared responses to these questions between different demographic groups. In general, respondents with five or more years of experience as a Jewish educator agree more often with these statements compared to those with four years of experience or less.<sup>2</sup> This is also true for men compared to women,<sup>3</sup> and for respondents with the role of Rabbi, Director of Education, or Day School teacher compared to those holding other types of roles.<sup>4</sup>

It is unclear to what extent respondents who took the training have been able to apply what they learned to their work so far. Over half of respondents had not utilized any of the steps in the ALGEE action plan<sup>5</sup> yet (Exhibit 2). This may be expected, considering how recently some respondents have completed the training. Of the ALGEE action steps, the three that respondents most commonly say they have utilized so far in their work with Jewish teens are giving reassurance to a teen, encouraging a teen to engage in self-help, and the approach.

## ALGEE plan steps applied since the training

Exhibit 2 | n=40



For the most part, respondents seem to find the content of the training useful. Almost all participants (88%) think the YMHFA training skills they learned were either somewhat relevant or very relevant to their work with Jewish youth. In the open-ended responses, participants describe the training as impacting their work in three ways. First, respondents note increased awareness of the signs of a youth mental health challenge. Second, many participants note that the training provided a boost to their confidence, particularly their confidence to act in

<sup>2</sup> Due to the small sample size, we were not able to test the statistical significance of these differences. Any differences mentioned in this memo are merely observed.

<sup>3</sup> There is a slightly higher portion of women with four years of experience or less compared to men and compared to the other levels of experience.

<sup>4</sup> Roles in the second group: Educator/Teacher, Program Director, Youth Director, Youth Group Advisor, Assistant Director, Camp Counselor, Volunteer, Other.

<sup>5</sup> The ALGEE action plan is a tool for providing mental health first aid.

response to a mental health challenge. Third, others note that the training reaffirmed knowledge, ideas, or practices related to mental health that they already had in place. More generally, some respondents described the training as important and helpful overall, without providing much additional detail.

Overall, respondents who work with youth either at the middle school or high school grade level found the skills slightly more relevant than their colleagues working with elementary school aged youth and younger. While it might not help them directly in their day-to-day jobs, most of these participants working with younger children or students still felt the training was useful and insightful. There was one participant who noted that some of the themes in the training, such as suicide, were too intense for the age group that they work with.

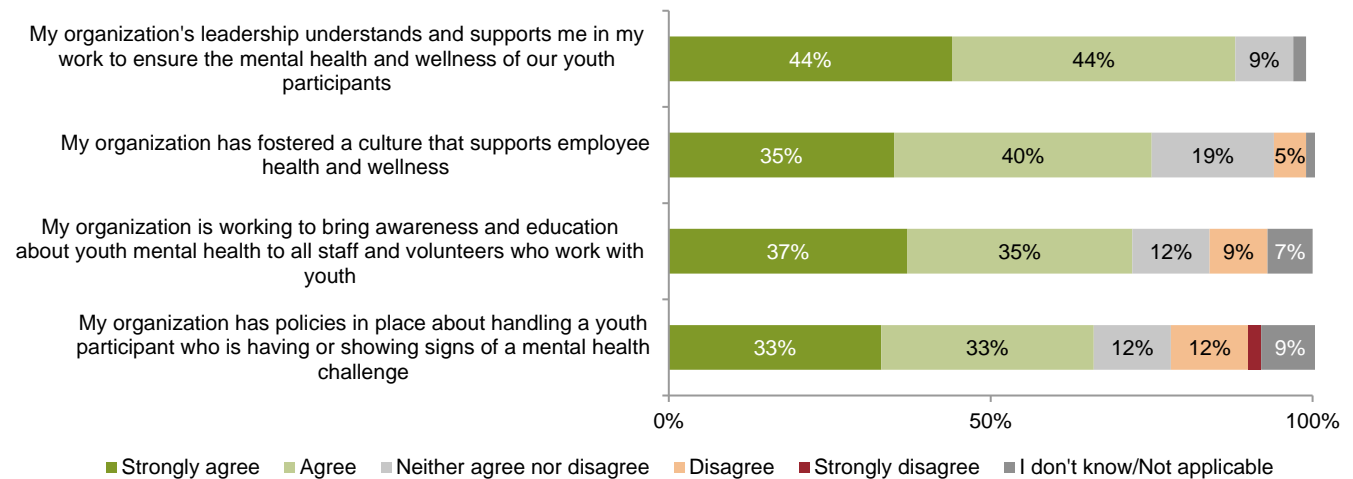
Respondents who had five or more years of experience, who are men, or who hold the role of Rabbi, Director of Education, or Day School teacher also seem to find the training more relevant compared to those who have less experience, are women, or have other roles in their organization.

### Organizational Capacity

Respondents generally seem to feel supported by their primary organization in their work around the mental well-being of youth. Almost all respondents say their organization’s leadership **understands and supports them in their work** related to the mental health and wellness of youth participants (Exhibit 3). Almost three-quarters of respondents agree that their organization is **trying to bring awareness and education about youth mental health** to all staff/volunteers working with youth. Slightly fewer respondents (66%) agree that their **organization has policies around handling youth going through mental health challenges**. Almost one-fifth said they didn’t know or that this question was not applicable to them.

#### How Jewish educators view the capacities of their organizations related to mental health and wellness

Exhibit 3 | n=43



Educators and other professionals who work with youth also feel like their own wellness is supported by their organization. Three-quarters of respondents said that their **organization fosters a culture that supports employee health and wellness**.

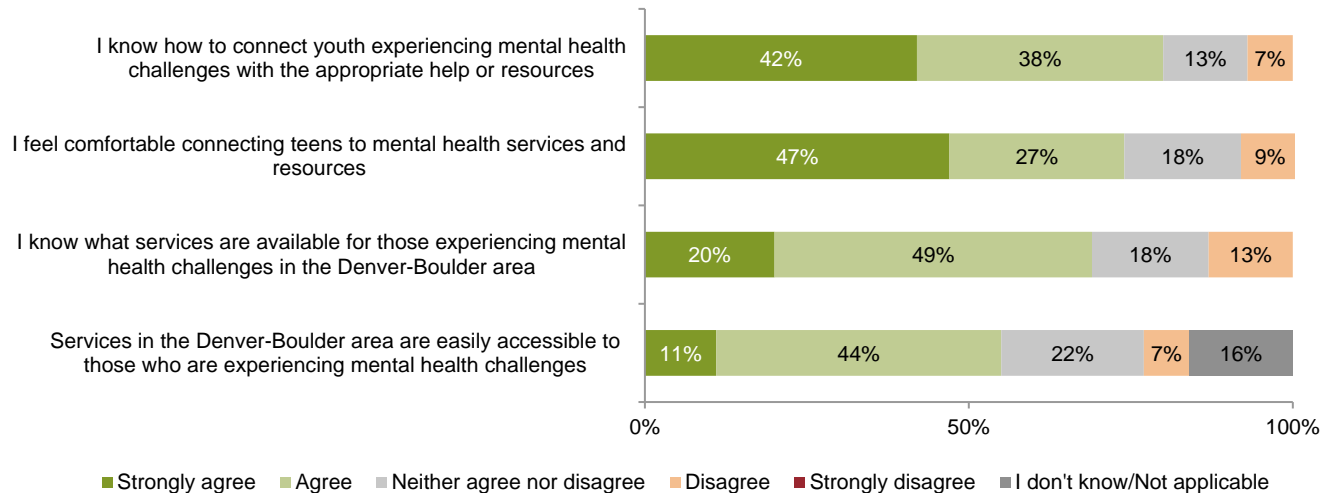
Compared to respondents who did not, respondents who did attend the YMHFA training agreed more often with the statement that their organization is working to bring awareness and education about youth mental health to all of their staff and volunteers. Respondents with four years of experience or less also agreed with this statement more often; they also agreed more often that their organization has policies in place around youth with mental health challenges and that their organization supports employee health and wellness.

## Community Services & Resources

Many respondents indicated competency around connecting youth with mental health help and resources in the local Denver-Boulder community. A majority of respondents agree or strongly agree that **they know how to connect youth with appropriate help and resources** and that they **feel comfortable** doing so (Exhibit 4).

### Assessment of Denver-Boulder mental health resources and services

Exhibit 4 | n=45



Comparatively fewer respondents answered strongly agree in regard to **knowing what services are available for those experiencing mental health challenges in Denver and Boulder**, but, overall, the majority still agree or strongly agree. Similarly, it seems as though fewer respondents know **how easy it is to access these services in the area**; a larger percentage were either neutral or answered “I don’t know” in response to that question compared to previous items.

Respondents who attended the YMHFA training agree more often with all of the survey items related to local services compared to respondents who did not attend the training. Respondents with four years of experience or less are less comfortable connecting teens to mental health services and resources. They also agree less often that they know what mental health services are available. Compared to women, men agree more often that they know how to connect youth to help or resources, and that they feel comfortable connecting teens to services and resources.

In response to questions about what additional resources or supports Jewish educators need to better care for the mental health and well-being of the Jewish teens they work with and what the broader Jewish community in Denver-Boulder could do to support its teens, a few themes rose to the surface.

Respondents resoundingly want some type of **resource guide**. They mention signs that could be posted around schools, resource sheets to share with teen providers in the area, and resource sheets that are updated regularly. Other suggestions include disseminating a list of local resources, setting up a helpline that youth can call, and creating materials that youth can engage with before the onset of a crisis.

**More trainings and more people trained** is another theme that emerged. Two individuals mentioned that it could be beneficial for more people in the community to receive trainings like the YMHFA training or engage in conversations around youth mental health to increase awareness in all spaces that teens participate in. One-third of respondents expressed that it would be beneficial to **increase the level of coordination, training, and awareness-raising** among the various stakeholders that make up the ecosystem of Jewish teen education. Suggestions range from tapping into existing youth-serving organizations to provide training to working directly with parents hosting large, community-wide events.

One-quarter of participants emphasized that providing youth-serving programs and organizations with **increased opportunities for trainings, professional development, and resources** would be most beneficial in supporting youth mental health and well-being. Specific suggestions include bringing in outside experts to speak at youth-serving organizations, continuing the trainings regularly due to high turnover, increasing the amount of training, and increasing investment. Five participants suggested **engaging directly with youth** through teen-leader trainings, creating a confidential buddy system, or by increasing the number of activities or events that youth can attend to prevent mental health challenges.

Other themes mentioned less often were **increased access to mental health professionals**, both in the workplace and at youth-facing programs. A few respondents mentioned that it would be useful to have access to mental health professionals in their workplaces. Two participants specifically noted that access to mental health professionals that understand Jewish culture would be important. Four participants mentioned having mental health professionals or additional youth-serving professionals on-site at youth-facing programs, such as psychologists, counselors, social workers, and coaches. One person mentioned creating a forum for sharing personal stories for those that are comfortable and want to help raise awareness.

## IMPLICATIONS OF FINDINGS

Participants in the YMHFA training have gained skills and confidence that are enhancing the well-being of Jewish teens in Denver and Boulder. Further, these Jewish youth educators are raising awareness with colleagues in their organizations. In general, the respondents to this survey indicate a comfort and readiness to draw on internal policies and procedures at their organization for support, as well as external mental health resources in the community. This is good news for Jewish teens and families in Denver and Boulder, but the survey results also raise possible next steps to support these and other Jewish professionals and volunteers who work with teens:

- Consider ways to help more Jewish organizations 1) bring awareness of and education about youth mental health to all staff and volunteers working with youth and 2) develop organizational policies and procedures that support staff or volunteers who engage with youth experiencing mental health challenges.
- Expand awareness and knowledge of the types of youth mental health services available in the Denver and Boulder area and how teens and youth leaders can access them.
- Encourage and support the development of an affinity group for Jewish youth educators interested in continuing the conversation on supporting youth mental health in Denver and Boulder.
- Consider what additional guidance should be given to organizations when selecting who from their organization will attend a mental health training—specifically around the age or grade-level with which the educators work.

# Appendix A: Survey Respondent Demographics

The following data tables represent the demographic makeup of the respondents who took the Youth Mental Health First Aid survey.

<b>How many years have you worked as a Jewish educator? (n=42)</b>	<b>Count</b>	<b>Percent</b>
Less than one year	3	7%
1–4 years	4	10%
5–9 years	13	31%
10–14 years	5	12%
15–19 years	4	10%
20 or more years	13	31%

<b>In which county or counties do you work as a Jewish educator? (Select all that apply) (n=42)</b>	<b>Count</b>	<b>Percent</b>
Adams County	1	2%
Arapahoe County	5	12%
Boulder County	9	21%
Broomfield County	2	5%
Denver County	35	83%
Douglas County	2	5%
Jefferson County	3	7%
Other county/counties not listed	2	5%

**Other responses: In which county or counties do you work as a Jewish educator? (n=2)**

N/A
Serve campers statewide

<b>Which of the following reflects your role in working with Jewish teens? (Select all that apply) (n=42)</b>	<b>Count</b>	<b>Percent</b>
Congregational Rabbi or Cantor	4	10%
Director of Education	10	24%
Educator/Teacher	17	40%
Day School Teacher	5	12%

<b>Which of the following reflects your role in working with Jewish teens? (Select all that apply) (n=42)</b>	<b>Count</b>	<b>Percent</b>
Program Director	12	29%
Youth Director	4	10%
Youth Group Advisor	4	10%
Assistant Director	3	7%
Camp Counselor	1	2%
Volunteer	4	10%
Other	4	10%

**Other responses: Which of the following reflects your role in working with Jewish teens? (n=4)**

Programmer/facilitator for teen educators
Regional director for national Jewish organization
Technical Support
I do not directly work with that age.

<b>[If selected “Educator/Teacher” or “Day School Teacher”] Which grade(s) do you teach? (Select all that apply) (n=20)</b>	<b>Count</b>	<b>Percent</b>
Pre-K	2	10%
Kindergarten	2	10%
1st grade	3	15%
2nd grade	2	10%
3rd grade	6	30%
4th grade	4	20%
5th grade	5	25%
6th grade	10	50%
7th grade	11	55%
8th grade	10	50%
9th grade	8	40%
10th grade	8	40%
11th grade	8	40%
12th grade	7	35%



<b>[If “Day School Teacher” NOT selected] Which of the following best describes the setting(s) where you work in the field of Jewish education and engagement? (Select all that apply) (n=28)</b>	<b>Count</b>	<b>Percent</b>
Camp (day or overnight)	6	21%
Congregation, synagogue, or synagogue movement	7	25%
Jewish day school	7	25%
Jewish supplementary/religious school	4	14%
Social action/service organization	4	14%
Youth movement	5	18%
Other Jewish communal organization	9	32%
Other (Please specify):	2	7%

**Other responses: [If “Day School Teacher” NOT selected] Which of the following best describes the setting(s) where you work in the field of Jewish education and engagement? (n=2)**

University Students - Hillel

Israel Trip

<b>With which gender do you identify? (n=42)</b>	<b>Count</b>	<b>Percent</b>
Female	28	67%
Male	13	31%
N/A	1	2%

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