Adolescent health



Adolescent health

Key indicator: Adolescent depression

Indicator details:

**	Definition:	Percent 11th-graders who felt sad or hopeless almost every day for more than two weeks during the previous 12 months
*	Numerator:	Number of 11th-graders who felt sad or hopeless almost every day for more than two weeks during the previous 12 months

» Denominator: Number of 11th-graders

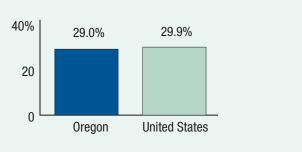
Significance of indicator: Depression is defined as a period of two weeks or longer during which there is either depressed mood or loss of interest or pleasure. It reflects a change in function such as problems with sleep, eating, energy, concentration and self-image.

Adolescents' developing brains, coupled with hormonal changes, make them more prone to depression. Between 20% and 30% of adolescents have at least one major depressive episode before they reach adulthood. In 2015, an estimated 3 million adolescents aged 12 to 17 in the United States had at least one major depressive episode. (51) Between one-quarter and one-third of adolescents forgo needed mental health care as they either lack access, adequate insurance coverage, stable living conditions, confidentiality or a combination of these factors. (51) As a result, untreated depression may lead to poor school performance, school dropout, strained family relationships, involvement with the child welfare or juvenile justice systems, substance abuse, and engaging in risky sexual behaviors. (52) Considering that suicide is the third leading cause of death in adolescents and young adults, adolescent depression is a major

public health issue that needs to be systematically addressed.

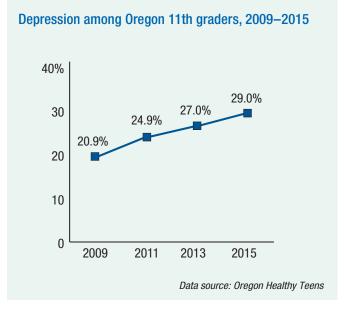
Status in Oregon: The percentage of 11th-graders in Oregon with selfreported depression increased between 2009 and 2015, from 20.9% to 29.0%.In 2015, the rate of self-reported adolescent depression in the United States was slightly higher than that in Oregon. (Please note that Oregon data only include 11th grade, while U.S. data include ninth to 12th grade; therefore, interpret the difference with caution.)

Depression among Oregon 11th graders and United States 9th–12th graders, 2015



Data source: National Center for Education Statistics

Disparities in Oregon: Compared to 11th-grade non-Hispanic Whites, a higher percent of non-Hispanic American Indian/Alaska Native, non-Hispanic Native Hawaiian/ Pacific Islander, non-Hispanic of two or more races, and Hispanic 11th-graders report depression. A lower percent of non-Hispanic Black and non-Hispanic Asian 11thgraders report depression, as compared to non-Hispanic Whites.



Depression among 11th graders, by race/ethnicity, Oregon, 2015 50 40 35.5% 33.7% 32.1% 31.0% 28.0% 30 26.1% 18.2% 20 10 White, Non-Black, Non-Asian, Non-Native Two or more Hispanic American 0 Hispanic Hispanic Indian/Alaska Hispanic Hawaiian/Pacific races, Non-Native, Non-Islander, Non-Hispanic Hispanic Hispanic

Data source: Oregon Healthy Teens Survey

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Key indicator: Adolescent well visit

Indicator details:

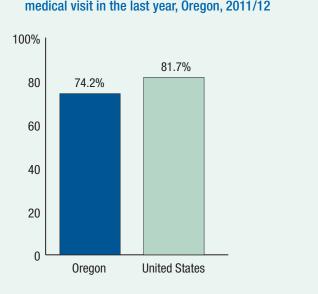
- » Definition: Percent of 11th-graders with a preventive medical visit in the past year
- » Numerator: Number of 11th-graders, with a preventive medical visit in the past year
- » Denominator: Total number of 11th-graders

Significance of indicator: Adolescence is one of the most dynamic periods of development—a transitioning to increased independence from parents and guardians. While most adolescents enjoy good health, physical, psychological and social changes during this period call for a unique approach to health care. (53) Health behaviors established in adolescence tend to persist into adulthood, and many chronic diseases first emerge in this age group.

Preventing initiation of high risk and harmful behaviors such as smoking and promotion of healthy behaviors such as physical activity during adolescence can have long-term effects into adulthood. (54) Receiving health care services, including annual adolescent preventive well visits, helps adolescents adopt or maintain healthy habits and behaviors, avoid health damaging behaviors, manage chronic conditions and prevent disease. (55)

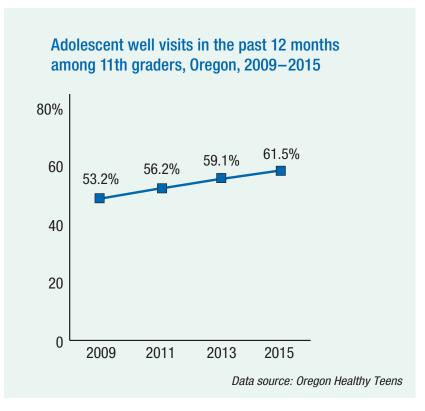
Status in Oregon: The percent of adolescents aged 12 to 17 years receiving a preventive medical visit was lower in Oregon than in the United States as a whole (74.2% v.s. 81.7%). However, the percent of 11thgraders in Oregon with a well visit in the past 12 months steadily increased from 2009 to 2015 (53.2% to 61.5%).

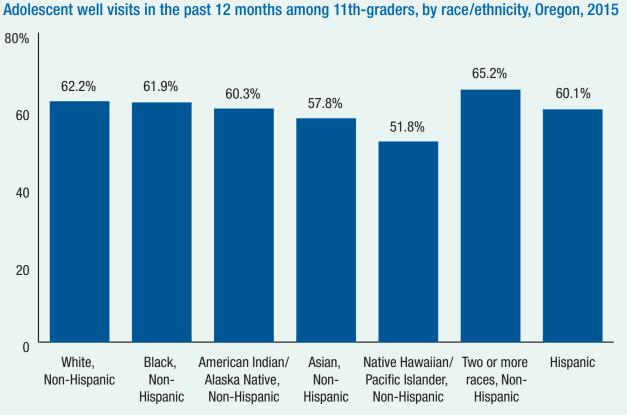
Disparities in Oregon: Compared to non-Hispanic Whites, a higher percent of non-Hispanic 11th-graders with two or more races report a well visit in the last 12 months. All other race/ethnicity groups have a lower percent of 11th-graders reporting a well visit in the last 12 months, as compared to non-Hispanic Whites.



Adolescents aged 12–17 years with a preventive

Data source: National Survey of Children's Health





Data source: Oregon Healthy Teens

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Key indicator: High school graduation rate

Indicator details:

**	Definition:	High school graduation rate (four year cohort) as measured by the Adjusted Cohort Graduation Rate
>>	Numerator:	Number of students who graduate in four years with a regular high school diploma
>>	Denominator:	Number of students who form the adjusted cohort for the graduating class

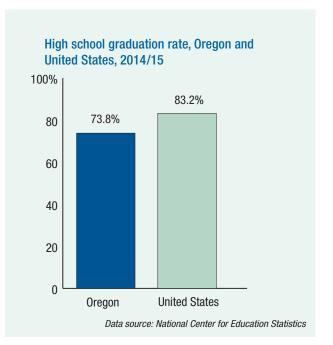
Significance of indicator: Health and education are inextricably intertwined, and a lack of education is one of the social determinants of poor health. Although education is highly correlated with income and occupation, evidence suggests that education exerts the strongest influence on health and is associated with lower death rates and levels of risky health behaviors.

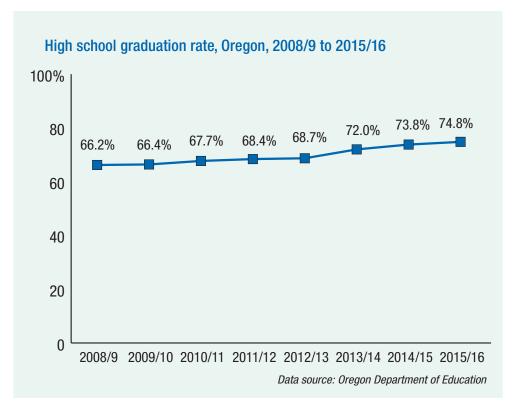
For example, the more schooling people have, the more money they earn, enabling them to purchase better housing in safer neighborhoods, healthier food, better medical care and health insurance. Furthermore, education enables people to access health information, acquire social support, strengthen social support and gain a sense of control over their lives. (56)

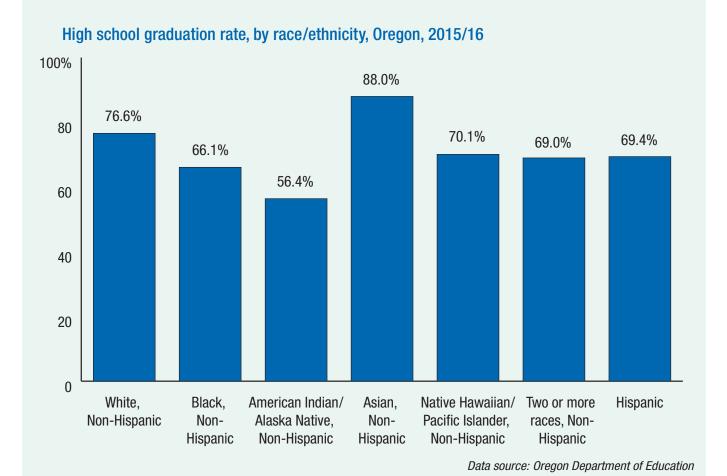
Unfortunately, 1.2 million students drop out of high school each year in the United States with poor and minority students most at risk for dropping out. (57) This indicator only includes data for adolescents attending public high schools, as data from private schools are unavailable.

Status in Oregon: The adjusted cohort high school graduation rate in Oregon was lower than the national rate in the 2014/15 school year (73.8% vs. 83.2%). In Oregon, the adjusted cohort high school graduation rate steadily increased between the 2008/09 and the 2015/16 school year, from 66.2% to 74.8%.

Disparities in Oregon: In Oregon, the highest high school graduation rates are among Asian non-Hispanic (88.0%) and White non-Hispanic (76.6%) students. The lowest rates among American Indian/Alaska Native non-Hispanic (56.4%) and Black non-Hispanic (66.1%) students.







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