

A row of colorful silhouettes of children engaged in various activities: a child in blue, a child in green reaching up, a child in orange on a swing, a child in purple, and a child in pink holding hands with another child.

NATIONAL INSTITUTE OF MENTAL HEALTH

STRATEGIC FRAMEWORK FOR ADDRESSING YOUTH MENTAL HEALTH DISPARITIES

Fiscal Years 2022–2031



National Institute
of Mental Health

The background features a stylized illustration of children playing on a swing set. A child is swinging on a swing in the center, with other children standing nearby. The scene is decorated with birds flying in the sky and butterflies on the ground. The entire illustration is rendered in a semi-transparent, artistic style. The word 'PURPOSE' is written in large, white, uppercase letters within a white rectangular border at the top of the page.

PURPOSE

The purpose of the National Institute of Mental Health (NIMH) Strategic Framework for Addressing Youth Mental Health Disparities for fiscal years 2022–2031 is to provide a conceptual approach to help guide NIMH activities, including research funding, stakeholder engagement, and workforce development, related to research on the mental health needs of youth impacted by racial and ethnic health disparities. For the purposes of this Framework, “youth” is defined as persons aged 24 and under.



FOREWORD

I am pleased to introduce the NIMH Strategic Framework on Youth Mental Health Disparities. Developed in collaboration with the National Institute on Minority Health and Health Disparities, the *Eunice Kennedy Shriver* National Institute of Child Health and Human Development, and multiple other partners across NIH, HHS, and the federal government, and informed by researchers and care providers across the country, this Framework is a living document that summarizes NIMH's plans and priorities for guiding research to address and reduce mental health disparities among underserved and underrepresented youth (persons aged 24 and under) by 2031.

Our country is in the midst of a youth mental health crisis, including alarming increases in youth suicide in recent years. We also know that youth exposed to racism, discrimination, and other adverse experiences, as well as those from disadvantaged and underserved communities, are disproportionately impacted by mental illnesses, and frequently experience reduced access to high-quality, evidence-based mental health services and receive fewer follow-ups in a variety of provider settings. Addressing these challenges will require sustained attention, effort, and resources – all built on a foundation of high-quality research.

As the Director of NIMH's Office for Disparities Research and Workforce Diversity, I am committed to the research mission of informing policies and practices aimed at reducing mental health disparities, promoting equity, and addressing the needs of youth from disadvantaged communities and those who are underrepresented in clinical research, including but not limited to racial and ethnic minoritized youth, and sexual and gender minoritized youth. The Strategic Framework serves as NIMH's blueprint for accomplishing this mission. I invite you to come with us and hold us accountable as we not only implement the Framework, but also continuously refine it to meet evolving challenges and needs, in collaboration with stakeholders such as people with mental illnesses and their families, patient advocates and advocacy groups, health care providers, researchers, and state, local, and federal government partners.

Thank you for your support and attention to this important area of research.

Sincerely,

Christina P.C. Borba, Ph.D., M.P.H.
Director, NIMH Office for Disparities Research and
Workforce Diversity





MESSAGE FROM THE NIMH DIRECTOR

As NIMH Director, I am committed to supporting research that addresses mental health disparities – including youth mental health disparities – and informs ways to improve equity in access, utilization, and quality of care for individuals and groups impacted by health disparities. This is a priority that cuts across the whole of NIMH’s mission. We need considerably more research focused on innovative solutions for minoritized and underserved youth if we are to truly make a difference. This Strategic Framework represents a reaffirmation of NIMH’s commitment to reducing mental health disparities in youth by 2031 – not only by launching new research programs focused specifically on supporting minoritized youth, but also by integrating this goal more deeply into every aspect of the work that we do across NIMH, ultimately informing mental health policies and practice in real world settings. In collaboration with our partner agencies and all of you, I fully embrace this opportunity to combat systemic inequities in mental health that impact youth from minoritized groups, and to bring about lasting change for the better in the mental health of all young people.

Sincerely,

Joshua A. Gordon, M.D., Ph.D.
Director of NIMH





NATIONAL INSTITUTES OF HEALTH

The National Institutes of Health (NIH), within the U.S. Department of Health and Human Services (HHS), is the nation’s biomedical research agency – making and supporting vital, lifesaving discoveries and improvements to the health of the nation. The mission of the NIH is to seek fundamental knowledge about the nature and behavior of living systems and apply that knowledge to enhance health, lengthen life, and reduce illness and disability.

NATIONAL INSTITUTE OF MENTAL HEALTH

The National Institute of Mental Health (NIMH) is the lead federal agency for research on mental illnesses. The mission of the NIMH is to transform the understanding and treatment of mental illnesses through basic and clinical research, paving the way for prevention, recovery, and cure. To carry out this mission, NIMH, as established by the Mental Health Act of 1946 and in accordance with Title IV of the Public Health Service Act, conducts and supports biomedical and behavioral research, health services research, research training, and health information dissemination with respect to the causes, diagnosis, treatment, management, and prevention of mental illnesses.

MENTAL HEALTH DISPARITIES

The NIH National Institute on Minority Health and Health Disparities (NIMHD) defines a health disparity as a health difference, on the basis of one or more health outcomes, that adversely affects disadvantaged populations. U.S. populations negatively impacted by health disparities include Blacks/African Americans, Hispanics/Latinos, American Indians/Alaska Natives (AI/AN), Asian Americans (AA), Native Hawaiians and other Pacific Islanders (NHPI), socioeconomically disadvantaged populations, underserved rural populations, and sexual and gender minorities. Mental health disparities may arise in these populations as a result of differences in the incidence, prevalence, or course of mental illnesses, access to health care, quality of care, experiences of trauma and adversity, and/or inequities in social determinants of health (e.g., education, economic stability, quality of housing, access to health care).

STRATEGIC FRAMEWORK FOR ADDRESSING YOUTH MENTAL HEALTH DISPARITIES

NIMH initiated the Strategic Framework for Addressing Youth Mental Health Disparities with the overarching goal of advancing scientific knowledge that can be used to inform policies and practices that will reduce mental health disparities in youth by 2031.

This Strategic Framework is structured to align with and supplement the [NIMH Strategic Plan for Research](#) and the [NIH Minority Health and Health Disparities Strategic Plan](#). In addition, the Framework complements the priorities of collaborating NIH Institutes, Centers, and Offices (ICOs), including but not limited to NIMHD and the *Eunice Kennedy Shriver* National Institute of Child Health and Human Development (NICHD). The NIMH Office for Disparities Research and Workforce Diversity developed the Strategic Framework, which was refined based on feedback received at the December 2021 conference [Identifying Opportunities and Priorities in Youth Mental Health Disparities Research](#), co-hosted by NIMH, NIMHD, and NICHD. Through 2031, NIMH may periodically update the Framework based on stakeholder feedback, emerging challenges and opportunities, and research advances.

The Strategic Framework encompasses three Components:



COMPONENT 1

Addressing Knowledge Gaps and Expanding Research Opportunities



COMPONENT 2

Extending and Supporting Stakeholder Engagement



COMPONENT 3

Growing the Youth Mental Health Disparities Research Workforce

NIMH seeks to achieve progress in these Components by supporting workforce development and research, and through outreach to and collaboration with a variety of stakeholders. Under each Component, examples of potential actions toward progress as well as examples of potential metrics to assess progress are presented. These examples are not meant to be exhaustive and will be updated and refined as progress is made.

Image source: NIH flickr/UCSB Action Lab West, Matthew Cieslak



COMPONENT 1: ADDRESSING KNOWLEDGE GAPS AND EXPANDING RESEARCH OPPORTUNITIES

NIMH will encourage a full and diverse range of research – including basic science, translational science, and services and implementation research – focused on youth mental health disparities through the development of new initiatives and the publication of new Funding Opportunity Announcements (FOAs). These efforts will focus on promoting mental health equity by supporting research on ways to decrease risk, increase resilience and protective factors, improve access to and utilization of quality care, and improve outcomes of treatment and services among populations negatively impacted by mental health disparities.

Examples of potential NIMH actions to address knowledge gaps and expand opportunities for research on youth mental health disparities may include efforts to:

- Support research to elucidate the mechanisms of action of social determinants of mental health, how they can be modified, and how they drive risk of, resilience to, and protection from the development of mental illnesses.
- Support research to identify and understand contextualizing factors, including environmental and historical factors, their impact on biology, emotion, cognition, and behavior, and how they mediate mental health disparities.
- Support research on how local, state, and federal policies, laws, and regulations impact social determinants of mental health, mental health service delivery, and outcomes among youth from populations impacted by mental health disparities.
- Support research on variation in biological and genomic processes within and among diverse populations and settings historically underrepresented in genetics research.
- Support research, including longitudinal studies, to understand and measure how childhood experiences confer resilience to or risk for mental illnesses and suicidal thoughts and behaviors in youth from populations impacted by mental health disparities.

- Support research to improve the specificity of biomarkers and accuracy of culturally appropriate diagnostic assessments (including risk calculators) for youth from populations impacted by mental health disparities.
- Support the development and validation of culturally appropriate preventive interventions, including systems-level approaches (e.g., in classrooms, schools, communities), for youth and parents from populations impacted by mental health disparities.
- Support the optimization of existing evidence-based approaches to minimize bias in diagnosis and treatment, and to improve continuity of care and mental health outcomes, for youth from populations impacted by mental health disparities.
- Support research to address co-occurring mental illnesses in youth with intellectual and developmental disabilities, including youth with intersectionality with other high-risk groups.
- Support research to improve implementation and availability of mental health prevention and treatment interventions and services, as well as programs to support youth and family functioning, within youth-serving institutions (e.g., educational settings, community based after-school programs, faith-based programs, child welfare programs, juvenile justice settings).
- Support research that uses innovative assessment and analytic methods to examine sub-populations and low base-rate behaviors and to address complex, multi-modal datasets.
- Support translational research on developing, testing, and implementing prevention and treatment interventions that are relevant to communities impacted by health disparities abroad range of ages (e.g., infancy through young adulthood).
- Support research from collaborative teams that include community partners to ensure the outcomes and interpretation of the research reflect the priorities of the population participating in the research.
- Support research to develop targeted interventions by examining risk and resilience within populations impacted by youth mental health disparities.

To estimate progress in addressing knowledge gaps and expanding research opportunities, NIMH could examine:

- Notices of Special Interest (NOSIs) focused on youth mental health disparities.
- FOAs to address youth mental health disparities.
- Grants funded on interventions targeting youth mental health disparities.
- Bibliometrics of NIMH-supported publications (e.g., Relative Citation Ratios).
- Advances related to improving suicide risk prevention and detection among youth from populations impacted by mental health disparities.
- Advances related to improving access, engagement, and effectiveness of evidence-based mental health treatment and services for youth from populations impacted by mental health disparities.
- Advances related to the impact of laws, policies, and structural determinants of health on youth from populations impacted by mental health disparities.



COMPONENT 2: EXTENDING AND SUPPORTING STAKEHOLDER ENGAGEMENT

NIMH will engage in outreach, collaboration, and dissemination efforts with youth with mental illnesses and their families, those with interest in or impacted by youth mental health disparities, and those with research expertise. Stakeholders include but are not limited to: patients, families, persons with lived experience, mental health researchers and trainees, other scientists, a range of federal agencies within and outside of HHS, policy makers, non-governmental organizations, educational organizations such as colleges and universities, health care service administrators and payors, clinical care providers, and members of the public. Stakeholder engagement plays an important role in inspiring innovations in science, ensuring the public health relevance of research, encouraging the uptake of evidence-based practices and interventions, decreasing stigma and stereotyping, promoting responsible interpretation and communication of research findings, and increasing overall acceptability of mental health treatments and services, along with public awareness – thus strengthening the public health impact of research.

While NIMH maintains longstanding relationships with numerous stakeholders, additional efforts to include a diversity of perspectives in mental health research will enhance relationships with researchers and populations impacted by health disparities and increase the impact of NIH-supported scientific discoveries. Engagement helps to avoid “othering” and reinforcing stereotypes about youth and families impacted by racial and ethnic health disparities.

Examples of NIMH actions to extend and support stakeholder engagement may include efforts to:

- Seek sustained engagement with stakeholders to inform NIMH’s strategies for supporting research that addresses youth mental health disparities.
- Disseminate information about NIMH-supported advances in research on reducing youth mental health disparities.
- Facilitate outreach through professional society and advocacy group meetings to build networking opportunities, connect scientists and community members, and exchange information about the needs of individuals and communities, obstacles to research, and emerging research opportunities related to youth mental health disparities.
- Publish via the NIMH website and social media channels educational materials tailored for families and youth from groups with mental health disparities.
- Encourage NIMH-supported researchers to partner with communities in the development of their research projects, including but not limited to community-based participatory research.
- Promote collaborations across NIH ICOs (e.g., NICHD, NIMHD, the Office of Behavioral and Social Sciences Research (OBSSR)) and with other HHS agencies (e.g., Centers for Medicare and Medicaid Services (CMS), Substance Abuse and Mental Health Services Administration (SAMHSA), Indian Health Service (IHS)) to understand where the gaps in knowledge exist, and how to widely implement evidence-based practices.

To estimate progress in stakeholder engagement, NIMH could examine:

- NIMH-initiated public meetings and outreach activities (e.g., number, reach, impact) about strategies for reducing youth mental health disparities.
- NIMH staff attendance at scientific meetings that cover topics related to youth mental health disparities.
- NIMH data reports related to youth mental health disparities in response to requests from public policy makers.
- Stakeholder engagement with public-facing NIMH messages and educational resources related to youth mental health disparities.
- Investigator-initiated applications incorporating community engagement.
- Collaborations addressing youth mental health disparities across NIHICOs (e.g., NICHD, NIMHD, OBSSR) and with other HHS agencies (e.g., CMS, SAMHSA, IHS).



COMPONENT 3: GROWING THE YOUTH MENTAL HEALTH DISPARITIES RESEARCH WORKFORCE

NIMH will promote and support the growth and retention of a diverse research workforce, including those well-trained in youth mental health disparities research. To achieve this, NIMH will support a range of research training and career development programs and funding opportunities to build, enhance, and sustain pathways to independent research careers for youth mental health disparities researchers.

Examples of NIMH actions to grow the youth mental health disparities research workforce may include efforts to:

- Promote the training, retention, mentoring, and career transition of investigators in the youth mental health disparities research workforce.
- Participate in cross-NIH programs that promote diversity and inclusivity of the workforce in biomedical research.
- Raise awareness among early-career investigators about the variety of positions that may be involved in youth mental health disparities research.
- Support training for investigators on minimizing bias and other research equity issues.

- Enhance technical assistance, outreach, and capacity-building support to Historically Black Colleges and Universities and other Minority Serving Institutions on applying for research funding, including but not limited to research focused on youth mental health disparities.
- Support the inclusion of diverse perspectives on peer review panels to better appreciate youth mental health disparities research topics.
- Support mechanisms that encourage institutions to diversify their student and faculty populations to enhance the participation and inclusion of individuals from groups that are impacted by mental health disparities.

To estimate progress in growing the youth mental health disparities research workforce, NIMH could examine:

- Grants from Early-Stage Investigators (ESIs) on topics related to youth mental health disparities.
- Individuals supported by NIMH research training and career development mechanisms studying topics related to youth mental health disparities.
- NIMH-supported trainees and ESIs studying topics related to youth mental health disparities who successfully complete the career stage being supported (e.g., completion of pre- or post-doctoral training; transition from “K” award to independent research project grant).
- NIMH-supported trainees and ESIs studying topics related to youth mental health disparities who are successfully retained in the youth mental health disparities research workforce 5-10 years after initial NIMH support.
- Dissemination/reach of NIMH-supported technical assistance and research equity training resources to the youth mental health disparities research workforce.

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