
2022

An Overview of the DMF Wellness Survey

Mental, Physical, and Social Health in North Dakota
and Northwest Minnesota

Presented by



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About the DMF Wellness Survey

Dakota Medical Foundation distributes a survey to parents and service providers across North Dakota and Northwest Minnesota to help gauge the mental, physical, and social health of both children and adults in the region. It is distributed via legacy and social media, email, and personal asks and is completed by caring adults and professionals ranging from psychiatrists to licensed social workers to school principals, among many others.

While the results of the inaugural survey in 2021 were troubling, a year later, negative trends have continued their downward spiral. Despite the end of the COVID-19 pandemic, parents and providers alike are seeing the effects of it persist, with rates of anxiety, screen time, and suicidal ideation continuing to climb.

This overview highlights some of the most noteworthy findings from the 2022 survey and provides some insights from survey-takers into the root causes of and potential solutions to the mental health epidemic affecting our region. This report is not designed to be scientific in nature, nor is its intent to replace or diminish the work of any other regional organizations doing research, data collection, or public health messaging. We view our role as a convener of those closest to these challenges, an aggregator of potential solutions, and an igniter of action.

Panel Discussion

On November 2, 2022, Dakota Medical Foundation held a mental health event and panel discussion, sponsored by Matto Foundation, centered around the findings of this survey. It served as a forum for panelists and community members to discuss the significant challenges identified among kids and families in our region and to identify promising solutions going forward.



Panelists included (L to R): Dan Borsheim (Valley Christian Counseling Center), Kathy Hogan (ND Senate), Dr. Andrew McLean (UND School of Medicine & Health Sciences), Patti Senn (Soul Solutions Recovery Center), Judy Lee (ND Senate), and Pat Traynor (DMF).

Panel Takeaways

- More community-wide parent education
- More events to meaningfully connect people
- Consider retention strategies for providers, not just recruitment
- Develop education on healthy technology use
- Educators are not trained to be mental health providers
- Re-activate churches and community groups

Who Took the Survey

316 INDIVIDUALS

Service Providers Survey

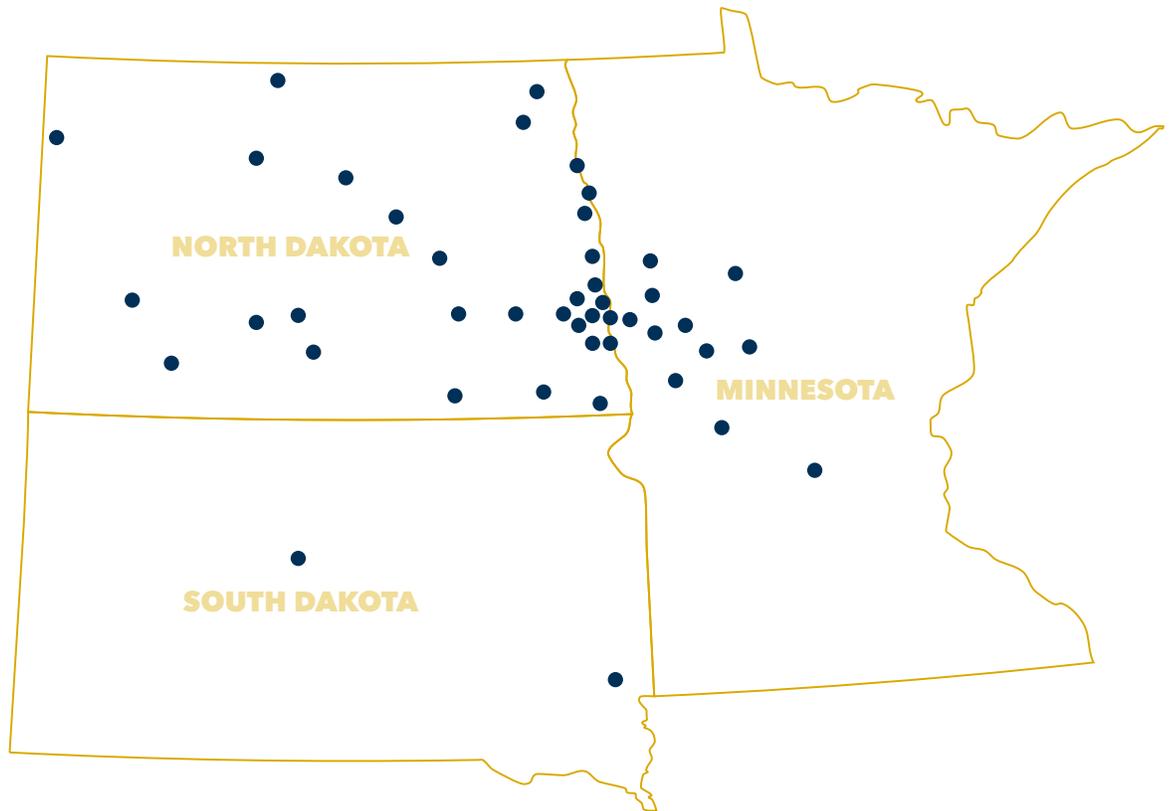
121 INDIVIDUALS

- Associate superintendent
- Administrator
- Behavior analyst
- Behavior modification specialist
- Care coordinator
- CEO
- Children’s director
- Community services supervisor
- Counselor/therapist
- Court officer
- Development director
- Drug court coordinator
- Early interventionist
- Faith community nurse
- Family advocate
- Guardian ad litem
- Juvenile court supervisor
- Level 1 provider-in-training at Applied Behavioral Analysis (ABA) clinic
- Mental health case manager
- Part-time daycare assistant
- Principal
- Probation officer
- Psychiatrist/physician
- Psychologist
- Psychometrician
- Sign language interpreter
- Social worker
- Teacher
- University professor
- Victim advocate

Parent Survey

195 INDIVIDUALS

- Parent
- Step-parent
- Grandparent
- Mentor
- Other relative



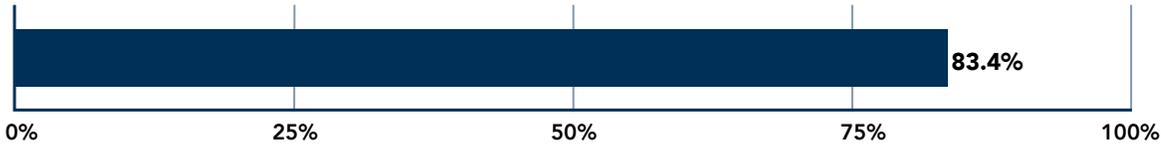
Summary of Service Providers Survey

Service Providers Survey

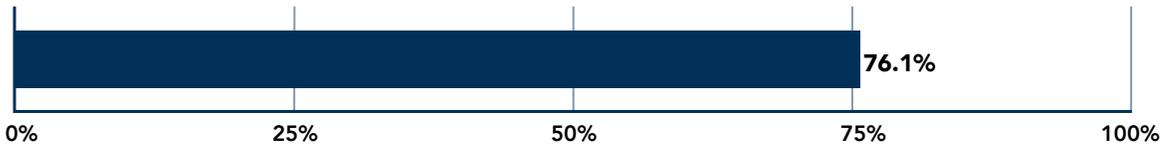


MENTAL HEALTH

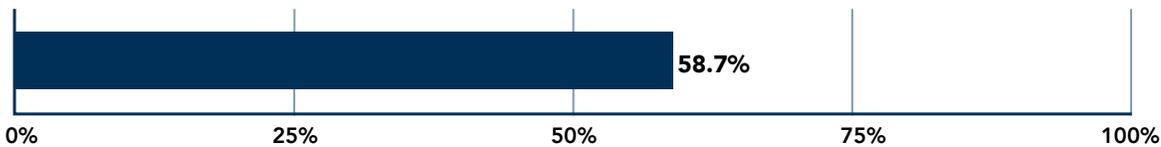
83.4% of service providers surveyed felt the mental health of **YOUTH** in their community has **DECLINED** in the past 12 months.



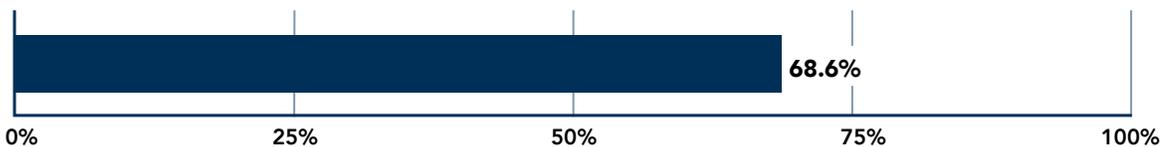
76.1% of service providers surveyed felt the mental health of **ADULTS** in their community has **DECLINED** in the past 12 months.



58.7% of service providers surveyed felt the **YOUTH** in their community have **DECLINED** in feeling optimistic about their future.



68.6% of service providers surveyed felt the **ADULTS** in their community have **DECLINED** in feeling optimistic about their future.

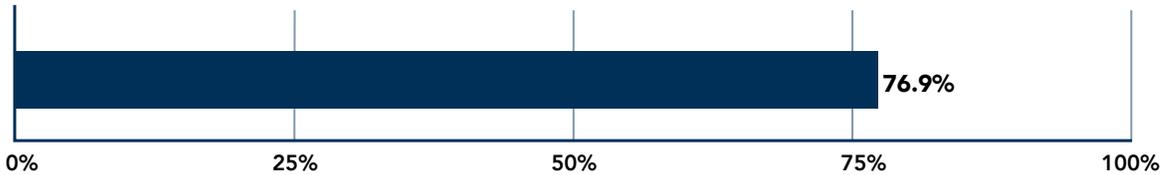


In the 2020-2021 school year in North Dakota:

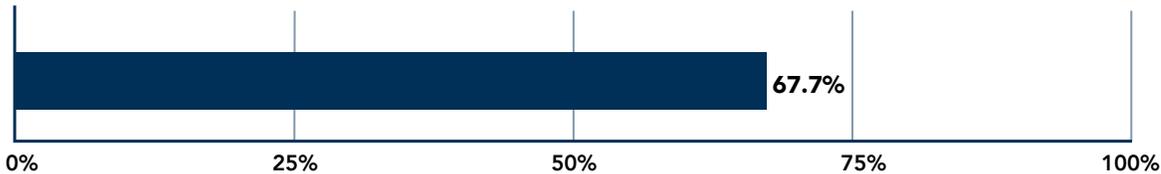
- **More than one-quarter** of middle school students and nearly one-third of high school students reported **feeling sad or hopeless**.

STRESS

76.9% of service providers surveyed felt **YOUTH** in their community have **DECLINED** in their ability to cope with stress in the past 12 months.



67.7% of service providers surveyed felt **ADULTS** in their community have **DECLINED** in their ability to cope with stress in the past 12 months.



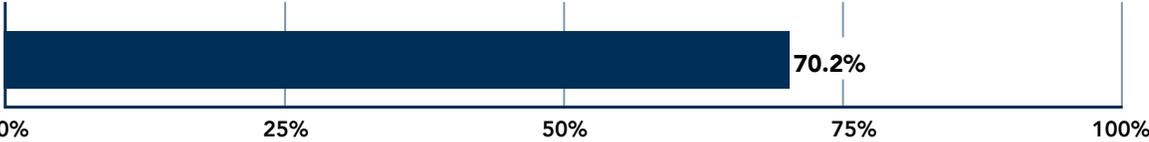
“There’s too much pressure to be the best at sports or activities. Everything has become highly competitive, causing kids and parents to become more judgmental and more cruel to one another.”

- Anonymous Parent

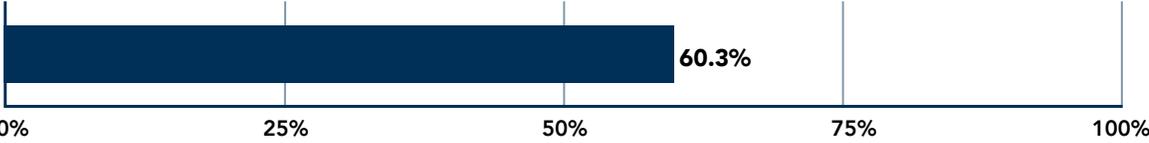
Service Providers Survey

SUICIDE

70.2% of service providers surveyed felt the number of **YOUTH** in their community experiencing thoughts of self-harm or suicide has **INCREASED** in the past 12 months.



60.3% of service providers surveyed felt the number of **ADULTS** in their community experiencing thoughts of self-harm or suicide has **INCREASED** in the past 12 months.

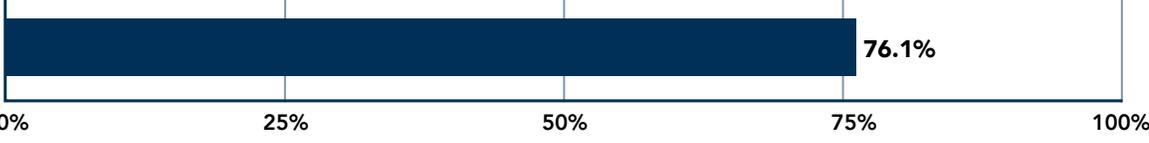


Suicide is the **second-leading cause of death in North Dakota for ages 10-44.**

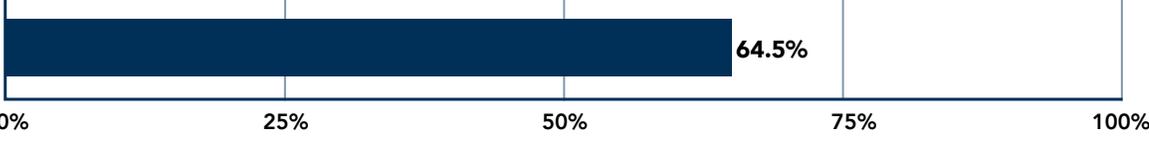
American Foundation for Suicide Prevention

SUBSTANCE USE

76.1% of service providers surveyed felt the number of **YOUTH** in their community using substances (nicotine, alcohol, cannabis, and other drugs not prescribed to them) has **INCREASED** in the past 12 months.



64.5% of service providers surveyed felt the number of **ADULTS** in their community using substances (including nicotine, alcohol, cannabis, and other drugs not prescribed to them) has **INCREASED** in the past 12 months.

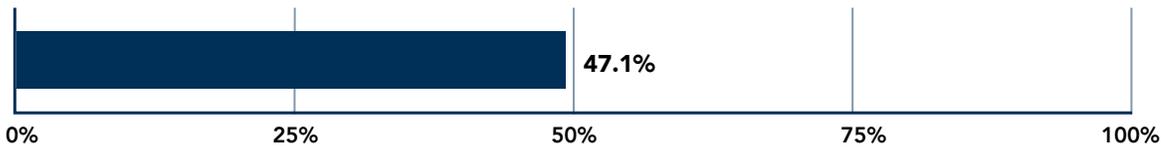


North Dakota has among the **highest rates** in the nation in "recent alcohol use" and binge drinking, regardless of age group.

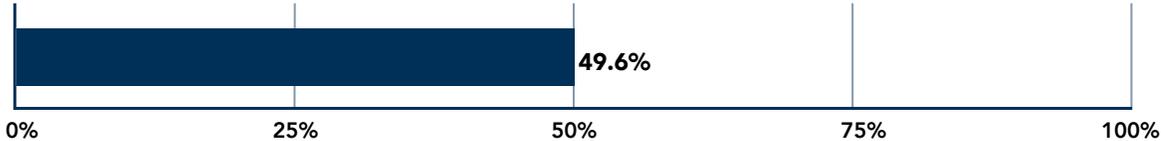


ABUSE AND VIOLENCE

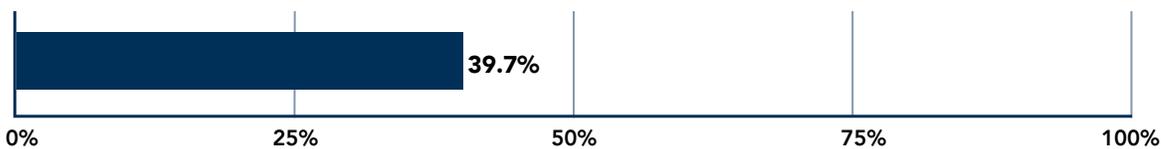
47.1% of service providers surveyed felt the number of **YOUTH** in their community experiencing physical abuse has **INCREASED** in the past 12 months.



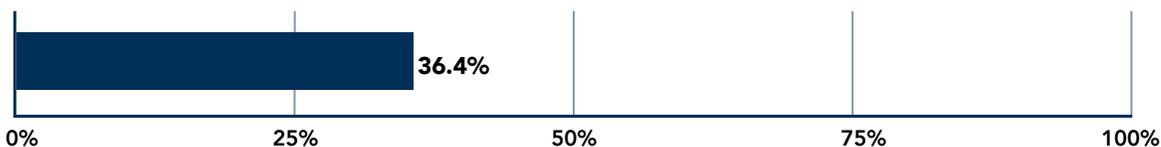
49.6% of service providers surveyed felt the number of **ADULTS** in their community experiencing physical abuse has **INCREASED** in the past 12 months.



39.7% of service providers surveyed felt the number of **YOUTH** in their community experiencing sexual abuse has **INCREASED** in the past 12 months.

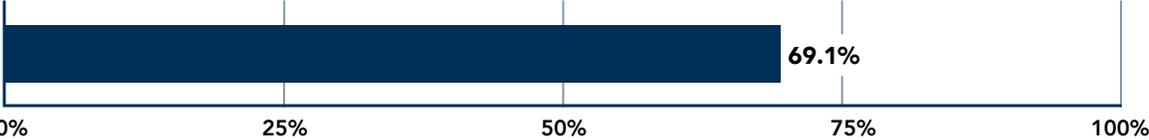


36.4% of service providers surveyed felt the number of **ADULTS** in their community experiencing sexual violence has **INCREASED** in the past 12 months.

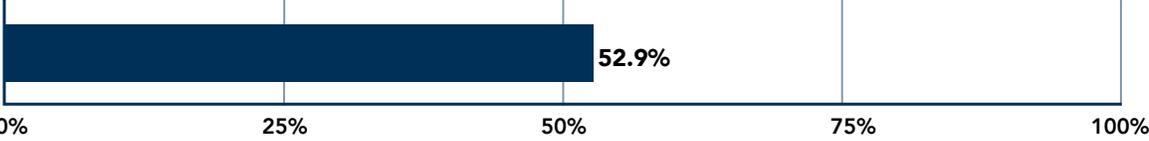


Service Providers Survey

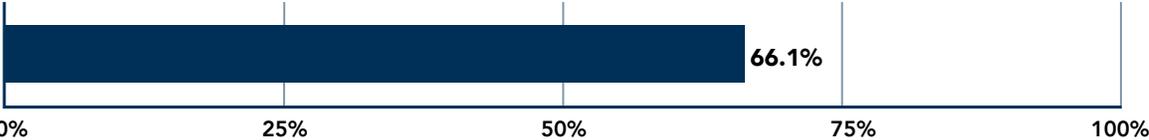
69.1% of service providers surveyed felt the number of **YOUTH** in their community experiencing psychological abuse has **INCREASED** in the past 12 months.



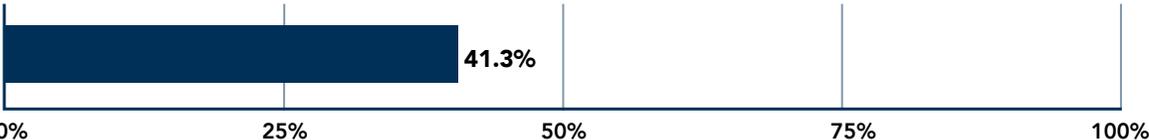
52.9% of service providers surveyed felt the number of **ADULTS** in their community experiencing psychological abuse has **INCREASED** in the past 12 months.



66.1% of service providers surveyed felt the number of **YOUTH** in their community experiencing harassment or bullying (including by phone, text, and online) has **INCREASED** in the past 12 months.



41.3% of service providers surveyed felt the number of **ADULTS** in their community experiencing harassment or bullying (including by phone, text, and online) has **INCREASED** in the past 12 months.



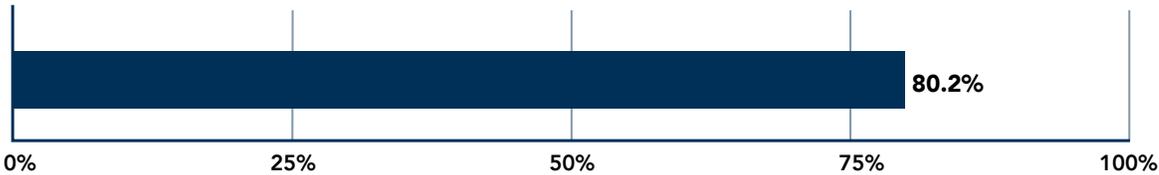
“Kids have been isolated in their homes, where they have witnessed and experienced more domestic violence and physical, sexual, and emotional abuse.”

- Anonymous Provider

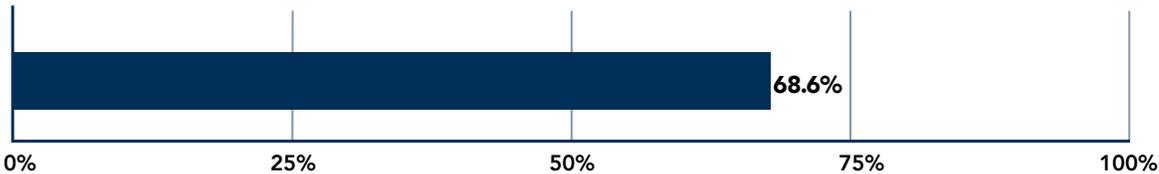


DEVICE AND SOCIAL MEDIA USE

80.2% of service providers surveyed felt **YOUTH** in their community have **DECLINED** in the healthy use of electronic devices and/or social media.



68.6% of service providers surveyed felt **ADULTS** in their community have **DECLINED** in the healthy use of electronic devices and/or social media.



“Parents are no longer willing to take away devices, so we have kids staying up all night on their phones, games, and computers. Kids are exposed to more social media with little to no supervision from parents, so they are getting a warped sense of appropriate social behavior ... Phones and social media are the worst contributors to behaviors in school.

- Anonymous Provider

Electronic device use showed a clear exposure-response relationship with having at least one **suicide risk factor**.

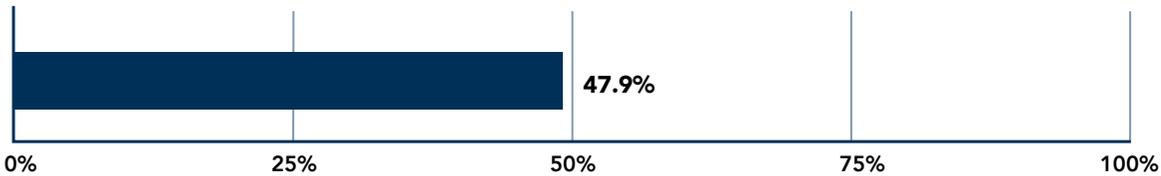
Association for Psychological Science

Service Providers Survey

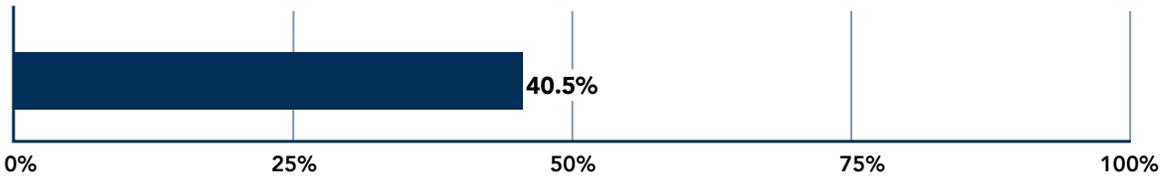


EXERCISE

47.9% of service providers surveyed felt the number of **YOUTH** in their community getting adequate exercise has **DECLINED** in the past 12 months.



40.5% of service providers surveyed felt the number of **ADULTS** in their community getting adequate exercise has **DECLINED** in the past 12 months.



33.1% of North Dakota's population and **30.7%** of Minnesota's population are now **considered obese** (BMI of 30 or more).
United Health Foundation

“We need better general health screenings for various deficiencies that are known to be relevant to depression: Vitamin D levels, iron levels, Vitamin B levels, hemoglobin levels, enzyme deficiencies, etc.”

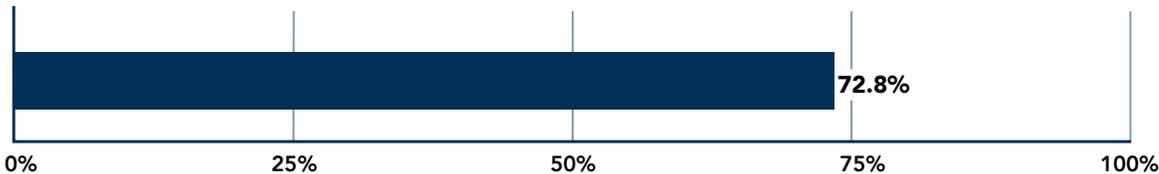
- Anonymous Parent

Exercise as a treatment for depression **can be recommended** as a stand-alone treatment or as an adjunct to antidepressant medication and ... can be considered an evidence-based treatment for the management of depression.

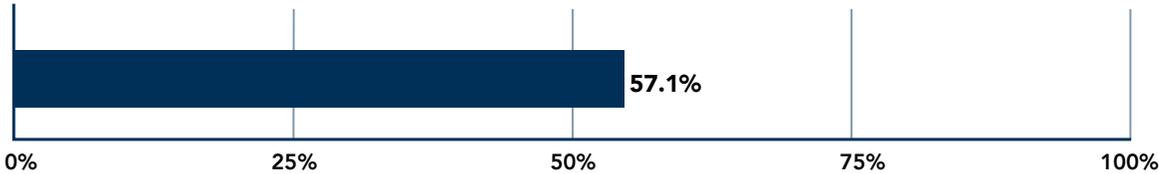
National Institutes of Health



72.8% of service providers surveyed felt the number of **YOUTH** in their community getting adequate sleep has **DECLINED** in the past 12 months.



57.1% of service providers surveyed felt the number of **ADULTS** in their community getting adequate sleep has **DECLINED** in the past 12 months.



Limit the activities your child is in so that they get an appropriate amount of sleep, time to spend on school work, and with family.

- Anonymous Parent

Mental health is a critical component of good sleep. Those who rate their general mental health as "excellent" or "very good" are six times more likely to get high-quality sleep compared to those who rate their mental health as "fair" or "poor" – 50% vs. 8%, respectively.

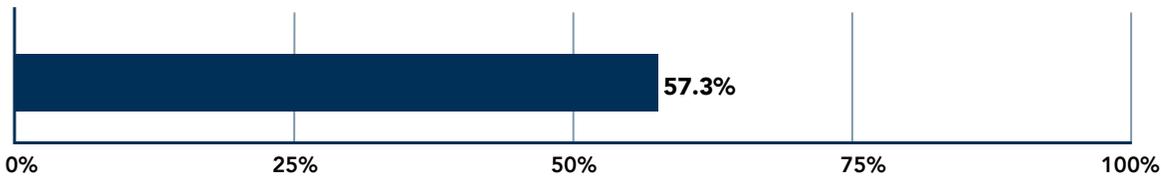
Gallup

Service Providers Survey

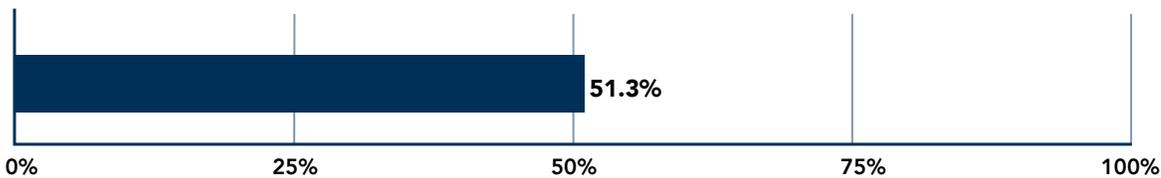


SOCIAL INTERACTION

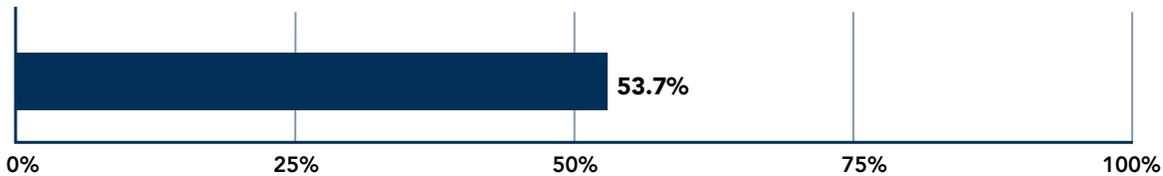
57.3% of service providers surveyed felt the **YOUTH** in their community have **DECLINED** in getting enough face-to-face social interaction with peers in the past 12 months.



51.3% of service providers surveyed felt the **ADULTS** in their community have **DECLINED** in getting enough face-to-face social interaction with peers in the past 12 months.



53.7% of service providers surveyed felt **YOUTH** in their community have **DECLINED** in getting enough face-to-face social interaction with caring adults in the past 12 months.



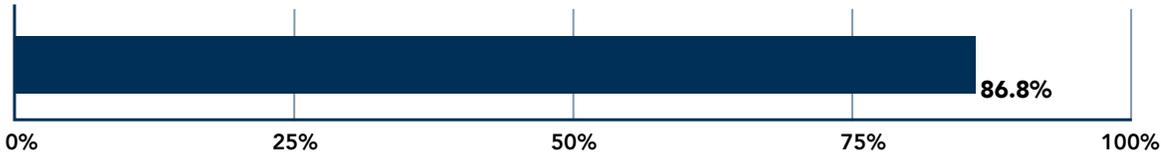
“We don’t spend enough time with people who disagree with us. When we all watched the same TV channels, shows were mainstreamed and brought people closer to the middle. When we didn’t have the internet to find whatever answers fit our worldview, we had to accept that we’re wrong sometimes, and again, that brought us closer to the middle ... Now it’s much easier on many levels to live in an echo chamber, which seems to keep sending us further away from the middle and less able to compromise. Without that compromise, we lose empathy, and without empathy, we hurt each other.”

- Anonymous Parent

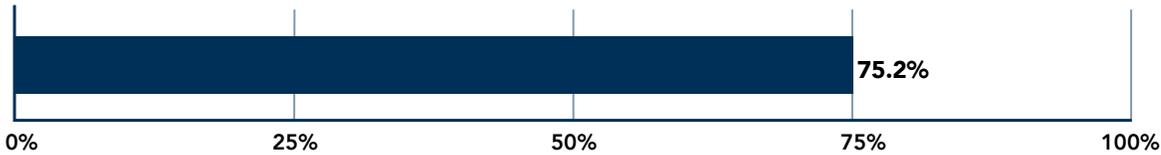


ACCESS TO CARE AND WORKFORCE

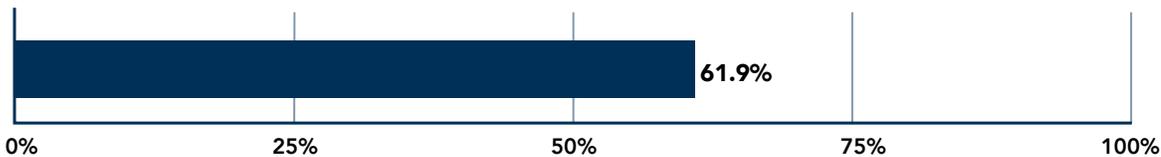
86.8% of service providers surveyed said **DEMAND** for mental and behavioral health services from their organization has **INCREASED** in the past 12 months.



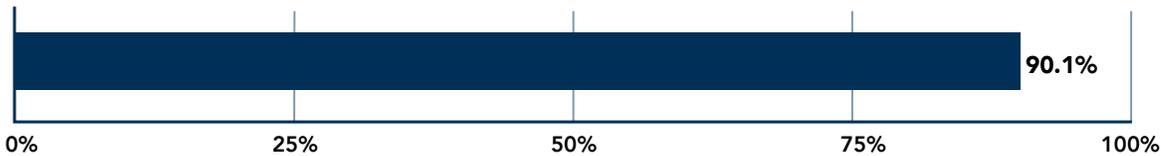
75.2% of service providers surveyed said **WAIT TIMES** to receive mental and behavioral health services from their organization have **INCREASED** in the past 12 months.



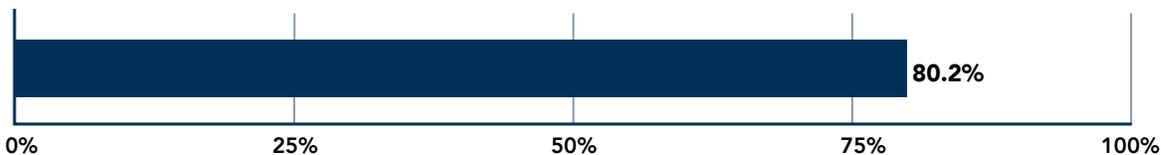
61.9% of service providers surveyed said the average **WAIT PERIOD** for a client to receive mental and behavioral health services (excluding ER services) from their organization was **ONE MONTH OR MORE**.



90.1% of service providers surveyed felt there are **INADEQUATE SERVICES AND SUPPORT** in their community for **YOUTH** experiencing mental and behavioral health challenges.



80.2% of service providers surveyed felt there are **INADEQUATE SERVICES AND SUPPORT** in their community for **ADULTS** experiencing mental and behavioral health challenges.

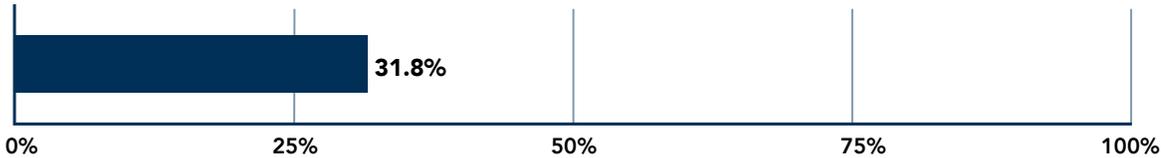


Summary of Parent Survey

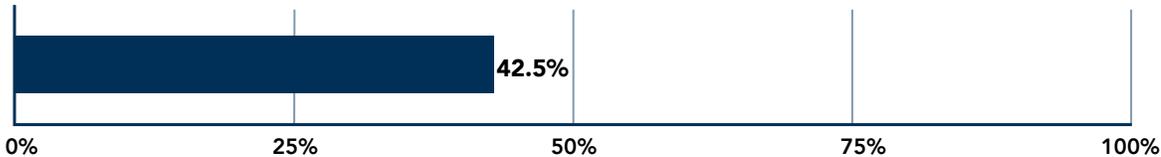


MENTAL HEALTH

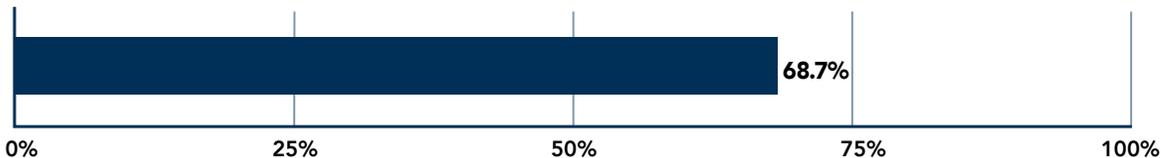
31.8% of parents surveyed said the mental health of the **YOUTH** in their home has **DECLINED** in the past 12 months.



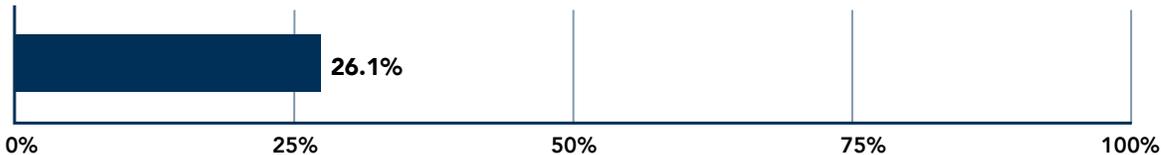
42.5% of parents surveyed said **THEIR OWN** mental health has **DECLINED** in the past 12 months.



68.7% of parents surveyed felt there are **INADEQUATE SERVICES AND SUPPORT** in their community for **YOUTH** experiencing mental and behavioral health challenges.



26.1% of **PARENTS** surveyed said they have **DECLINED** in feeling optimistic about the future in the past 12 months.



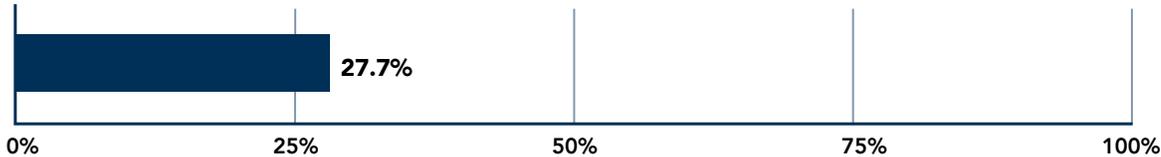
The past few years have been overwhelming. Prior to the pandemic, we were living at breakneck speeds, expecting more out of our youth and ourselves than bodies can sustainably give. We took a break during lockdown, and as soon as we were able, we went back to business as usual — except nothing is usual. Now, we have all the activities as before with even fewer healthy boundaries to disconnect from work and school.

- Anonymous Parent

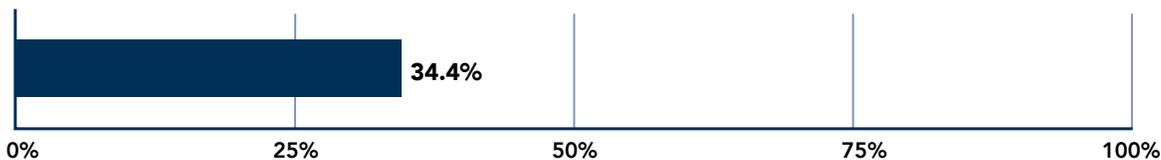


STRESS

27.7% of parents surveyed said the **YOUTH** in their home have **DECLINED** in their ability to cope with stress in the past 12 months.

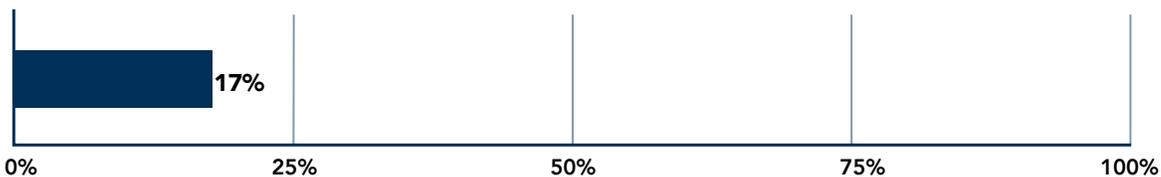


34.4% of **PARENTS** surveyed said they have **DECLINED** in their ability to cope with stress in the past 12 months.




ABUSE AND VIOLENCE

17% of **PARENTS** surveyed said the frequency of youth in their home experiencing harassment or bullying (including phone, text, and online) has **INCREASED** in the past 12 months.



If bullying or bad behavior is happening in school, it's apparent that schools and their leaders do not have the authority to meaningfully change or help the offending student. A lack of discipline leads to classes running amok, with the teachers unable to follow through with consequences. Every kid gets a second, third, 19th chance, which gives them feelings of having no responsibility for their actions.

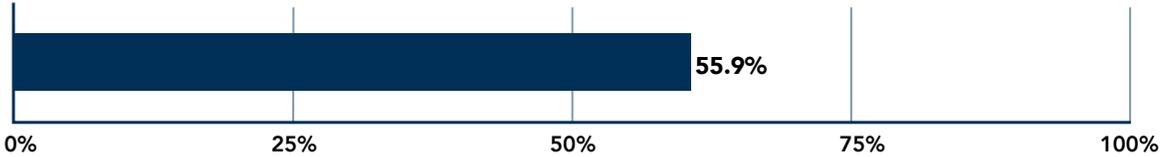
- Anonymous Parent

Parent Survey

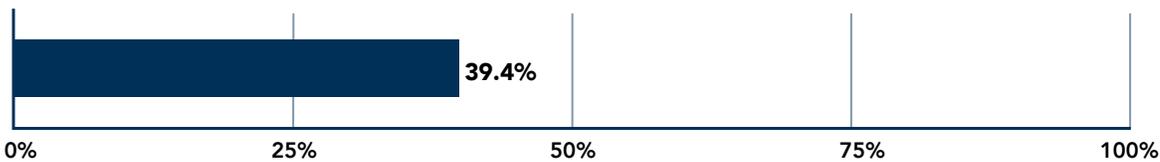


DEVICE AND SOCIAL MEDIA USE

55.9% of parents surveyed said the **YOUTH** in their home have **DECLINED** in the healthy use of electronic devices and social media in the past 12 months.

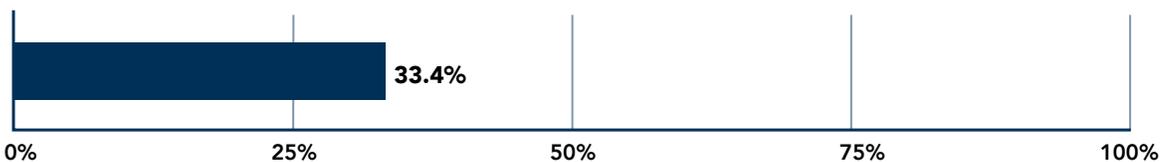


39.4% of **PARENTS** surveyed said they have **DECLINED** in the healthy use of electronic devices and social media in the past 12 months.

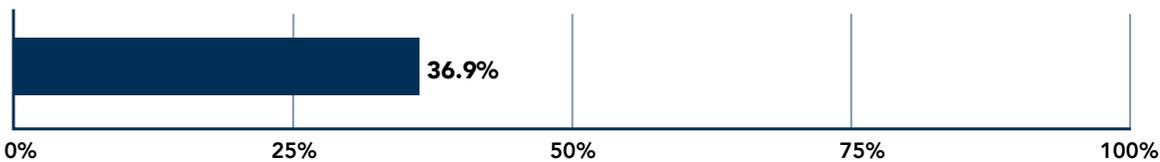


EXERCISE

33.4% of parents surveyed said the **YOUTH** in their home have **DECLINED** in getting adequate exercise or physical activity (not too little or too much) in the past 12 months.



36.9% of **PARENTS** surveyed said they have **DECLINED** in maintaining a consistent weight in the past 12 months.

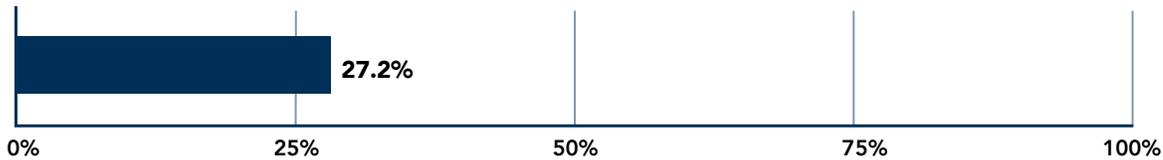


In 2021, only about 30% of North Dakota students were physically active at least 60 minutes per day.

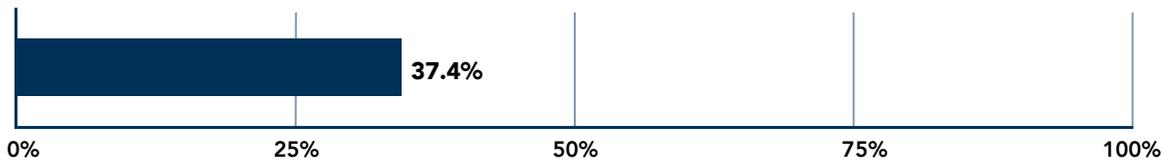
Centers for Disease Control and Prevention



27.2% of **PARENTS** surveyed said the **YOUTH** in their home have **DECLINED** in getting adequate sleep (not too little or too much) in the past 12 months.



37.4% of **PARENTS** surveyed said they have **DECLINED** in getting adequate sleep (not too little or too much) in the past 12 months.



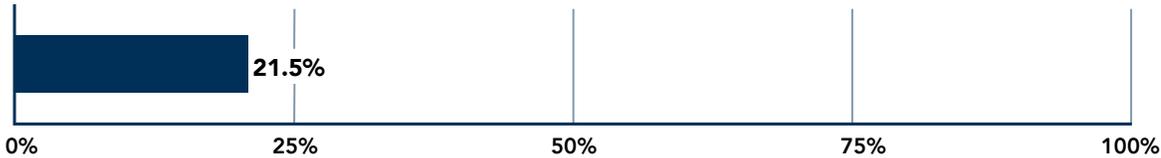
Young adults (under the age of 30) **struggle more with sleep and stress**, and nearly seven in 10 say sleep has a direct impact on their mood.

Gallup

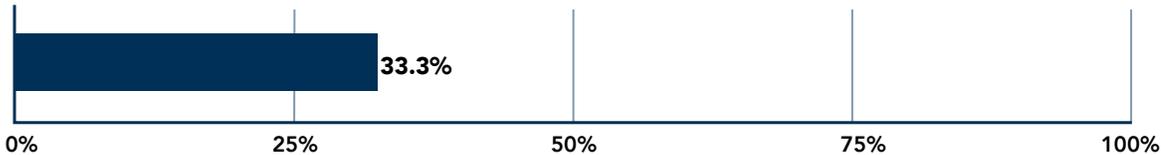


SOCIAL INTERACTION

21.5% of parents surveyed said the **YOUTH** in their home have **DECLINED** in getting enough face-to-face social interaction with peers in the past 12 months.



33.3% of **PARENTS** surveyed said they have **DECLINED** in getting enough face-to-face social interaction with peers in the past 12 months.



I think we need to make 'middle of the road' a more acceptable place to be. We can play a sport without needing to be on every elite travel team. We can enjoy reading without being in a book club and meeting reading goals. Some people are natural overachievers and thrive on that; that's great. Many people should feel proud and ENJOY doing something they love without feeling pressured to be more.

- Anonymous Parent

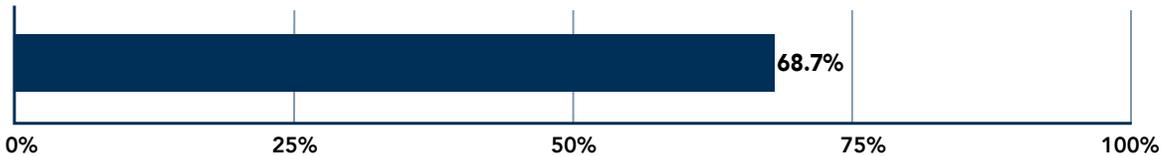
About **60% of youth with depression** (2.1 million kids) **will not** receive any mental health **treatment**.

Mental Health America

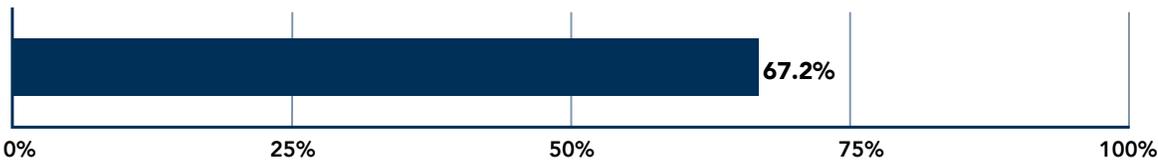


ACCESS TO CARE AND WORKFORCE

68.7% of parents surveyed felt there are **INADEQUATE SERVICES AND SUPPORT** in their community for **YOUTH** experiencing mental and behavioral health challenges.



67.2% of parents surveyed felt there are **INADEQUATE SERVICES AND SUPPORT** in their community for **ADULTS** experiencing mental and behavioral health challenges.



North Dakota currently ranks 50th out of 52 states (includes Washington, D.C., and national rate) for private insurance that covers mental or emotional problems for kids (affects about 5,000 kids total).

Mental Health America

What was it that prevented you or the youth in your home from getting the services or support needed? (could choose more than one)

n/a: 30%

Unable to get in to services/support, no openings: 27%

Unable to take time off from work: 12%

Inability to pay for services/support, insurance wouldn't cover: 12%

Not aware of where/how to get services/support: 10%

Virtual services/support inadequate and/or not as helpful: 9%

Transportation: < 1%

Summary of Open-Ended Responses

(Parents and Providers)

What are the **TOP CHALLENGES** currently facing your organization as it relates to providing mental and behavioral health services, including any barriers to accessing care?*

**This question was asked to ONLY service providers.*

Access to Care and Workforce

- Patient volume substantially increased
- Lack of providers/services available
- Administrative staff shortages
- All staff retention
- Recruitment barriers: Complexity of credentialing, licensing, reciprocity
- Provider burnout
- Excessive wait times
- Lack of telehealth options and deficiencies in delivery
- Lack of coordination of care
- Lack of mental health screenings
- Transportation/rural access to care
- Access to ER but very little follow up care available
- Stigma of seeking out services
- Cultural barriers (language)
- Restricted service hours
- Lack of substance use disorder (SUD) services
- Providers want flexible schedules

Funding and Reimbursement

- Insufficient reimbursement rates – private insurers
- Insufficient reimbursement rates – Medicaid
- Private practices not accepting Medicaid
- Unaffordability/lack of insurance coverage/high deductibles
- Insurance regulations
- Schools unable to bill Medicaid
- Mental health services reimbursement rates differ between insurance companies and states

Collaboration and Coordination of Care

- Schools aren't designed to be "therapy centers" & care coordinators
- Lack of information/awareness about where to refer people in need of help

In your opinion, what are the **ROOT CAUSES** of the declining mental health status of adults and kids?*

**This question was asked to both service providers and parents.*

Parents, Guardians, and Family Structure

- Unhealthy home environment
- Lack of parental involvement and engagement
- Parents' mental health struggles spill over to kids
- Parents not in a 'healthy state' to help their children get services needed
- Breakdown of the nuclear family - parents, guardians, family unit
- Busy parents not being able to give kids the time and energy they need
- Family systems are dissolving, natural support systems are no longer in place, whether it is at the family level, neighborhood level, or community level
- Cultural shift toward godlessness, lack of spirituality and faith in the home
- Untreated childhood trauma
- Not having a deep connection with community
- Decline in parental responsibility for their own kids
- Lack of learned coping mechanisms
- Attempting to fix adults instead of raise children up the adequate way

Device and Social Media Use

- Social media/device over-use
- Too much screen time = poor interpersonal communication & conflict resolution skills
- Bullying and the inability to escape it
- Lack of youth self-confidence
- Effect of pop culture and mass media (culture of disrespect)
- Overstimulation – too much to do and not enough hours in the day
- Isolating behaviors – lack of face-to-face interaction and connection, loneliness

Diet, Exercise, and Sleep

- Lack of proper nutrition, sleep, and exercise
- Not enough time spent in nature

Economy and State of the World

- Access to too much information they can't process appropriately
- Little agreement on reality/facts within mass media and about politics and culture
- Financial hardship, inflation, war
- Residual effects of COVID
- Free-floating anxiety caused by general state of the world
- Fear-based media coverage 24/7
- Significant increase in hard drug use

Community

- Reduced opportunities to participate in meaningful community activities
- Lack of discipline in school, courts, & home
- Lack of love for people
- Systems that enable instead of empowering adults to improve themselves and the lives of their families

Please identify some **POTENTIAL SOLUTIONS** to the challenges.*

**This question was asked to both service providers and parents.*

Device and Social Media Use

- Prioritize protecting kids on social media
- Limit screen time
- Remove phones from the schools and workplace meetings
- Reduce device use at home and school
- Create and distribute educational curriculum on the dangers of excessive social media and screen time to parents, churches, schools, businesses, etc.

Access to Care and Workforce

- Improve and redesign reimbursement system for mental healthcare
- Reimbursement for mental health care coordination and licensed behavior analysts
- Revamp ND mental health billing system to include children & adult case managers
- Consider reimbursement for in-school therapy services through Medicaid and private payers
- Build fundraising systems and capabilities for mental health providers
- Recruitment and retention grants for government & nonprofit providers
- Build long-term workforce pipeline strategy
- Training to help employees with early identification and resource availability for co-workers
- Scholarships/loan forgiveness for behavioral healthcare workforce
- Develop intermediary care between ER and out-of-home placement
- Transportation options for kids to attend therapy after school
- Consider innovative approaches and models to the delivery of mental health services
- Decreased COVID restriction requirements in healthcare field
- Train pastors and clergy to better handle front-end problems

Parents, Guardians, and Family Structure

- Earlier intervention at home by the parents
- Re-introduce concept of responsibility & duty to the family and one another via parenting classes
- Education on the dangers of social media and benefits of in-person social interactions
- More quality, present family time
- Adults setting healthy example of device use
- Making time for gratitude and reflection

Community

- Mentorship programs for youth and adults
- Work to connect people to purpose and meaning via volunteer and service opportunities
- Bring people together more regularly face-to-face
- Enlist churches and civic organizations to foster togetherness
- Normalize preventive mental health services

Diet, Exercise, and Sleep

- Create an environment to encourage increased physical activity and better diet
- Prioritize rest as being a necessity to a healthy life
- Consider less extracurricular involvement for overscheduled individuals

Schools

- Communities determining whether schools should be "therapy centers"
- More community partnerships with schools and mental healthcare providers
- Streamlined referral system within the schools
- Fund transportation for students in need to get to mental health services

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Prairie St. John's
Rape & Abuse Crisis Center
Red River Children's Advocacy Center
Sanford Ambulance
Sanford Health
Solutions Behavioral Healthcare Professionals
Soul Solutions Recovery Center
Southeast Human Service Center
St. Sophie's Psychiatric Center
The Village Family Service Center
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Valley Christian Counseling Center